

# Prediction models of the duration and recurrence of sickness absence due to common mental disorders

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The study consists of \*three parts1. Predictionmodel of the duration of sick leave due to CMD's2. Predictionmodel for recurrences due to CMD's3. Qualitative research of experiences from workers with CMD's and working ad 1 How is the...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Adjustment disorders (incl subtypes)
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON37813

### Source

ToetsingOnline

### Brief title

Prediction models for common mental disorders

### Condition

- Adjustment disorders (incl subtypes)

### Synonym

common mental disorders: mental health problems

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Universitair Medisch Centrum Groningen

**Source(s) of monetary or material Support:** 365

## Intervention

**Keyword:** Common Mental Disorders, Occupational Healthcare, Prognostic Prediction Models

## Outcome measures

### Primary outcome

1. Duration of absence to complete return to work .
2. a) recurrence (yes/no) of sickleave due to mental disorders  
b) time to recurrence of sickleave due to mental disorders

### Secondary outcome

na.

## Study description

### Background summary

Mental disorders are an important cause for sick leave in the Dutch workforce. Sick leave due to mental disorders is mainly caused by common mental disorders. Mostly disorders with aspecific stressrelated complaints or disorders with mild or moderate psychiatric complaints such as depressive and anxiety complaints

The incidence of sickleave due to mental disorders is 2% with an average duration of 87 days (Koopmans 2007). employees with a first absence due to CMDs 19% had a recurrence, 90% of recurrences occurred within 3 years with an median between the 8 and 14 months.

In the literature little is known about the factors associated with the duration of the sickleave and the recurrence of sick leave. Early identification of employees with a high risk on prolonged sick leave or recurrences, is important to target interventions and treatment to prevent prolonged sick leave and recurrences. All the more because Koopmans showed that 40-50% of the employees with frequent and with long-term absence lost their jobs because of dismissal or disabilitypensioning

### Study objective

The study consists of \*three parts

1. Predictionmodel of the duration of sick leave due to CMD's
2. Predictionmodel for recurrences due to CMD's
3. Qualitative research of experiences from workers with CMD's and working

ad 1 How is the performance of the prediction model developed by Nieuwenhuijsen (2006) in predicting the duration of sickness absence in the heterogeneous population of employees working for companies contracted by 365 Is the performance of the prediction model to improve by adding other predictors

ad 2

Investigate which factors are associated with recurrences due to CMD's. The aim is to develop a diagnostic tool for occupational physicians to recognize employees at risk of recurrent sick leave due to common mental disorders so that interventions can be targeted at employees at risk. .

ad 3. Obtain insight how employees experience having CMD's and working

## **Study design**

Prospective study with a maximum follow-up of 3 years from the time of calling in sick. If in the first consultation with the occupational physician the diagnoses of sickness absence due to psychological complaints is made:

1. The company doctor asks the employee if he/she wants to join the study and explains.
2. With permission, the details of the employee are sent by e-mail to the investigator.
3. The investigator contacts the employee by mail and further explains the study, verifies consent and sends the questionnaire to the employee
4. the company doctor provides "care as usual"
5. Sickness absence data of participating employees will be followed for a maximum of three years.
6. Upon recovery, the employee will receive the questionnaire for the second part of the study.

\* With focus groups there is a change of the research design starting at point 5:

5. Participating employees will be informed and invited to the focus groups where the voluntariness of participation is emphasized again and also the guarantee of anonymity in the processing and reporting of the focus group data.
6. the individual workers participate in a focus group for up to 2 hours. The following core questions are compiled:
  - What is in your opinion characteristic to performing well in your work.
  - What is decisive to performing well in your work
  - How is the interaction of performing well in your work by mental health complaints
  - What does it mean for you that performing well on your work is influenced by

mental health complaints?

- Everything that is discussed, what was the most important factor for performing well in your work.

### **Study burden and risks**

The study consists of completing two questionnaires. The time spent for each questionnaire is estimated to be 20-30 minutes. The time spent for the overall study is therefore 40-60 minutes.

\* The time spent for the focusgroupresearch is the time of travelling to the location of the focusgroup and the participation in the focusgroup up to a maximum of 2 hours

## **Contacts**

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## **Trial sites**

### **Listed location countries**

Netherlands

## **Eligibility criteria**

### **Age**

Adults (18-64 years)

Elderly (65 years and older)

## Inclusion criteria

1. sick leave with common mental disorders: stressrelated symptoms, depression or an anxiety disorder
2. employees with a period of sickness absence of at least two weeks and not longer than 6 weeks, who have not fully resumed their work.

## Exclusion criteria

Employees with severe psychiatric disorders DSM IV classification (for example schizophrenia) , personality disorders, alcohol and drugsabuse, previous treatment, diagnosed or medication

## Study design

### Design

**Study type:** Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

### Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 15-06-2012

Enrollment: 2500

Type: Actual

## Ethics review

Approved WMO

Date: 16-03-2012

Application type: First submission

Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

Approved WMO  
Date: 01-10-2012  
Application type: Amendment  
Review commission: METC Universitair Medisch Centrum Groningen (Groningen)

## 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
CCMO	NL37744.042.11