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REDUCING THE FREQUENCY AND SEVERITY OF VOICES: THE AVATAR CLINICAL TRIAL M. Rus-Calafell¹, T. Jamieson-Craig¹, P.A. Garety², T. Ward², P. McCrone³, R. Emsley⁴, M. Huckvale⁵, G. Williams⁵, J. Leff⁶ ¹Health Service and Population Research, Institute of Psychiatry King's College London, London, United Kingdom ; ²Psychology, Institute of Psychiatry King's College London, London, United Kingdom ; ³Community Mental Health Centre for the Economics of Mental Health (CEMH) Health Service and Population Research, Institute of Psychiatry King's College London, London, United Kingdom ; ⁴Centre for Biostatistics, Institute of Population Health Univesity of Manchester, Manchester, United Kingdom ; ⁵UCL Speech Hearing and Phonetics Sciences, University College London, London, United Kingdom ; ⁶UCL Translational Research Office, University College London, London, United Kingdom

Around a quarter of people suffering from psychotic conditions, like schizophrenia, continue to experience auditory hallucinations despite adequate drug treatment. In addition to medication, some help is also provided by psychological interventions, particularly cognitive behavioural therapy for psychosis (CBTp). AVATAR therapy is based on computer technology which enables each patient to create an avatar of the entity (human or non-human) that they believe is talking to them. The therapist promotes a dialogue between the patient and the avatar in which the avatar progressively comes under the patient's control. These sessions are audio recorded and provided to the patient on an MP3 player for continued use at home. In an initial pilot study, a maximum of 7 sessions lasting 30 minutes resulted in highly significant reductions in the patients' hallucinations and the associated distress, enhancing the quality of their life (Leff et al., 2013). Our objective is to replicate the findings of this pilot study of the AVATAR therapy. We will carry out a randomised controlled evaluation of computer assisted voice therapy compared to supportive counselling to determine preliminary estimates of both effectiveness and cost-effectiveness. The study aims to recruit 142 people who have suffered from auditory hallucinations for at least 12 months despite taking medication regularly. Participants will complete a number of self-completed and interview based measures (on four assessment points: pre-treatment, post treatment, and then at 12 and 24 weeks follow-up) to assess the impact of interventions on outcomes and to explore potential mediators and modifiers of therapy.