

Villa Garda

Outpatient enhanced cognitive behavior therapy for severe and extreme anorexia nervosa

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Introduction

Severe and extreme anorexia nervosa in adults is difficult to treat, and no current treatment is supported by robust evidence.

A few studies, most of which were performed by highly specialized research units, have indicated that enhanced cognitive behaviour therapy (CBT-E) for severe anorexia nervosa (i.e. body mass index (BMI) 15-15.99 kg/m²) can be effective. In the UK-Italy study the 49 patients who started CBT-E in the Italian sample had mean BMI of 15.5 kg/m². Among these patients 35% did not complete therapy. The remaining 32 patients reached a mean BMI of 18.6 after treatment. However, no study has yet evaluated the effect of CBT-E in patients with extreme anorexia nervosa (i.e. BMI < 15 kg/m²).

Objectives

The aim of our cohort study was to:

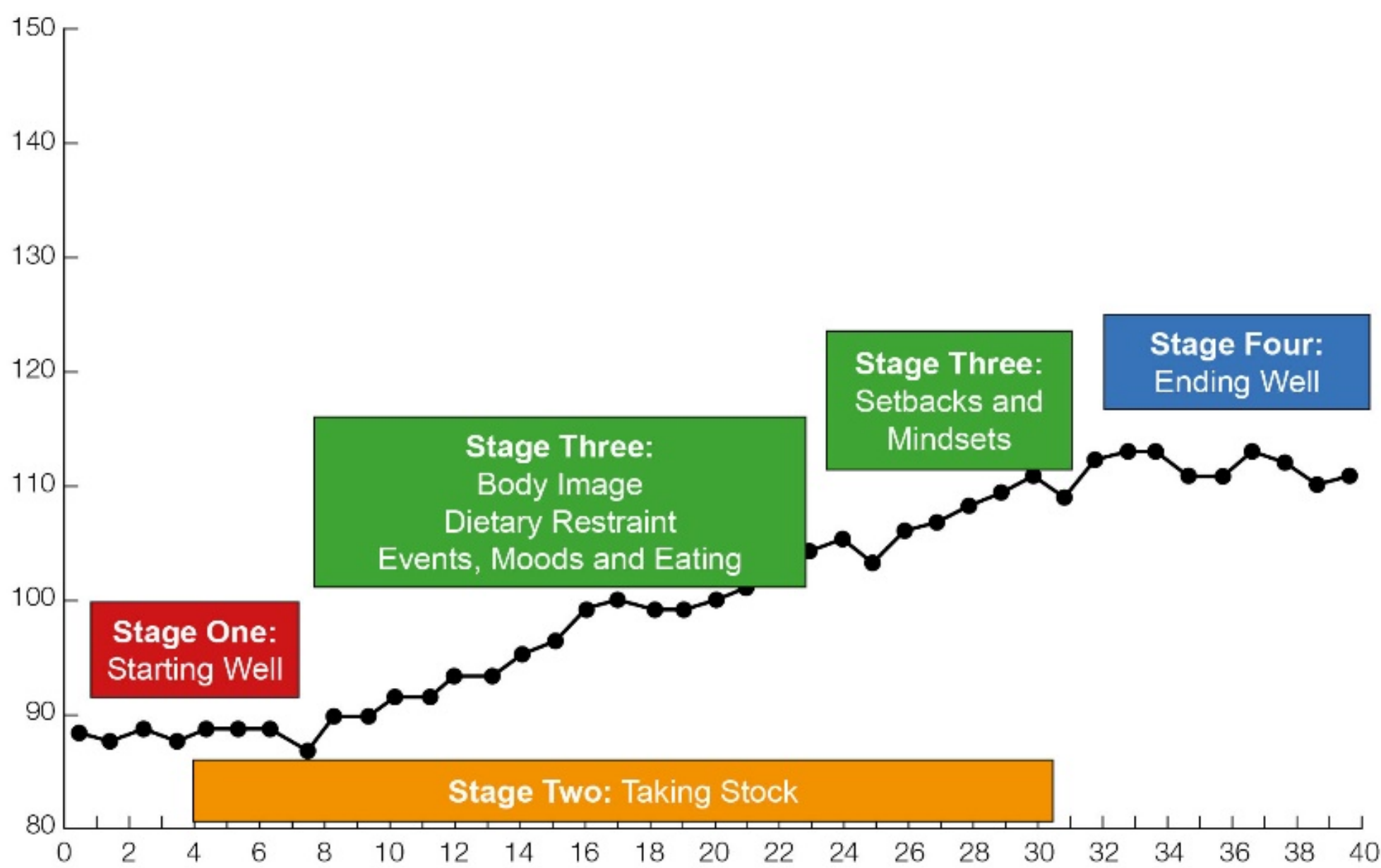
- **evaluate the effects of CBT-E on patients with severe and extreme anorexia nervosa treated in outpatient setting.**

