

## What will a treatment session involve?

1. You will be given a time for your session, and you are expected to arrive on time. You will be given the clinic phone number, and they will have your contact number and email address in case they need to get in touch with you.
2. Each session will begin with a review of how things have been going for you that week, and together with your therapist you will set an agenda for the session.
3. You will be weighed at the beginning of each session, and your therapist will chart your weight for the duration of the treatment.
4. This is your treatment. You need to be clear about what is happening in your treatment and why – if you are not clear then ask your therapist! Your therapist is an expert at understanding an eating problem like yours.
5. It is really important that you commit to attending all of your sessions, and that if you are considering dropping out that you tell your therapist. The nature of your eating disorder is that at certain stages it will be challenged and you will want to stop. Try not to keep this a secret from your therapist. It is especially important that you attend your final 3 sessions – these are just as important as your first sessions, and will give you the best chance of achieving long lasting and sustained change in your life.
6. If you have any questions at any stage just ask!

*It is recommended that a person reads 'Overcoming Binge Eating' by Dr. Christopher G. Fairburn, when they are doing CBT-E, so ask your clinician about this.*

Day				Date	
Time	Food and drink consumed	Place	*	V/L	Context and comments

Sample of a 'real time self monitoring record'

### FREE RESOURCES

- Binge Eating: Breaking the Cycle. A self-help guide towards recovery
- Eating Disorders – A Resource for Dentists
- Eating Disorders – A Resource for General Practitioners
- Eating Disorders – A Resource for Parents
- Eating Disorders – A Resource for Pharmacists
- Eating Disorders – Treatment Guide
- Understanding Family Based Treatment (FBT) – A Short Guide for Families

EDA NI is the national voluntary organisation providing support and information to people affected by eating disorders.

#### WHO WE ARE:

A voice, a listening ear, a support for those affected by eating disorders and their families.

#### WHAT DO WE DO?

Provide support, raise awareness, challenge discrimination and stigma, champion that people access the care that they need and deserve as quickly as possible.

#### WHAT DO WE WANT TO ACHIEVE?

Our aim is that those affected with an eating disorder and their families know that they are not alone and that they will have their needs met through early access to the appropriate specialised treatment services that they need and deserve.

#### WE ARE:

A beacon of hope for recovery and freedom from eating disorders.

#### OUR MISSION:

*EDA exists to provide support, information and understanding to people with eating disorders as well as their families and friends. We endeavour to ensure that those struggling with an eating disorder know that they are not alone and that support and a non-judgemental, empathetic listening ear are always available. We strive to provide a safe space whereby individuals affected by eating disorders and their loved ones can feel listened to and supported.*

*We strive to ensure that people affected by eating disorders will have their needs met through the provision of timely, appropriate and integrated services delivered by a range of statutory and voluntary agencies. We support a multi-disciplinary approach for the treatment of eating disorders and strongly advocate for early and immediate intervention.*

*We endeavour to promote awareness of the illness amongst all sections of the community, amongst decision makers, politicians, civil servants, the voluntary sector and the general public.*

*EDA's ethos is that of hope and recovery and we are committed to fully supporting those affected by an eating disorder in their own individual journey of recovery from this illness.*

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**We are a voice, a listening ear,  
a support for those affected by  
eating disorders and their families.**

#### SERVICES

- Email Support Service
- 24 Hour Helpline Support
- Drop-in Service
- 1-1 Support
- Monthly Support Groups
- Early Intervention/Prevention Programmes for Schools and Youth Groups
- Workshops for Professionals

**PEOPLE CAN  
AND DO RECOVER**

Disclaimer: This information sheet should not substitute medical advice. EDA (N.I.) does not endorse any third party and is not liable for any actions taken based on the information we provide.

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**Understanding  
CBT-E:**

*Cognitive Behavioural  
Therapy – Enhanced*



## WHAT IS AN EATING DISORDER?

An eating disorder is very difficult to understand because it is primarily a mental health problem, but it also appears in the person as a behavioural and physical problem. All of the eating disorders are characterised by serious disturbances in eating behaviours and weight regulation (e.g. restricting eating, binge and purging, over-exercising, obsessing with food and calories) which come from distorted thoughts and feelings about how the person sees themselves – their body image, and how they think about themselves in the world.

