



Prifysgol Cymru
Y Drindod Dewi Sant
University of Wales
Trinity Saint David

Module: Introduction to Research (BMHP5005)

Assessment 2: Viva Voce

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Introduction

The ***focus*** of my research is Anorexia Nervosa – the eating disorder that affects mainly adolescents – and the ways adolescents with this diagnosis could be helped and supported in the United Kingdom.

The ***aim*** of my work is to find out the ways of supporting adolescents with AN in the UK, the length of support and how successful different kinds are. This literature review will raise knowledge on the issue and discuss the way patients and adolescents go to reach improvement in the health of the teenagers with AN.

The ***objectives*** I am following are to go through four medical research articles that provide data and analyse the different ways of helping and supporting adolescents with anorexia nervosa.

Methods

Topic/aim of your research: ***Different ways of supporting adolescents with Anorexia Nervosa in the UK.***

Keywords:

- Anorexia Nervosa or anorexia
- support or therapy or way of treatment or methods of treatment or kinds of support
- teenagers or adolescents or teens
- The UK or the United Kingdom or Great Britain or England

Database: PubMed, UWTSD Library, ProQuest

Inclusion criteria

Date of publication: 2012 to 2022

Language: English

Type of source: database articles, medical articles

Geography/Location: Great Britain

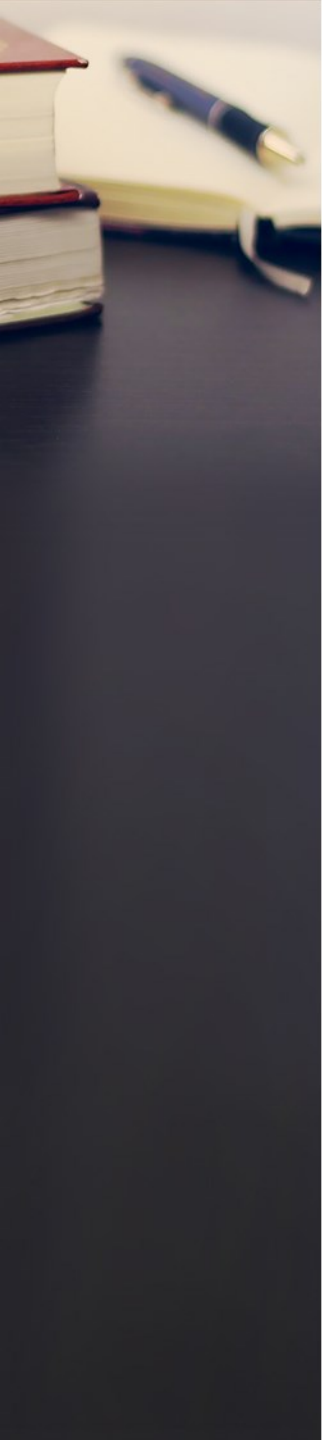
Exclusion criteria: literature review, book, newspaper article, European research and trials

Selected Studies

	Author(s), title, and year of publication	Aim of study	Methods, Sample size and characteristics	Summary of main findings
1	<i>A pragmatic randomised multi-centre trial of multifamily and single-family therapy for adolescent anorexia nervosa</i> Ivan Eisler, Mima Simic, John Hodsoll, Eia Asen, Mark Berelowitz, Frances Connan, Gladys Ellis, Pippa Hugo, Ulrike Schmidt, Janet Treasure, Irene Yi and Sabine Landau 2016	To confirm previous research on eating disorders and family therapy for coping with it as well as add additional benefits of the multi-family therapy.	169 participants aged 13 to 20 and their families. The necessary condition is for all the participants to be diagnosed with AN and to have lost 15% of their body weight for the last 3 months before the start of the research.	Both treatment groups showed significant improvement. 60% showed good to intermediate outcome at the end of FT-AN and more than 75% showed improvement after MFT-AN. At the followup 18 months monitoring the changes were relatively little. In both methods the improvements were in the mood and the AN psychopathology of the adolescents.
2	<i>Enhanced cognitive behaviour therapy for adolescents with anorexia nervosa: An alternative to family therapy?</i> Riccardo Dalle Grave, Simona Calugi, Helen A. Doll, Christopher G. Fairburn 2013	The present study aimed to establish, in a representative cohort of patients with marked anorexia nervosa, the immediate and longer-term outcomes following CBT-E.	Forty-nine adolescent patients were recruited from consecutive referrals to a community-based eating disorder clinic. Each was offered 40 sessions of CBT-E over 40 weeks from a single therapist.	Given the size and severity of the sample, the magnitude of the response and the fact that it was well maintained, there is now a compelling case for comparing CBT-E and FBT in randomised controlled trials. Key variables of interest would include the relative acceptability of the two approaches, their effectiveness and their ability to produce enduring change.

