

CBT-10: Brief therapy for eating disorders

Information sheet for patients and their families and friends

So you have an eating disorder, and you want to overcome it

If you are reading this, it is likely that you have an eating disorder or you are affected by someone in your life who has an eating disorder. Whether you are reading this leaflet because it is you who has the problem or a loved one, the information below should help you to understand what is involved.

Cognitive-behavioural therapy (CBT) is a psychotherapeutic approach to eating disorders that has a strong evidence base. There are different forms of effective CBT for eating disorders, which are similar in lots of ways. This leaflet is to explain one specific form of CBT, known as CBT-10 (where the '10 stands for 'ten sessions'), because it might be useful to help you overcome your eating disorder.

Who does CBT-10 help?

CBT-10 has been shown to help adults suffering from bulimia nervosa, or very similar disorders.

What is CBT-10?

CBT-10 is a time-limited, focused therapy, which is ten sessions long (followed by two follow-up sessions). It starts by addressing your safety, and then aims to help you change your eating, your beliefs about food, and your body image. It should also help you to reduce any anxiety and other emotional concerns.

We anticipate change early in the process, and will review your progress with you at session 4. If you are struggling to make the necessary changes, we may decide together that this is not the right time for you to be doing this work.

What will I need to do to get well?

Therapy is hard, and you will need to be prepared at the outset to make sufficient time to do this work. It is important to attend all your sessions. Between sessions, there will be a significant amount of work for you to do independently. This will include monitoring your eating, completing and returning questionnaires, trying out new behaviours, and challenging your anxiety. You will also need to allow us to monitor your weight, or to support you in monitoring this at home.

You will learn that a lot of the changes that are needed mean changing your behaviour – your eating, your body-related behaviours, your response to your emotions. These will help you learn to overcome your fears about your eating and your body. Therapy will support you to make these changes.

This is hard work, but we know that if you fully engage with this then you will have the best possible chance of a full recovery.

The questionnaires

Use of questionnaires is an important part of how we monitor your progress and think about your treatment in this service. You will be given some questionnaires by your therapist, and others will come to you from our research office. We do appreciate that there are quite a lot, and ask you to take your time to complete them.

“What can I do to help my loved one?”

If you are reading this because you are a family member, a friend, or a partner you can play a valuable role in:

- Suggesting to the patient that they have a problem, if they seem unaware or unwilling to think about it.
- Supporting the patient in seeking help, especially in accessing appropriate treatment.
- Talking to the patient about their treatment sessions, if they are happy to do so, to help them to learn fully and try things out with your support (e.g. eating new foods).
- Joining them in their homework and in their ‘therapy at home’ sessions, where appropriate.

Two important points for everyone to remember

First and most importantly, don’t beat yourself up over how you got here, especially as the eating problem might have been around for a very long time. Eating disorders have lots of potential causes, and we don’t fully understand them all. There is no point in worrying about how you (or your loved one) developed the eating disorder. It is better if we all work on helping you get better so you can live the life you want to live in the present.

Second, you might have other concerns alongside your eating disorder, such as low self-esteem, anxiety, or perfectionism. A lot of such problems are likely to be reduced substantially when you undertake CBT-10 for your eating disorder. However, if such problems continue by the end of therapy, we might recommend that you get hold of a good self-help guide to try out during the follow-up period and beyond. The ones that we commonly recommend are:

Social anxiety - Butler, G. (2016). *Overcoming social anxiety and shyness: A self-help guide using cognitive behavioural techniques (2nd ed.)*. London, UK: Robinson.

Self-esteem - Fennell, M. (2016). *Overcoming low self-esteem: A self-help guide using cognitive behavioural techniques (2nd ed.)*. London, UK: Robinson.

Anxiety - Kennerley, H. (2016). *Overcoming anxiety: A self-help guide using cognitive behavioural techniques (2nd ed.)*. London, UK: Robinson.

Perfectionism - Shafran, R., Egan, S., & Wade, T. (2018). *Overcoming perfectionism: A self-help guide using cognitive behavioural techniques (2nd ed.)*. London, UK: Robinson.

Core beliefs - Young, J. E., & Klosko, J. S. (1993). *Reinventing your life*. New York, NY: Plume Publishers.