- Eating disorders have the **highest mortality and morbidity risk of all mental health disorders** (Arcelus, 2011)
- Early intervention with evidence based practice is known to greatly improve outcomes and recovery (Lock, 2015)

## WHAT IS CBT-E (Cognitive Behavioural Therapy – Enhanced)?

CBT, is one form of talking therapy, that addresses the way our thoughts influence our behaviours, which in turn makes us feel certain ways. If our thinking is distorted, it drives us to behave in a disordered way, and this in turn makes us *feel* disrupted and disordered also. CBT aims to address distorted *thinking* and modify behaviours, with the aim of helping the person to feel better.

CBT-E is a form of cognitive behavioural therapy that has been devised, and enhanced in certain areas, and with particular strategies to specifically address eating disorders and their core symptoms (e.g. distorted thinking about shape and weight, perfectionism). In particular CBT-E is generally used to treat adults with eating disorders.

CBT-E is a goal focused talking therapy. A 'let's think about the here and now' talking therapy. It is conducted within a specific time period, so it has a beginning, a middle, and an end. The therapy is led by the therapist who sets goals and objectives for the person, giving the person 'homework' between sessions. The therapy is designed to specifically fit with each person's particular psychopathology (eating disorder symptoms). The person is also tasked with noting their eating and thoughts/feelings, as they experience them. This is not a diary because the recording must happen as soon after eating as possible. The person brings their real time self monitoring records and homework to each session which is used by the therapist to work through and process making changes, and constructing new goals and objectives.

## THE TRANSDIAGNOSTIC VIEW OF EATING DISORDERS

Those who practice CBT-E (Cognitive Behavioural Therapy – Enhanced), take what is termed a 'transdiagnostic' view of eating disorders.

*"All the eating disorders have more in common with each other than different."*

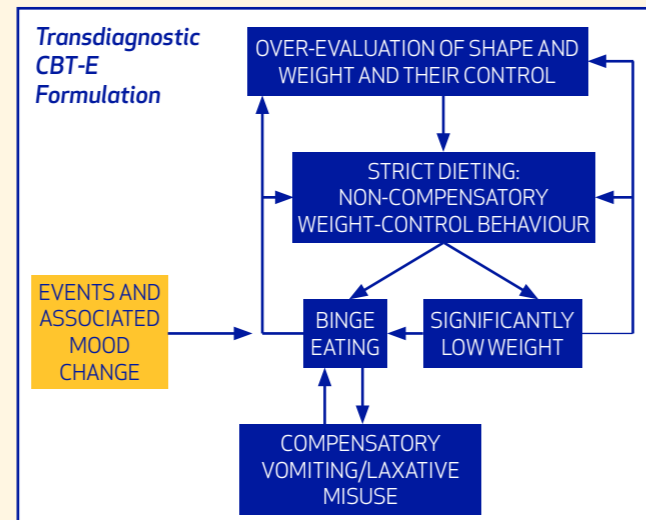
The eating disorders differ in terms of the disordered eating behaviours that a person engages in, such as:

<b>Anorexia Nervosa:</b>	Restricting energy intake resulting in malnutrition and very low body weight.
<b>Bulimia Nervosa:</b>	Typical eating, binge eating and regular purging behaviours.
<b>Binge Eating Disorder:</b>	Regular binge eating resulting in weight gain.

However the *thoughts* and *feelings* a person experiences in each eating disorder are *very similar*.

The transdiagnostic view therefore recognises the differences in disordered eating behaviours, and also recognises the similarities in other aspects of each eating disorder – how the person thinks and feels.

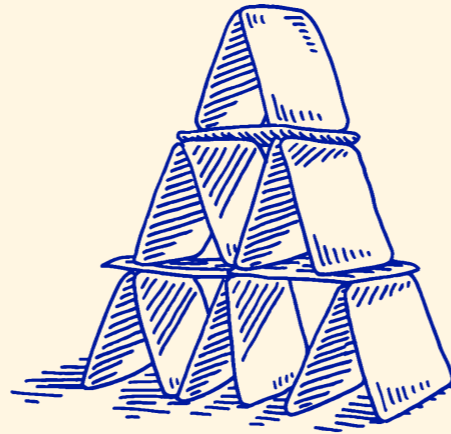
In this way, CBT-E can be used, and has been researched for treating people with any type of eating disorder.



