

Implementation of memory specificity training (MeST) in routine clinical practices in Belgium using a web-based self-directed training protocol

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Registration date 11/06/2019	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 29/01/2020	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Accumulating evidence shows that a cognitive factor associated with a worsening of depressive symptoms amongst people with and without diagnoses of depression – reduced Autobiographical Memory (rAMS) – can be ameliorated by a group cognitive training protocol referred to as Memory Specificity Training (MeST). After assessing transportability (<https://bmcp psychology.biomedcentral.com/articles/10.1186/s40359-019-0279-y>) the subsequent study aims to assess implementation of MeST using a self-directed web-based training protocol.

Who can participate?

Adult people who are currently being treated in the participating Routine Clinical Practices, and who show reduced autobiographical memory specificity as assessed by the Autobiographical Memory Test. All clinical practices in Belgium were welcome to participate.

What does the study involve?

The study involves the group training Memory Specificity Training. In this training, people train in getting better at retrieving personal memories and retrieving more details.

What are the possible benefits and risks of participating?

Participating in this study might impact the cognitive vulnerability factor, which can have a concomitant effect on depressive symptoms and related processes as rumination. No side effects or risks are known. Retrieving unpleasant autobiographical memories and noticing that people lack this skill might be experienced as inconvenient.

Where is the study run from?

This study is run from the KU Leuven. Routine Clinical Settings in Flanders can participate after which local clinicians are trained using the online training protocol so that MeST can be offered to patients as a part of the standard routine care, after adapting MeST.

When is the study starting and how long is it expected to run for?
The study runs from 1/4/2016 to 30/12/2018.

Who is funding the study?
The study is funded by the KU Leuven Program Funding Grant PF/10/005.

Who is the main contact?
Kris Martens
kris.martens@kuleuven.be

Contact information

Type(s)

Public

Contact name

Mr Kris Martens

ORCID ID

<https://orcid.org/0000-0002-8162-4979>

Contact details

Tiensestraat 102 - box 3712
Leuven
Belgium
3000
0032486911758
kris.martens@kuleuven.be

Additional identifiers

Protocol serial number

G 2014 12 113 (extension)

Study information

Scientific Title

Implementing memory specificity training in routine clinical practices using a web-based self-directed training protocol: an uncontrolled implementation study assessing effectiveness, fidelity and feasibility

Study objectives

The use of a web-based self-directed training protocol will lead to the correct implementation of Memory Specificity Training as a part of treatment as usual in clinical practices in Belgium. Three aspects of implementation were assessed; effectiveness defined as a significant change from pre- to post-intervention in memory specificity; fidelity to the protocol by trainers; feasibility as attitudes of stakeholders throughout the implementation process and by the patients post-intervention.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 18/12/2014, Sociaal-Maatschappelijke Ethische Commissie (SMEC) (Social and Societal Ethics Committee of the University of Leuven Oude Markt 13, 3000 Leuven, Belgium; smec@kuleuven.be), ref. G 2014 12 113. Extension approved on 10/02/2016.

Study design

Multicentre non-randomised interventional

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Overgeneral autobiographical memory

Interventions

Memory Specificity Training, as implemented by the setting itself after using our web-based self-directed training protocol.

A group training protocol called Memory Specificity Training. All participants received the intervention.

Session 1 of MeST focuses on psycho-education regarding memory problems linked to depression. Three main memory problems are described: reduced levels of concentration, a bias in retrieving mainly negative memories and rAMS. It is explained to participants, within a group setting, that only rAMS can be considered as a risk factor for depression and that training can remediate rAMS to some extent. After this psycho-education, two specificity exercises are conducted within the group. Exercises consist of a presented cue word after which participants are encouraged to retrieve a specific memory and as many details as possible. After each participant writes down their memory, participants help each other with becoming more specific by asking for more details. The session ends by introducing a homework assignment: to re-read the psycho-education, to write down one specific memory for each of ten (positive & neutral) words and to write down one memory of the day at the end of each day.

In Session 2, after briefly repeating the psycho-education, homework assignments are discussed. Next, some exercises are conducted together within the group wherein participants need to retrieve two memories for one cue word. Homework assignments after this session consist of writing down two memories for each of ten (neutral & positive) cue words and writing down two memories of the day each day.

Session 3 has a similar structure but the exercises now offer word pairs of two opposing valences (e.g. skilful and clumsy). The homework assignment contains two memories for each of ten words (neutral, positive but also negative) and writing down two memories of the day each day. In the fourth and last session, after evaluating the homework assignments, a psycho-education on the STOP-model is given. The aim here is that participants learn to notice when they are overgeneralizing by: signalling to themselves when they are thinking at an overgeneral level; trying to think back to the specific event that prompted the overgeneral thinking; to

obtain and generate specific details about that event as much as possible; and, as a last step, try to find an opposite example. After this, some more exercises with opposing cue words are conducted.

Intervention Type

Other

Primary outcome(s)

The ability to retrieve specific autobiographical memories was measured using the Autobiographical Memory Test (AMT) pre-intervention and post-intervention.

Key secondary outcome(s)

Depressive symptoms were assessed pre- and post-intervention using questionnaires chosen by the practitioners such as the Patient Health Questionnaire 9 (PHQ-9) and the Beck Depression Inventory II (BDI-II).

Completion date

30/12/2018

Eligibility**Key inclusion criteria**

1. Overgeneral autobiographical memory, as assessed with the Autobiographical memory test
2. Aged 18 years or older.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

30

Key exclusion criteria

none

Date of first enrolment

01/04/2016

Date of final enrolment

30/12/2018

Locations

Countries of recruitment

Belgium

Study participating centre

Alexianen Zorggroep Tienen

Liefdestraat 10

Tienen

Belgium

3300

Study participating centre

Sint Annendael Grauwzusters

Vestenstraat 1

Diest

Belgium

3290

Study participating centre

Karus Melle

Caritasstraat 76

Melle

Belgium

9090

Study participating centre

Mariaziekenhuis Noord-Limburg

Maesensveld 1

Pelt

Belgium

3900

Study participating centre

Private Practice - Meeusen

Not displayed due to privacy

Vorselaar

Belgium

2290

Sponsor information

Organisation

Katholieke Universiteit Leuven

ROR

<https://ror.org/05f950310>

Funder(s)

Funder type

University/education

Funder Name

KU Leuven Program Funding Grant PF/10/005.

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and analysed during the current study will be available upon request from Kris Martens (kris.martens@kuleuven.be). Individual de-identified participant data (IPD) will be available from 6/2019 on and will be available to other researchers upon request. Informed consent from participants was obtained. The datasets per setting and analyses of pre-post differences will be included in subsequent results publication.

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results		29/01/2020	29/01/2020	No	No