Emotion-Focused Therapy Promising for Eating Disorders

**BY SUSAN LONDON Contributing Writer**

SEATTLE — Patients with eating disorders who receive emotion-focused therapy experience a decrease in psychological morbidity and possible reductions in binging and vomiting, preliminary results of the first evaluation of this therapy for eating disorders show.

“Emotion has long been implicated in triggering eating disorders,” noted Dr. Leslie Greenberg, who directed the psychotherapy research at the Academy for Eating Disorders.

In an emotion-focused therapy (EFT) model, the activation of emotion schematic memories and the experience of overwhelming affect play key roles in the pathogenesis of these disorders. “A central function in our view of the eating disorder is that it can be understood as an attempt to control affect,” he said at the conference, which was cosponsored by the University of New Mexico.

EFT is an evidence-based treatment for depression, trauma, and couples distress, noted Dr. Greenberg, who is director of Psychotherapy research center at York University, Toronto.

“The hypothesized effect of EFT for eating disorders is that it will enhance people’s sense of efficacy about dealing with the eating disorder, leading to change in dysfunctional behavior patterns,” he said. When patients are able to understand that the disorder is functioning to regulate their emotions, they are then able to handle their emotions in a new way, which gives rise to a sense of hope that they can control the disorder, he said.

“Once the emotions have been dealt with, this will render the eating disorder unnecessary as a means of coping,” he said.

Dr. Greenberg and his colleagues enrolled 14 women with eating disorders in the study. The average age of the women was 33 years. Seven (50%) of them had bulimia nervosa, four (29%) had binge-eating disorder, and three (21%) had an eating disorder not otherwise specified. The mean duration of eating problems was nearly 20 years.

The women were equally divided into two groups and received group EFT consisting of 16 weekly sessions, each lasting 90 minutes. In the first session, the therapist focused on psychodynamic aspects of binging and vomiting, as well as gaining an awareness of their emotions, according to Dr. Greenberg.

In the remaining sessions, two or three women engaged in dialogue on self-critical issues, self-interuptive issues, and unfinished business.

On average, the women attended 12 sessions and had five day-work treatmenets. Therapists reported that the women in group 1 (a start-up group) had a comparably higher prevalence of atypical eating disorder presentations and Axis II disorders, as well as poorer attendance.

This treatment should ‘enhance people’s sense of efficacy about dealing with the eating disorder.’

**Dr. Greenberg**

The women in group 2 had a higher prevalence of typical eating disorder presentations and greater focus.

The results, which Dr. Greenberg stressed were preliminary, indicate that after therapy, the patients had significant improvements from baseline in the Toronto Alexithymia Scale and the Rosenberg Self-Esteem Scale.

In the two groups combined, there were nonsignificant reductions in the number of binging episodes (from roughly 4 to 2 in a 2-week period) and the number of vomiting episodes (from roughly 4 to 2 in a 2-week period). However, when group 2 was analyzed alone, the reduction was significant.

Dr. Greenberg noted that two patients in group 1 actually began binging more during therapy. “Both worked on abuse or separation issues, and they got quite disregulated within the group. But this is not necessarily bad,” he said. “This is one of the cases of sometimes getting worse before you get better.”

Both patients entered individual EFT and one entered day treatment, and they eventually became asymptomatic. In group 2, all patients had a reduction in binging, and three no longer binged at all after therapy. There was also a comparable reduction in vomiting in this group. “So we see that this is possibly a mechanism, that people feel now more hope that they will be able to tackle the eating disorder because they have some understanding of their emotional process and its relationship to their eating disorder,” he said.

Finally, when patients rated the helpfulness of various aspects of EFT, they gave highest scores to learning what they needed to respond in their emotions (mean score on a 6-point scale, 5.82) and feeling understood by group members (5.84), he said.

Other aspects of EFT that they found helpful included doing self critical chair work (5.73), understanding how their emotions and symptoms connected (5.72), gaining awareness of their emotions (5.71), and understanding their disorder as defined by other members of their group (5.5).

Dr. Greenberg reported that he had no conflicts of interest in association with the study.