## WHAT IS THE ETHOS BEHIND CBT-E?

Those who practice CBT-E with people with eating disorders, do so based on the idea that:

1. All of the eating disorders are essentially 'cognitive disorders', meaning that they share a distinctive core symptoms (psychopathology) that is cognitive in nature. i.e. the distorted thinking that develops when a person has an eating disorder is essentially the root of the problem, and by helping the person to think in a less distorted way, their eating disorder symptoms will reduce and eventually disappear. A CBT-E approach aims to normalise the person's distorted thinking, which will in turn normalise their eating behaviours and address the other core aspects of the eating disorder.
2. The core psychopathology is
  - a) distorted thinking style,
  - b) over-evaluation of body weight or shape,
  - c) control, and
  - d) dieting.
3. CBT-E therapists approach a person's eating disorder as if it is constructed like a house of cards. A person will often have lots of cards (issues and different aspects) that form the entire house (the eating disorder). Addressing some key issues – removing some key cards – will bring the whole house of cards down.



If your treatment team have selected you to start CBT-E, this means that they have concluded, based on your clinical needs, that starting CBT-E now, will give you the best chance of recovering from your eating disorder.

## BASICS YOU NEED TO KNOW:

- There are various adaptations of CBT-E, depending on your age, the type of eating disorder you have been diagnosed with, and your history. If you are unsure which type of CBT-E you are doing then ask your therapist.
- There is a longer version of CBT-E for people with anorexia, or people who are physically very underweight. If you are an older teenager there is a different form of CBT-E for you.
- Generally CBT-E has a fixed length, with 20 sessions, over 20 weeks. It is crucial that when you start CBT-E, that you do it at a time when you can commit to this time period without interruptions, e.g. holidays.
- There are four stages of CBT-E treatment. It is necessary for you to complete all four stages for the treatment to be effective. CBT-E has a very low relapse rate when people fully complete the four stages.
- The aim of treatment is a recovery which means addressing your eating disorder symptoms and bringing all aspects of the eating disorder within the 'normal' range, e.g. normal BMI, normal eating behaviours, normal thinking and non-eating disorder responses to emotions.
- At the end of the treatment you may still have some eating disorder thoughts and behaviours. This is not unusual, and research has shown that these lingering aspects continue to improve post-treatment.
- Your weight will be tracked during the treatment by your therapist to ensure that it is going in the right direction.
- When you begin your treatment you will do an initial assessment session that will last approximately an hour and a half. After this all sessions will last just under an hour.
- You and your therapist will be working to become experts at understanding your eating problem, so that you can overcome this problem.
- You will decide, with your therapist, on specific tasks for you to try between sessions.

## THE 4 STAGES OF CBT-E OUTLINED

**STAGE ONE**

- Stage one will be an intensive stage for you, and appointments are usually twice weekly during this stage.
- Stage one will introduce 2 key aspects of the treatment: in session weighing, and regular eating.
- Stage one usually lasts for 4 weeks, and includes 8 sessions.

**STAGE TWO**

- This is a brief stage, lasting 2 weeks and 2 sessions.
- Stage two is a transitional stage where progress is reviewed, specific barriers to change are identified together with your therapist, and stage three will be planned.

**STAGE THREE**

- This is the longest part of the treatment, taking approximately 8 weeks, and 8 sessions.
- During these 8 weeks the main elements of your eating disorder will be addressed and worked through.

**STAGE FOUR**

- Stage four will last approximately 6 weeks, and appointments tend to be every two weeks.
- During this final stage the focus of the treatment shifts to looking to the future and focuses on both how to maintain the changes you have made, and how to minimise the risk of relapse.

**Note:** If your BMI is between 15–17.5, your treatment will be 40 sessions, over approximately 40 weeks. The first 20 sessions will be approximately twice-weekly, thereafter sessions will be weekly, and eventually every fortnight.