CBT-E for underweight patients

Weight regain in patients with anorexia nervosa is achieved in three steps (see CBT-E map below for patients who are underweight):

- **Step One.** Goal – Patients see the need for weight regain and decide to embark upon it
- **Step Two.** Goal – Patients regain weight to a low-healthy level
- **Step Three.** Goal – Patients become accomplished in weight maintenance

The addressing of eating disorder psychopathology is integrated with the three weight gain steps.



References

Calugi, S., El Ghoch, M., & Dalle Grave, R. (2017). Intensive enhanced cognitive behavioural therapy for severe and enduring anorexia nervosa: A longitudinal outcome study. *Behaviour Research and Therapy*, 89, 41-48. doi:10.1016/j.brat.2016.11.006

Fairburn, C. G., Cooper, Z., Doll, H. A., O'Connor, M. E., Palmer, R. L., & Dalle Grave, R. (2013). Enhanced cognitive behaviour therapy for adults with anorexia nervosa: a UK-Italy study. *Behaviour Research and Therapy*, 51(1), R2-8. doi:10.1016/j.brat.2012.09.010

Fairburn, C. G. (2008). *Cognitive behavior therapy and eating disorders*. New York: Guilford Press.

Methods

Participants

23 adult patients with severe anorexia nervosa (body mass index (BMI) 15-15.99 kg/m²) and **10 adult patients with extreme anorexia nervosa** (BMI < 15 kg/m²) were recruited from consecutive referrals to a community-based eating disorder clinic.

All the patients were assessed accurately by a physician expert in CBT-E on the assessment and management of the effect of underweight. Patients were included if:

1. They were judged to be in a stable medical condition by the assessment physician
2. They accepted to be admitted at the inpatient CBT-E of Villa Garda Hospital if they did not improve with outpatient CBT-E or they will have a deterioration of their medical condition E

Each was offered 40 sessions of CBT-E over 40 weeks and they were assessed once a week by the physician until they had a BMI ≥ 18.5 kg/m²

The ethics committee of the Local Health Unit (22 e Bussolengo, Verona), approved the study, and all participants gave informed written consent to the anonymous use of their personal data.

Assessment and measures

- Demographic and clinical variables
- Eating Disorder Examination Questionnaire (global EDE-Q)
- Brief Symptom Inventory (BSI)

All data were collected before and at the end of the treatment

Outcome categories

- **Good BMI outcome → BMI ≥ 18.5 kg/m²**
- **Full response → BMI ≥ 18.5 kg/m² and global EDE-Q <2.77**

Statistical analyses

Continuous variables were categorized as means (SD), and categorical variables as frequencies and percentages. Paired t-test was used to evaluate the significant change from baseline to end of treatment.

Results

56% of the patients (n=13) were able to complete the outpatient treatment

In completers there was a substantial and significant increase of weight (+9.19 kg), BMI (+3.41 kg/m²) (Figure 1).

Eating disorder features and eating disorder and general psychopathology also improved markedly (Figure 2).

