# Short-term, manualized schema-focused group therapy within primary care for patients suffering from personality disorders at a high level of functioning

No registrations found.

**Ethical review** Not applicable **Status** Recruiting

**Health condition type** 

Study type Interventional

# **Summary**

#### ID

NL-OMON20787

#### Source

Nationaal Trial Register

#### **Brief title**

**TBA** 

#### **Health condition**

- Short-term group schema therapy
- Personality disorders
- Multiple Baseline Single Case Experimental design
- High level of functioning
- Primary care

## **Sponsors and support**

**Primary sponsor:** Vincent van Gogh Institute

Source(s) of monetary or material Support: Vincent van Gogh Institute

#### Intervention

#### **Outcome measures**

#### **Primary outcome**

Personality disorder status as measured bij the Structured Clinical Interview for DSM-5 Personality Disorders (SCID-5-P). Primary process outcome will be level of personality functioning, as measured by the Level of Personality Functioning Scale - Brief Form 2.0 (LPFS-BF 2.0)

#### **Secondary outcome**

Schemas and modes, as measured by the Young Schema Questionnaire - Short Form (YSQ-SF) and the Schema Mode Inventory (SMI); and general symptoms as measured by the Brief Symptom Inventory (BSI)

# **Study description**

#### **Background summary**

Patients with a higher level of personality functioning are expected to have had less traumatic experiences and fewer attachment problems compared to patients with lower levels of personality functioning. This may also influence the extent to which basic needs have been met. This in turn leads them to have stronger healthy modes, and less strong maladaptive modes. It is hypothesized that in a primary health care population, a more condensed form of schema therapy (ST) might be sufficient for an effective reduction of personality problems. This study will investigate whether short-term, manualized group ST was associated with changes in personality pathology, a reduction in personality disorder (PD) severity (and an increase in level of functioning), general symptoms and schema and mode severity. A non-concurrent multiple baseline case study design is being used. By measuring change in experienced symptoms over time, we will be investigating whether there is a causal relation between intervention and treatment outcome.

### **Study objective**

It is hypothesized that in a primary health care population, a more condensed form of schema therapy (ST) might be sufficient for an effective reduction of personality problems.

#### Study design

Phase 1 Baseline 4-10 weeks

Phase 2 Active intervention: Re-focus: 16 weeks

Phase 3 Posttreatment: 4 weeks

Phase 4 Follow up: 3 months after treatment has ended.

#### Intervention

The treatment is a short-term, manualized form of group ST for treating patients with a personality disorder and higher level of personality functioning. It is a closed therapy group consisting of sixteen, 150-min weekly sessions. The focus will be on decreasing the impact of early maladaptive schemas and replacing negative coping responses and schema modes with healthier ones, through experiential and cognitive strategies.

## **Contacts**

#### **Public**

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#### Scientific

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# **Eligibility criteria**

#### **Inclusion criteria**

- (1) age between 18 and 65(age range of patients receiving care at Centiv)
- (2) current primary diagnosis of a personality disorder, assessed using the structured clinical interview for DSM-5 personality disorders (SCID-5-PD)
- (3) T-scores on the Level of Personality Functioning Scale-Brief Form 2.0 (LPFS-BF 2.0) will be between 30 and 59 (low and average).
- (4) Written informed consent

Assessments will be carried out by an experienced psychologist.

## **Exclusion criteria**

- (1) patients who don't sufficiently speak the Dutch language
- (2) patients who tried to commit suicide within the last three months, or are currently suicidal
- (3) patients who are currently psychotic or experiencing a (hypo)mane episode
  - 3 Short-term, manualized schema-focused group therapy within primary care for pati ... 7-06-2025

- (4) patients who have been admitted to hospital due to self-mutilation in the last three months
- (5) patients who are diagnosed with complex dissociative disorders.

# Study design

## **Design**

Study type: Interventional

Intervention model: Other

Allocation: Non controlled trial

Control: N/A, unknown

#### Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 02-01-2022

Enrollment: 24

Type: Anticipated

## **IPD** sharing statement

Plan to share IPD: Undecided

**Plan description**Not applicable

## **Ethics review**

Not applicable

Application type: Not applicable

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

# Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

NTR-new NL9870

Other Will be: METC azM/UM: METC76058

# **Study results**

## **Summary results**

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