Trial Illness Management and Recovery (IMR)

Effects of IMR on patients with severe mental illness

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This study aims at demonstrating the effectiveness of IMR on the illness management skills and recovery of the patients. The added value for participants on different areas of life is examined. The research can contribute to answering the question...

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON20008

Bron
Nationaal Trial Register

Verkorte titel
Trial IMR

Aandoening

Serious and Persistent Psychiatric Illness / Chronic Psychiatric Problems
(Ernstige en Langdurige Psychiatrische Problematiek/ Chronische psychiatrische problematiek)

Ondersteuning

Primaire sponsor: Parnassia Groep
Overige ondersteuning: Parnassia Groep

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Primary outcome measure is the score on the self-rated Illness management and recovery scale (Mueser et al. 2004)

Toelichting onderzoek

Achtergrond van het onderzoek

Illness Management and Recovery (IMR) provides a structured psychosocial program which aims to contribute to manage the disabling effects of severe mental illnesses like schizophrenia and bipolar disorders.
The design of this study is a randomised multi-centre, single blinded, clinical trial of IMR compared with treatment as usual for 200 outpatients with a severe and persistent mental illness (SMI) getting care in two mental health centres.

The hypotheses are that "IMR + CAU", (IMR offered in group format), compared to “CAU only” leads to:
1. Better Illness Management:
2. Better recovery:
3. Improved cost-effectiveness.

Doel van het onderzoek

This study aims at demonstrating the effectiveness of IMR on the illness management skills and recovery of the patients.
The added value for participants on different areas of life is examined. The research can contribute to answering the question whether IMR should be a recommended intervention .

The hypotheses are that "IMR + CAU", (IMR offered in group format), compared to “CAU only” leads to:
1. Better Illness Management:
(Better scores on IMR-scales, less symptoms and relapses, better medication adherence, less alcohol & drugs use, more insight into their own problems, more social and coping skills, more social support).
2. Better recovery:
(Better general recovery, less self-perceived stigma, more self-esteem, achievement of more meaningful goals, more quality of life, more satisfaction, and better social functioning).
3. Improved cost-effectiveness.

Onderzoeksopzet

We have planned three moments of measurement: before randomisation and 12 months and 18 months after randomisation.

Onderzoeksproduct en/of interventie

IMR can be described as a structured training course which includes eleven modules, practitioner guides and handouts for participants. In the participating institutes the IMR-training is given in a group format with weekly sessions for about one year.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

- Patients with serious and persistent psychiatric illnesses. Most of them will be patients who have a psychotic disorder, schizoaffective disorders or bipolar disorders with or without comorbid disorders (such as substance abuse and personality disorders)
- The patient is treated on an outpatient basis
- Written informed consent

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

- Having done an IMR-training
- Organic brain syndrome.
- Incompetence regarding the giving of informed consent.
- Patients with severe cognitive impairments who are unable to follow the training
- Insufficient knowledge of the Dutch language (they can not participate in the group)

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blindering:	Enkelblind
Controle:	Actieve controle groep

Deelname

Nederland

Status:	Werving gestopt
(Verwachte) startdatum:	25-10-2012
Aantal proefpersonen:	200
Type:	Werkelijke startdatum

Voornemen beschikbaar stellen Individuele Patiënten Data (IPD)

Wordt de data na het onderzoek gedeeld: Nog niet bepaald

Ethische beoordeling

Positief advies

Datum:	13-01-2015
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 39268
Bron: ToetsingOnline
Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL4931
NTR-old	NTR5033
CCMO	NL38605.078.12
OMON	NL-OMON39268

Resultaten

Samenvatting resultaten
- Roosenschoon BJ., Mulder CL., Deen, ML and Weeghel J. van (2016), Effectiveness of illness management and recovery (IMR) in the Netherlands: a randomised clinical trial; study protocol, BMC Psychiatry 16:73 DOI 10.1186/s12888-016-0774-0
- Roosenschoon BJ., Weeghel J. van, Bogaards M., Deen, ML and Mulder CL. (2016), Illness Management & Recovery (IMR) in the Netherlands; a naturalistic pilot study to explore the feasibility of a randomized controlled trial, BMC Psychiatry 16:391 DOI 10.1186/s12888-016-1096-y
- Roosenschoon BJ, Kamperman AM, Deen ML, Weeghel JV, Mulder CL. (2019). Determinants of clinical, functional and personal recovery for people with schizophrenia and other severe mental illnesses: a cross-sectional analysis. PLoS ONE [Electronic Resource]. 14(9):e0222378,

https://dx.doi.org/10.1371/journal.pone.0222378