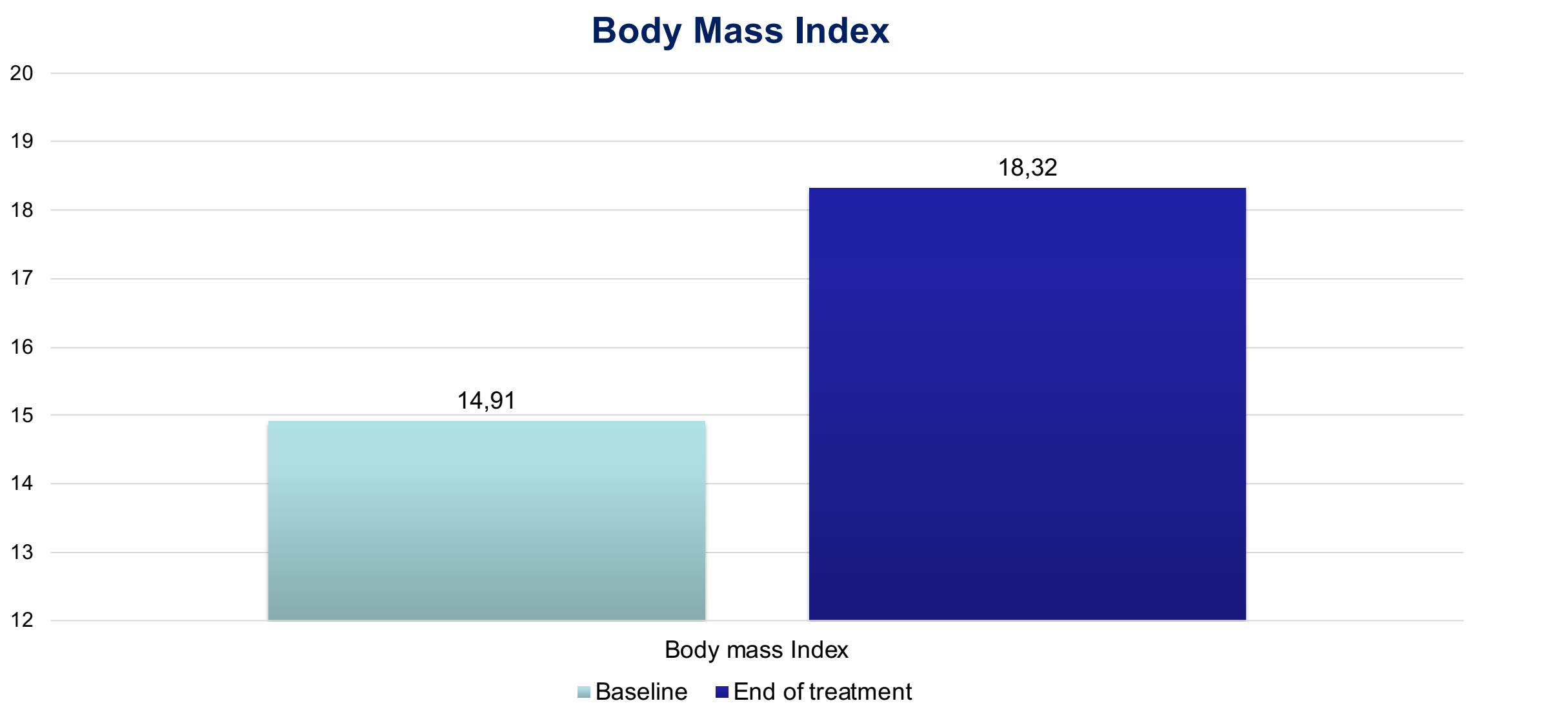


Figure 1. Body Mass Index at baseline and at end of treatment in 13 patients who completed the treatment.

