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Cognitive behaviour therapy versus self-examination therapy with depressive symptomatology

Submission date
28/12/2006

Recruitment status
No longer recruiting

Registration date
28/12/2006

Overall study status
Completed

Last Edited
21/04/2011

Condition category
Mental and Behavioural Disorders

[_] Prospectively registered
[X] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
NTR804

Study information

Scientific Title

Acronym
DOC

Study objectives
Cognitive behaviour therapy and self-examination therapy are both more effective in reducing depressive complaints than a waiting list control group.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Received from the local ethics committee (Medisch Ethische Toetingscommissie of the VUMC) on the 7th September 2007 (ref: 2006/168).

Primary study design
Interventional

Study design
Randomised, parallel group, controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Depressive symptoms

Interventions
The cognitive-behavioural intervention is called Color your life (Kleur je leven). This intervention consists of eight lessons (one lesson a week). Four weeks later, the ninth lesson takes place. The intervention focuses on increasing pleasurable activities, increasing social skills and decreasing dysfunctional cognitions.

Self examination therapy is based on problem solving therapy. We use the Dutch version, called 'Alles onder controle'. This intervention takes five weeks. During this intervention participants determine what matters to them, think less negatively about things that do not matter to them, invest their energy in things that are important to them (by using problem-solving strategies) and accept situations they cannot change.

Both interventions are computer-based.

Intervention Type
Other

Phase
Not Specified

Primary outcome(s)
Depressive symptom level will be measured with the Center for Epidemiological Studies Depression Scale (CES-D).

Key secondary outcome(s)
1. Quality of life is measured by the Euroqol Questionnaire
2. Anxiety symptoms are measured by the anxiety subscale of the Hospital Anxiety and Depression Scale (HADS)
3. Dysfunctional cognitions are measured by the Dysfunctional Attitude Scale (DAS)
4. Worrying is measured by the Penn State Worry Questionnaire (PSWQ)
5. Problem solving skills are measured by the Social Problem Solving Skills-Revised (SPSI-R)
6. Mastery is measured by the Mastery Scale
7. Absence at work and use of healthcare are measured by the Trimbos/iMTA questionnaire for Costs associated with Psychiatric Illness (TIC-P)

Completion date
01/10/2007

Eligibility

Key inclusion criteria
Score of 16 or higher on the Center for Epidemiological Studies Depression scale (CES-D).

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Adult

Sex
All

Key exclusion criteria
Does not comply with the above inclusion criteria

Date of first enrolment
01/10/2006

Date of final enrolment
01/10/2007

Locations

Countries of recruitment
Netherlands

Study participating centre

VU University Medical Center, FPP
Amsterdam
Netherlands
1081 BT

Sponsor information

Organisation
Vrije University Medical Centre (VUMC) (The Netherlands)

ROR
https://ror.org/00q6h8f30

Funder(s)

Funder type
Hospital/treatment centre

Funder Name
Vrije University Medical Centre (VUMC) (The Netherlands)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	19/12/2010		Yes	No
Protocol article	protocol	19/12/2007		Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes