Integrating psychology and dietetics: ‘Understanding Eating Habits’ Group

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Together we make the difference
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

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GP
Choose and book

Investigations, patient questionnaire

One Stop
Consultant and Dietitian

Further investigations

Decision on treatment

Treatment options will overlap depending on individual needs

Dietitian
Two monthly

Consultant
Six monthly

Eating Habits Group

Psychology

Refer to bariatric team

10% weight loss
No red flags
Min 6 months in T3
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
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Hunger & fullness

Appetite regulation

Dieting & food myths

Internal & external bias

Self & weight

Self efficacy

Self care

Barriers

Food & mood

Lapse, relapse & total collapse

Strategies, techniques

Function of food

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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

No. ref

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

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% Uptake from referral

Together we make the difference
% Completed

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<thead>
<tr>
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<th>May-16</th>
<th>Sep-16</th>
<th>Feb-17</th>
<th>May-17</th>
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<tr>
<td>%</td>
<td>85</td>
<td>75</td>
<td>80</td>
<td>70</td>
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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.

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<tr>
<th></th>
<th>N</th>
<th>M (SD)</th>
<th>T-test</th>
<th>Sig.</th>
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<tr>
<td></td>
<td></td>
<td>PRE</td>
<td>POST</td>
<td></td>
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<tr>
<td>Restraint</td>
<td>51</td>
<td>2.40 (1.41)</td>
<td>1.91 (1.29)</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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### Descriptive statistics and Wilcoxon Signed-Ranks results comparing pre and post results on the measures of weight concern, global, BED and depression

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<tr>
<th></th>
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<th>Median (Range)</th>
<th>Z score</th>
<th>Sig.</th>
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<tr>
<td></td>
<td></td>
<td>PRE</td>
<td>POST</td>
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<tr>
<td>Weight Concern</td>
<td>51</td>
<td>4.40</td>
<td>3.80</td>
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<tr>
<td>Global</td>
<td>51</td>
<td>3.74</td>
<td>3.26</td>
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<td>BED</td>
<td>50</td>
<td>5.00</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.”
Patient evaluation - comments

“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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New Developments

Addiction-like eating behaviour scale (AEBS)

Use of technology

Follow up data collection

Use of language

Course/Workshop/group

New into group
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?
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/