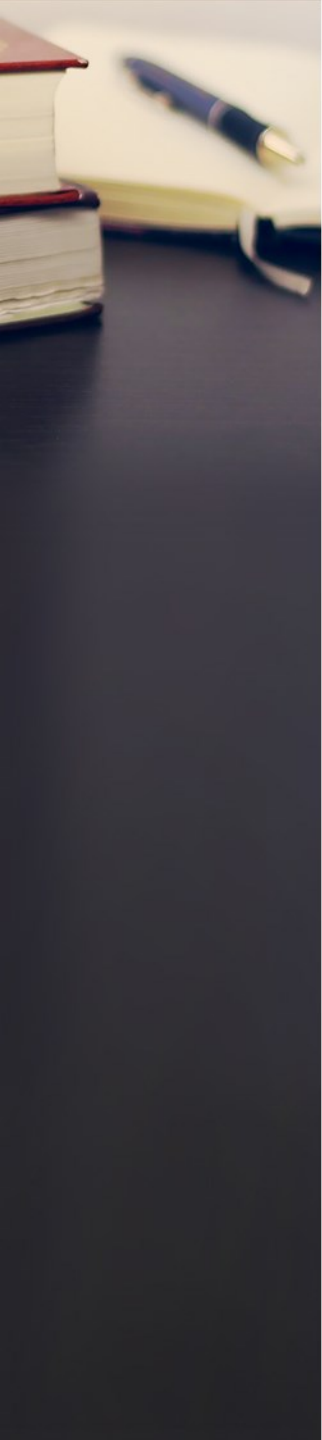
Selected Studies

3	<i>Intensive treatment program (ITP): A case series service evaluation of the effectiveness of day-patient treatment for adolescents with a restrictive eating disorder.</i> Mima Simic, Catherine S. Stewart, Ivan Eisler, Julian Baudinet, Katrina Hunt, Jayne O'Brien, Beth McDermott 2018	This paper describes the effectiveness of additional treatment for adolescents who had not responded to FT-AN, the Intensive Day Treatment Program (ITP) embedded within a comprehensive outpatient service at the Maudsley Hospital	105 young people aged 11–18 with restrictive eating disorders referred to the program in the first four and a half years of its operation.	ITP can contribute to positive outcomes for young people who require intensification of treatment. ITP outcomes are discussed in comparison to the published literature concerning day programs for adolescents with a diagnosis of an eating disorder
4	A novel 'practical body image' therapy for adolescent inpatients with anorexia nervosa: a randomised controlled trial Hannah Biney, Sarah Astbury, Amanda Haines, Jessica Grant¹, Nicola Malone¹, Matt Hutt, Rachel Matthews, John F. Morgan, Sarah White, J. Hubert Lacey, 2021	The study aimed to evaluate the potential effectiveness of PBI which uses CBT approaches and mirror exposure (ME) to improve body image in adolescents with a diagnosis of AN when used as an adjuvant to an array of therapies in an inpatient unit.	40 adolescents aged 11 to 18 with a diagnosis of AN and the consent of one of the parents for participation in the trial.	31 participants completed the study of which 16 TAU and 15 PBI. PBI participants had greater improvement in all outcomes than the TAU participants. There were medium effect sizes in self-reported weight concerns and in body image avoidance in terms of clothing and anxiety that is connected to it.

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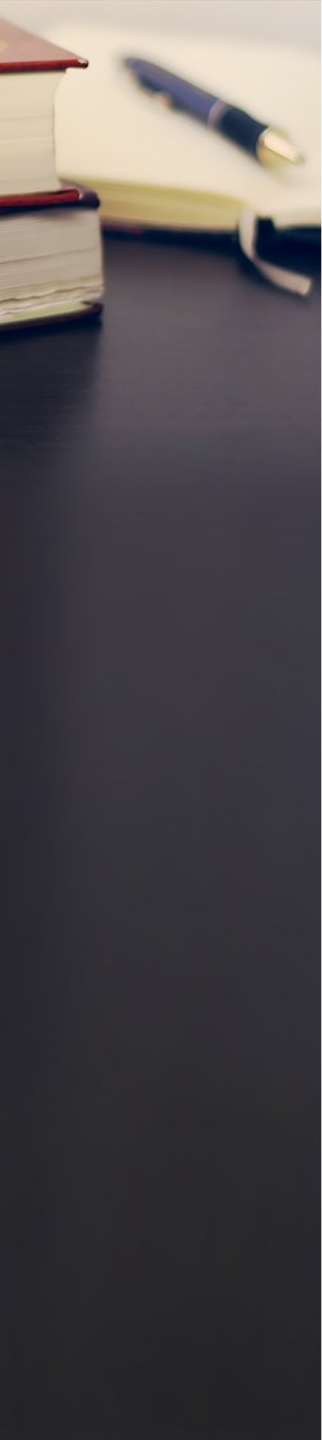
Results

