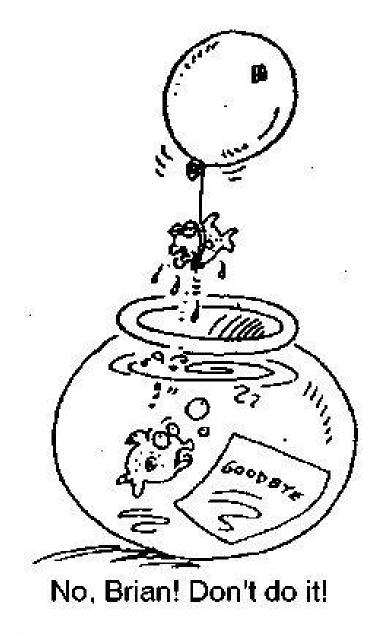


Reducing suicidal ideation Design of a randomised trial examining the effectiveness of a web-based self-help intervention

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Overview

- Background: why a website for suicidal ideation?
- Goals
- Methods
- Conclusions

Suicide

- Suicidal ideation and suicide attempts are highly prevalent (The Netherlands):
 - 11% ever considered suïcide (3% last year)
 - 3% ever attempted suïcide (1% last year)
- Transition from suicidal ideation to plans is highly impulsive
- Should be targeted immediately after the first ever suicidal ideation
- Suicidal ideation is a long term vulnerability

Suicide and mental health care

- Often no contact with health care
 - Shame
 - Waiting for spontaneous recovery
 - Feel they do not need help
 - Problems cannot be solved
 - Treatments are considered to be ineffective
- Some users of mental health care services do not report suicidal tendencies
- After treatment (successfully or not), patients relapse into suicidal ideation

Self-help for suicidal people

- Few studies on self-help for suicidal people
- Not based on research
- No studies on effectiveness of self-help
- No studies on internet-based interventions

Internet-based self-help

- Many suicidal people do not receive adequate help
- Suicidal persons prefer visiting websites or chatrooms over seeing a doctor
- Many existing websites offer information on suicide, but no intervention
- Negative websites
- Internet may reach large groups of suicidal people

Design

- Randomised controlled study with two arms:
 - Internet-guided CBT for suicidal ideation
 - Information only
- Pre-test, post-test, 3 months, 12 months follow-up

Patients

- Recruitment: banners on websites and advertisements in newspapers
- Inclusion criteria
 - Suicidal ideation
 - Wish to decrease suicidal ideation
 - 18 or older

Intervention

- Course of 8 modules (1 per week)
- CBT and future oriented problem solving approach: Identify suicidogenic thoughts and challenge them
- Automated feedback, no personal contact
- Weekly ratings of suicidal ideation
- Anonymous
- Warnings:
 - Self-examination test in both conditions
 - Acute suicidal risk (assessed weekly): automated email
 - No substitute for treatment

Outcome measures

- Primary: suicidal ideation (frequency and intensity; BSI)
- Secondary outcomes: hopelessness, depression, anxiety, sleeplessness, worrying, quality of life, attempted suicides, help-seeking

 130 respondents per arm (based on effect size d: 0.35)

Conclusions

- First trial on suicidal ideation
- Ethical issues
- Relevant!
- Results next time

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