Integrating psychology and dietetics: ‘Understanding Eating Habits’ Group

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Aims of this session

✓ Provide an overview of where the group fits into our pathway
✓ Provide an overview of the ‘Understanding Eating Habits Group’
✓ Share experiences of integrating psychology and dietetics within a group setting
✓ Share outcome data and findings
Weight Management Pathway

1. **GP Choose and book**
   - Investigations, patient questionnaire
   - Further investigations

2. **One Stop Consultant and Dietitian**

3. **Decision on treatment**
   - Treatment options will overlap depending on individual needs

4. **Eating Habits Group**
   - Dietitian Two monthly
   - Consultant Six monthly
   - Psychology
   - 10% weight loss
   - No red flags
   - Min 6 months in T3

5. **Refer to bariatric team**

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Group details

• 10 weeks, 2 hours per session
• Group size - min 14, max 20 people
• Group resources given weekly to build portfolio. Weekly challenges set relating to course content.
• Outcome data collected from pre and post questionnaires. We do not use weight as a measurement.
Therapeutic models/approaches

- CBT
- Mindfulness
- Compassion focused therapy
- Motivational interviewing
Group limitations

• Day time group only
• Limited to 3 groups per year, although seems to meet current demand
• No group support following the group
• Uptake is mainly female

“While it did not bother me, some, males might find it a bit daunting to be in an exclusive female group.”
Outcome measures

• Referrals, uptake, retention rates
• Global EDE-Q:
  – Restraint
  – Eating concern
  – Shape concern
  – Weight concern
• No. of BE episodes with perceive loss of control
• Hospital anxiety and depression scale
  – Anxiety
  – Depression
Referrals

<table>
<thead>
<tr>
<th>Month</th>
<th>No. ref</th>
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<tbody>
<tr>
<td>May-16</td>
<td>20</td>
</tr>
<tr>
<td>Sep-16</td>
<td>40</td>
</tr>
<tr>
<td>Feb-17</td>
<td>20</td>
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<tr>
<td>May-17</td>
<td>20</td>
</tr>
<tr>
<td>Sep-17</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>120</td>
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</tbody>
</table>

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Working together for a healthy Somerset

Taunton and Somerset NHS Foundation Trust

No. ref
% Uptake from referral

- May-16
- Sep-16
- Feb-17
- May-17
- Sep-17
- Total

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Together we make the difference
Together we make the difference

Descriptive statistics and paired-samples t-test results comparing the mean pre and post scores on questionnaires measuring restraint, eating concern, shape concern and anxiety.

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>M (SD)</th>
<th>T-test</th>
<th>Sig.</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>PRE</td>
<td>POST</td>
<td></td>
</tr>
<tr>
<td>Restraint</td>
<td>51</td>
<td>2.40 (1.41)</td>
<td>1.91 (1.29)</td>
<td>2.55</td>
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<tr>
<td>Eating Concern</td>
<td>51</td>
<td>3.10 (1.49)</td>
<td>2.04 (1.28)</td>
<td>5.49</td>
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<tr>
<td>Shape Concern</td>
<td>51</td>
<td>4.95 (.99)</td>
<td>4.21 (1.54)</td>
<td>5.48</td>
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<tr>
<td>Anxiety</td>
<td>51</td>
<td>10.27 (4.96)</td>
<td>9.06 (4.39)</td>
<td>1.84</td>
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</table>
Descriptive statistics and Wilcoxon Signed-Ranks results comparing pre and post results on the measures of weight concern, global, BED and depression

<table>
<thead>
<tr>
<th></th>
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<th>Median (Range)</th>
<th>Z score</th>
<th>Sig.</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>PRE</td>
<td>POST</td>
<td></td>
</tr>
<tr>
<td>Weight Concern</td>
<td>51</td>
<td>4.40</td>
<td>3.80</td>
<td>-3.23</td>
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<tr>
<td>Global</td>
<td>51</td>
<td>3.74</td>
<td>3.26</td>
<td>-5.03</td>
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<tr>
<td>BED</td>
<td>50</td>
<td>5.00</td>
<td>2.50</td>
<td>-2.51</td>
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<tr>
<td>Depression</td>
<td>51</td>
<td>9.00</td>
<td>7.00</td>
<td>-2.57</td>
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</table>
Patient evaluation - comments

“This course has been the best thing I’ve ever done! For the first time in my life I feel different about my weight and the person I am”

“I’m excited to put things learnt into practice & feel I have all I need to continue my journey.”

“Didn’t think it would be helpful but certain things have started resonating.”

“It was very helpful as it explained a lot of questions & answers I have.”
“I've found this group very helpful, I think reading and re-reading my pack will be very helpful for me maintaining a healthier future.”

“It was very helpful as it explained a lot of questions & answers I have.”

“Really useful and thought provoking, kept me thinking between sessions”

“Found group very beneficial and supportive. My self-esteem/confidence has improved. Not felt dictated to which was good. No blame.”
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Addiction-like eating behaviour scale (AEBS)

Use of technology

Follow up data collection

Use of language Course/Workshop/group

New into group

New Developments
Reflections

• Reinforces the importance of reducing isolation for patients – “It’s not just me”
• Value of working collaboratively
• Upskilling of both the psychologist and the dietitian both within the group and within 1:1
• Impact on subsequent 1:1 work
Thank you for listening

Any questions?

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References


• Fairburn, C. (2008) cognitive behaviour therapy and eating disorders, The Guilford Press: Chichester,

• Thank you to the Canadian Obesity Network for the image https://www.flickr.com/photos/144769815@N06/32557774170/