

# Triple chronotherapy (combined total sleep deprivation, sleep phase advance and bright light therapy) to reduce acute depressive and suicidal symptoms: a randomized controlled clinical trial

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Study

Ongoing

## Administrative details

### EU PAS number

EUPAS30637

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### Study ID

50737

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### DARWIN EU® study

No

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### Study countries

☐ Italy

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## Study status

Ongoing

## Research institutions and networks

### Institutions

**ASST Santi Paolo e Carlo**

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**Institution**

### Contact details

#### Study institution contact

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**Study contact**

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#### Primary lead investigator

Armando D'Agostino

**Primary lead investigator**

### Study timelines

**Date when funding contract was signed**

Planned: 20/07/2018

Actual: 20/07/2018

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**Study start date**

Planned: 03/12/2018

Actual: 03/12/2018

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**Data analysis start date**

Planned: 01/04/2021

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**Date of interim report, if expected**

Planned: 30/06/2021

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**Date of final study report**

Planned: 01/06/2023

## Sources of funding

- Other

## More details on funding

unfunded study

## Regulatory

**Was the study required by a regulatory body?**

No

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## Is the study required by a Risk Management Plan (RMP)?

Not applicable

## Methodological aspects

### Study type

### Study type list

#### **Study type:**

Clinical trial

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#### **Scope of the study:**

Effectiveness study (incl. comparative)

#### **Main study objective:**

To assess the efficacy of a Triple Chronotherapy add-on intervention in patients hospitalized for a Depressive Episode. Triple Chronotherapy includes Sleep Deprivation (SD) - Sleep Phase Advance (SPA) and Bright Light Therapy (BLT).

## Study drug and medical condition

#### **Medical condition to be studied**

Depression suicidal

## Population studied

## **Age groups**

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Adults (65 to < 75 years)

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## **Estimated number of subjects**

75

# Study design details

## **Outcomes**

50% change from baseline associated with Triple Chronotherapy add-on intervention in the Hamilton Depression Rating Scale (HAMD-17) score, 50% score reduction of HAMD-17, reduction of suicidality at the Nurses' Global Assessment of Suicide Risk (NGASR) and Columbia Suicide Severity Rating Scale (C-SSRS), improved sleep quality assessed by the Pittsburgh Sleep Quality Index (PSQI), Length of Stay (LoS)

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## **Data analysis plan**

Continuous variables will be described as means and standard deviation after Kolmogorov-Smirnov normality check. Non-normal variables will be described as medians and quartiles. Multiple imputation will be employed for missing data. Multivariate models will be used for between-groups comparisons. Binary logistic regression will be used with a dichotomous score based on the primary outcome to discern responders from non-responders. Goodness-of-fit and effect size will be evaluated and confidence intervals set at 95%

## Data management

## Data sources

## **Data sources (types)**

Other

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## **Data sources (types), other**

Prospective patient-based data collection

# Use of a Common Data Model (CDM)

## **CDM mapping**

No

# Data quality specifications

## **Check conformance**

Unknown

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## **Check completeness**

Unknown

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## **Check stability**

Unknown

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## **Check logical consistency**

Unknown

# Data characterisation

## **Data characterisation conducted**

No