



CBT Guided Self Help

– Part 2/3

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So what is GSH CBT?

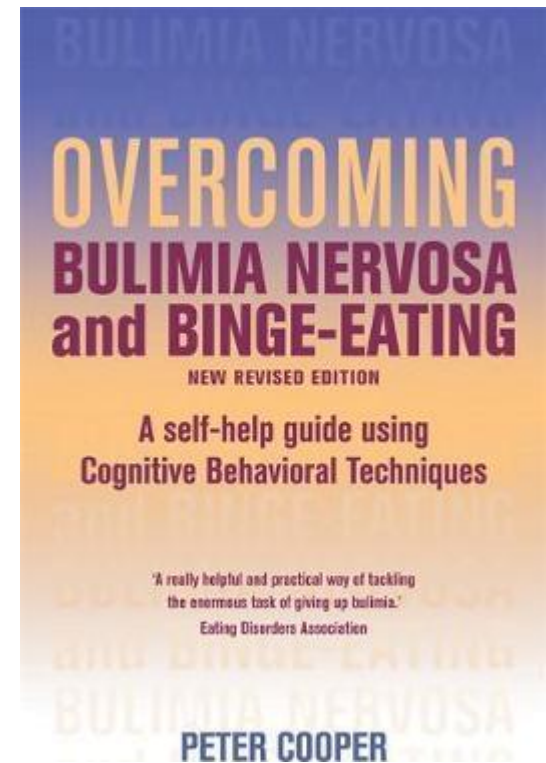


Beth Shelton - 2018 NEDC Members'
Meeting 1-2 June Sydney

- A guide for people with BN, BED or Disordered Eating to get out of the ED trap
- A highly structured, but client-centred treatment program with a step by step guide
- A coherent way for clients and therapists to work together on BN, BED or Disordered Eating
- Contains the basic elements necessary for restoring eating habits to 'normal'

The GSH manual – “the expert?”

- Specific and detailed guide for CBT-SH treatment
- General psychoeducation
- Info for family/carers



CB GSH:

6 step cumulative model:

Step 6: Changing Your Mind

Step 5: Eliminating Dieting

Step 4: Problem Solving

Step 3: Intervening in Binge Eating

Step 2: Instituting a meal plan

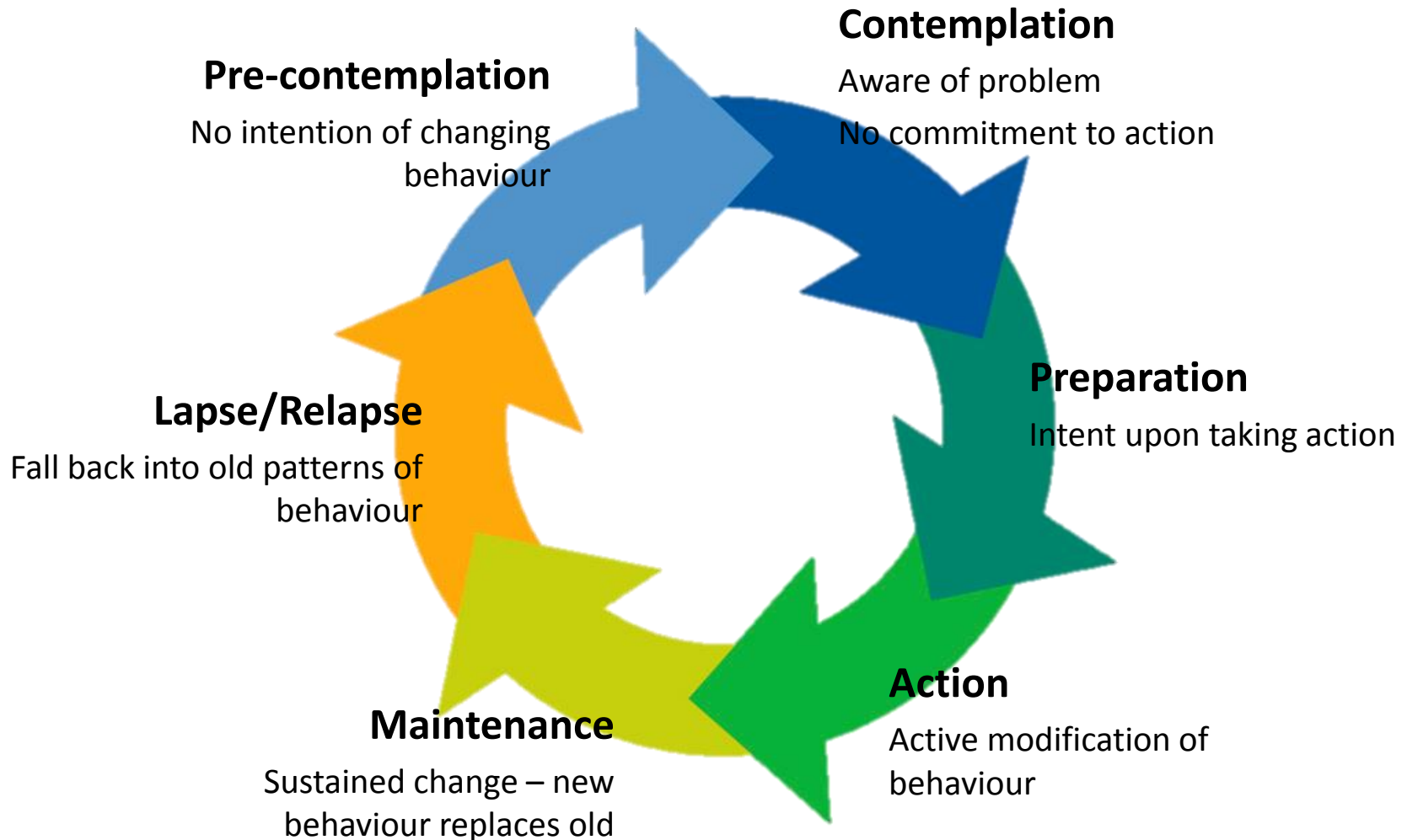
Step 1: Monitoring Your Eating

Preparing clients for GSH

Points to consider:

- Treatment match
- Making change a high priority
 - is now the right time to tackle the ED?
- Why is it worth changing?
 - Decisional balance sheet
- Early change predicts outcome
- Tx expectation predicts outcome
- Informed consent & Tx clear expectations

Readiness to Change



When CBT-GSH is not Appropriate

- Medical instability
- Very low body weight (the person would meet criteria for Anorexia Nervosa-Binge/Purge type)
- People with a medical condition in which eating can have a significant impact (such as diabetes), and women who are pregnant, need medical care
- GP health monitoring not in place
- Suicidal ideation or behaviours
- Psychosis
- Severe Major Depression
- Persistent substance misuse
- Major life events or crises that interfere with CBT-GSH
- Inability to attend treatment
- Anticipated absence of the practitioner

Setting up treatment

- Weekly weighing:
 - WHY? Rationale?



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Step 2: Instituting a meal plan

Step 1: Monitoring Your Eating

Step 1 Monitoring your eating:



- *Keep a detailed record every day of when you eat, what you eat, whether you felt what you are was excessive, whether you felt out of control, whether you vomited or took laxatives, and other circumstances relating to your eating*

Step One: Monitoring Your Eating

- First emphasis is to record not to change!
- what, when, where it was eaten,
- if what was eaten felt excessive,
- if felt out of control,
- if vomited or took laxatives
- other circumstances

Time	Food & liquid intake	Location	* (Bin ge)	V / L	Situation/thoughts/feelings
7:30	2 pieces of) toast with) margarine.) 1 mug of) coffee.)	Home table			7:00am: Weighed myself. 65kgs Less than last night. Pleased.
10am	1 can of diet Pepsi	At desk			Cake in the staff room for colleague's birthday. Pleased I didn't eat any. Only coffee for lunch, trying to make up for breakfast
12pm	Mug of coffee	At desk			
1:30	Mug of coffee	At desk			
4:30	200gm packet of chips	Home in front of the TV	*		Sat in front of TV when I got home. Felt bored, tired and hungry. Started eating.
4:40	1 doughnut		*		
4:45	1 doughnut		*		
4:53	1 can of diet lemonade		*		
4:59	6 chocolate biscuits		*		
8:30	1 packet choc biscuits		*	V	5:35pm: Weighed myself. 65.7kgs. Vomited.
				V	Felt awful, couldn't look in mirror, vomited

Practice Skills: Emphasis Points

- It is a psychological tool rather than a food record ie a monitoring sheet for food and mood
- be accurate and honest
- complete your food records in “real-time”
- do not record calories, grams etc.
- carry your food records with you wherever you go

Step One: Grace:

Grace started monitoring her eating last week. She brings her monitoring sheets to her GSH session



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Grace

Day Monday

Date 19.6.16

Time	Food and drink consumed	Place	*	v/l	Context and comments
11am	Coffee	Kitchen			
1pm	banana + 1 spoon yoghurt (strawberry)	work			lunchtime. hungry
5pm	chips, chocolate	home my room	*		bad food. feel bad
6pm	pizza, coke, i/c	my room	*		
6.30	i/c, biscuits, lolly shakes	my room	*	✓	

Before moving on to step two

- **Has the client been monitoring?**
- **Does monitoring need improvement?**
 - Is she writing down everything? including binges?
 - Is she doing this soon after having eaten?
- **Is she keeping records systematically?**
- **Is she reviewing her sheets regularly to identify patterns in her eating habits?**
- **Troubleshooting?**