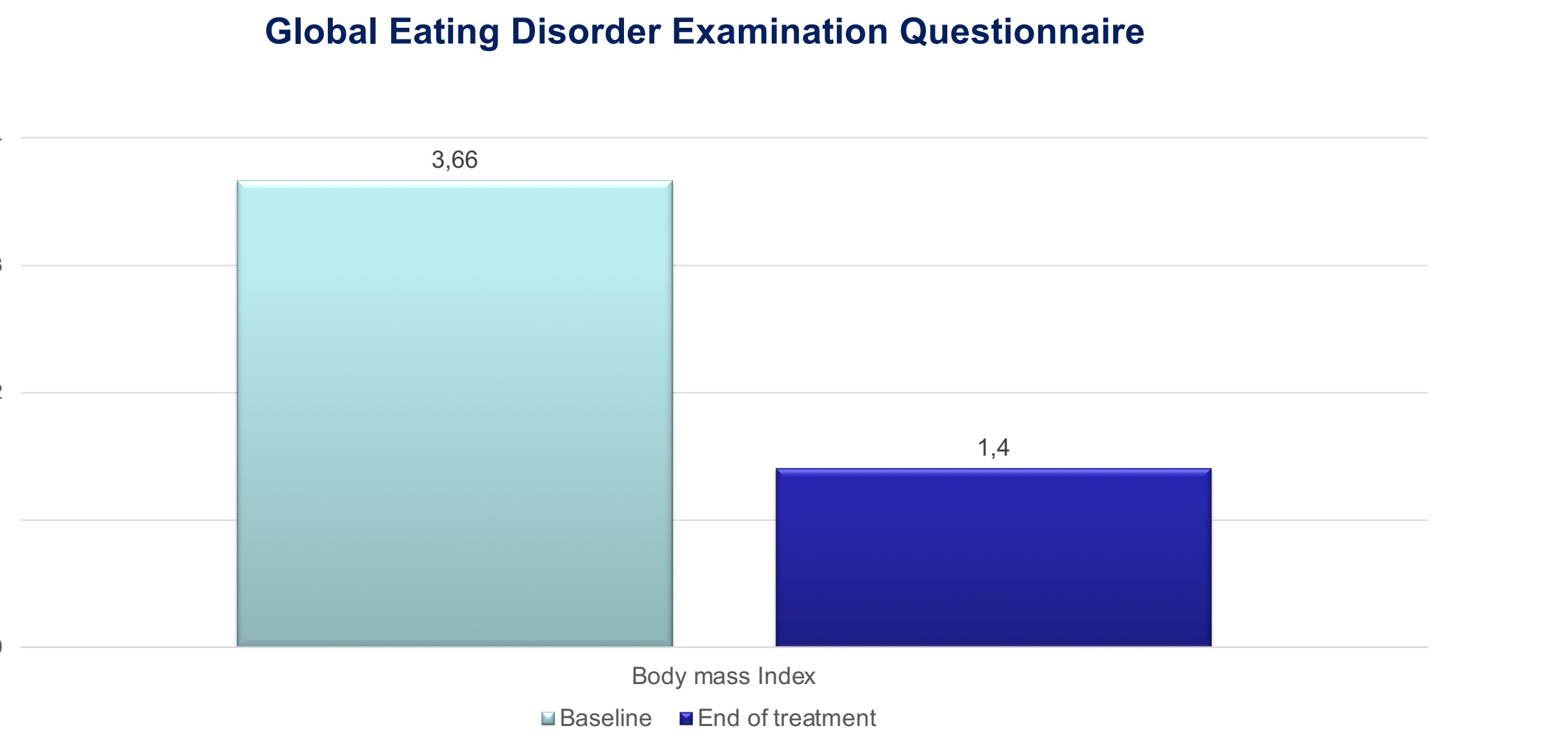


Figure 2. Global EDE at baseline and at end of treatment in 13 patients who completed the treatment.

