An explanatory randomised controlled trial testing the effects of targeting worry in patients with persistent persecutory delusions: the Worry Intervention Trial (WIT)

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Plain English summary
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Paranoia is excessive suspiciousness – believing that others are trying to cause you harm. It can be very distressing. Paranoia is associated with anxiety, depression, insomnia and a highly restricted lifestyle. It is a key experience in severe mental health problems such as schizophrenia. Existing treatments require significant improvement. Our approach to improving treatment is to use knowledge about the causes of paranoia. Our research has shown that worry (repeated negative ‘what if?’ thinking) is important. Worry brings implausible ideas to mind, keeps them there and makes the experience more distressing. Therefore, we set out to treat worry using a brief psychological therapy in patients with persecutory delusions (i.e. severe paranoia). It was expected that worry would reduce for the patients but so too would the paranoia. In total, 150 patients attending mental health services were randomly allocated to receive either the six-session treatment added to standard care or standard care. Assessments were carried out at baseline, 8 weeks (post therapy) and 24 weeks. The self-report and interviewer assessments were carried out by assessors who did not know which patients had received the new treatment. It was found that the psychological therapy led to reductions in both worry and paranoia. These benefits were still seen at the 24-week assessment. There were also improvements in the patients’ psychological well-being: they reported feeling happier. The study convincingly shows that a brief psychological intervention targeting worry is beneficial for patients with severe paranoia.
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This report

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