- ✓ Anorexia Nervosa is a severe disease that afflicts mainly adolescents aged 11 to 18.
- ✓ The mortality rates of AN are so high that it is considered the deadliest psychiatric disorder in adolescents.
- ✓ The family has an essential part in the support of adolescents with AN.
- ✓ Not all patients have equal response to family therapies and react positively to them.
- ✓ When the support is based on family therapy a previous multi-family therapy could help the patient and their family to accept it easier and participate positively.
- ✓ Mirror exposure as part of Practical Body Image therapy is very effective and lowers the distorted image impact of AN for patients who are hospitalised.



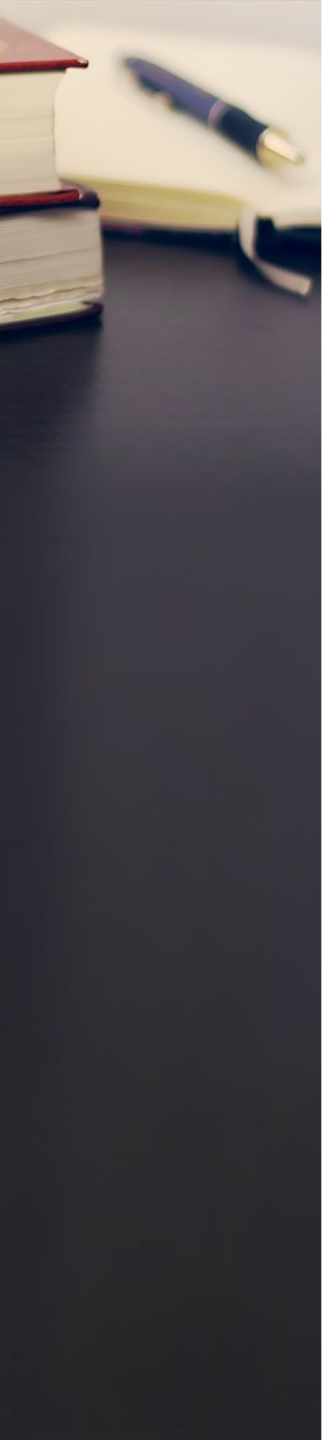
Discussions

- ✓ The researches discussed in the literature review show that adolescents reach better when the therapy and support include the whole family.
- ✓ There are teenagers who do not respond to family therapy and resist any work with a therapist.
- ✓ The researches show that multi-family therapy is very effective and helps parents to go through the process of understanding and accept their child's condition easily.
- ✓ What should be taken into consideration is the fact that the rates of mortality are high, and all the medical specialists must be Aware of the illness and react promptly and on time. Any late respond or neglect of the symptoms could be fatal for the diseased.
- ✓ Any therapy should be in accordance with the Mental Health Act that states the time of recovery to be 7 years and more.
- ✓ The assessment for AN is based on more factors than BMI. Sociopathy and suicidal behaviour could stay and worsen even the BMI shows improvement.

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Conclusion

- ✓ The ways of support and working with patients with AN are more than one but the specialist is those who should choose the best way to help the patient and their family.
- ✓ The process of recovery is long and lasts for years and it is essential for patients and their families to know and understand the way they are supposed to walk until full recovery.
- ✓ The most important conclusion of the literature review is that family is the most important part of the therapy and the dynamics between the members of the family is a major healing point, almost equal to that of the therapists and psychiatrists.



References

Biney, H., Astbury, S., Haines, A., Grant, J., Malone, N., Hutt, M., Matthews, R., Morgan, J.F., White, S. and Lacey, J. H. (2020). A novel 'practical body image' therapy for adolescent inpatients with anorexia nervosa: a randomised controlled trial. *Eating and Weight Disorders - Studies on Anorexia, Bulimia and Obesity*. [online] Available at: <https://dx.doi.org/10.1007%2Fs40519-020-00997-2> (Accessed 11 March 2022).

Dalle Grave, R., Calugi, S., Doll, H.A. and Fairburn, C.G. (2013). Enhanced cognitive behaviour therapy for adolescents with anorexia nervosa: An alternative to family therapy? *Behaviour Research and Therapy*, [online] 51(1), pp.R9–R12. Available at: <https://www.sciencedirect.com/science/article/pii/S0005796712001441> (Accessed 5 March 2022).

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