

April 12-13, 2018
Amsterdam, Netherlands

J Obes Eat Disord 2018, Volume: 4
DOI: 10.21767/2471-8203-C1-009

NEW APPROACHES TO THE CHALLENGE OF OBESITY CO-MORBID WITH AN EATING DISORDER

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Binge eating disorder (BED) and bulimia nervosa (BN) are characterised by recurrent episodes of binge (uncontrolled overeating) and (in BN) by extreme weight control behaviours such as fasting to compensate for the binge eating. BED and BN are the commonest eating disorders in the community and are associated with poor mental and physical health, including obesity and metabolic disorder. Further, the rate of recurrent binge eating and fasting/severe dietary restriction are increasing in the general population and since 1995 have increased most, 7 to 11-fold, in Australians with comorbid obesity. Current standard care, cognitive behaviour therapy (CBT) however, results in poor recovery or abstinence from binge eating in a large proportion of people with BN and BED, and fails to address this important co-morbidity, overweight or obesity. We have developed an integrated therapy for BED comorbid with obesity, namely, a healthy approach to weight management and food in eating disorders (HAPIFED). HAPIFED is designed to integrate CBT for BN/BED with behavioural weight loss approaches and (unlike standard CBT) to be multidisciplinary. HAPIFED introduces approaches that address healthy lifestyle changes and appetite awareness with the aim of reducing eating as a means of emotion regulation. It allows reduced energy intake and education around specific food choices – a necessary element in weight management. In a phase 2 feasibility study, 8 of 11 participants with BED/BN completed a group-based HAPIFED. Participants reported improved eating disorder symptoms, 6 had modest reductions in weight, and all rated the suitability

and success of HAPIFED highly. This presentation will discuss the further testing and development of HAPIFED for co-morbid obesity and eating disorders and the role of other new approaches including cognitive remediation therapy and medications.

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