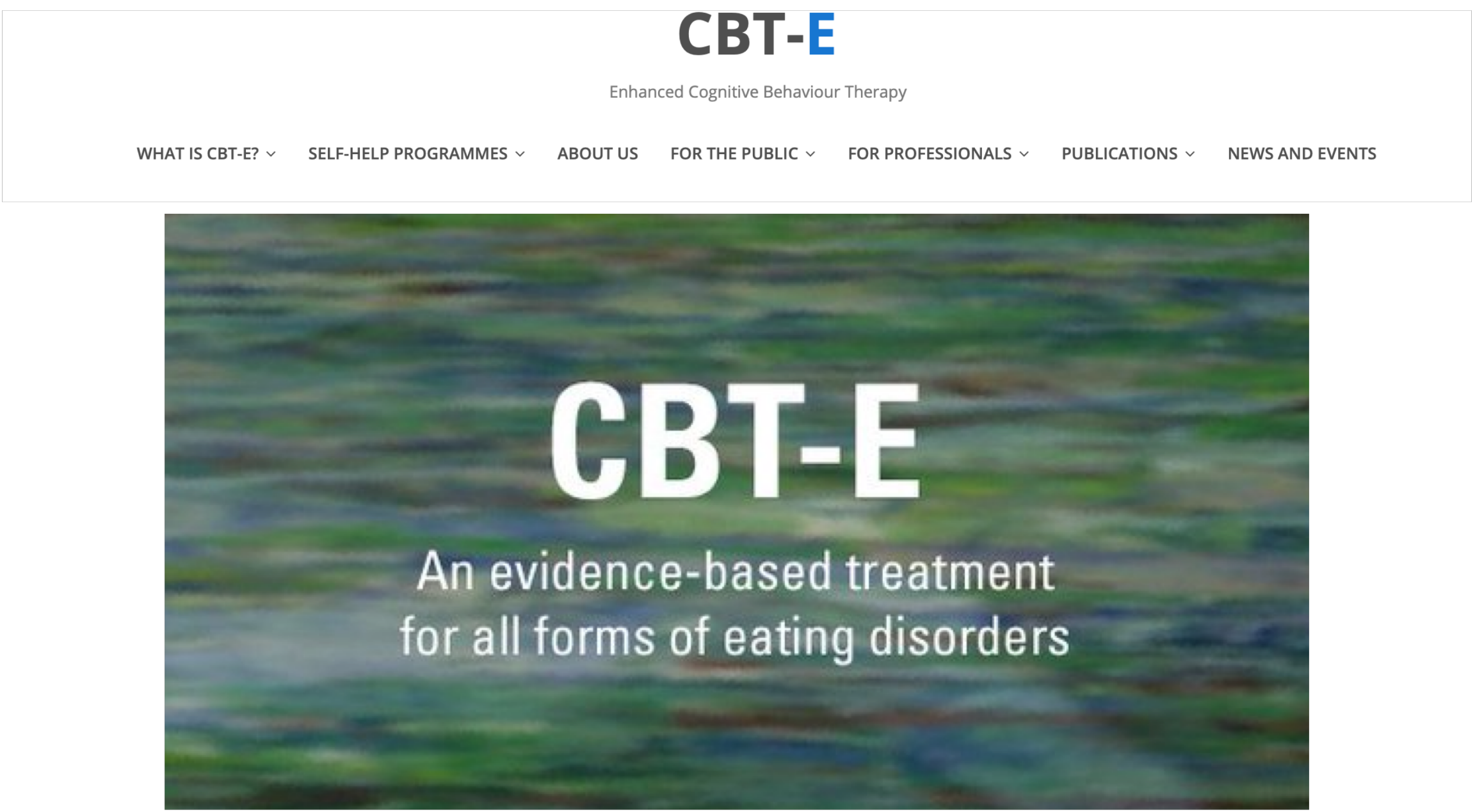
There was a marked treatment response with the **53.8% of the sample having good BMI outcome (BMI ≥ 18.5 kg/m²)** and **full response (BMI ≥ 18.5 kg/m² & global EDE-Q < 2.77)**.

Moreover, **84.6% had minimal residual eating disorder psychopathology** at the end of treatment.

Conclusions

These findings suggest that CBT-E is a promising treatment for patients with extreme and severe anorexia nervosa managed in outpatient setting.

The official CBT-E website – cbte.co



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Web link that can be accessed for a copy <http://www.dalleggrave.it/poster-dalle-grave-and-calugi-iced-2019/>