

***The Efficacy of Dialectical Behavior Therapy for
The Treatment of Eating Disorders***

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Abstract

Eating disorders (EDs) are some of the most common yet detrimental mental illnesses in the United States. EDs have the highest mortality rate of any mental illness second only to opioid overdose (Arcelus et al., 2011). This literature review investigates the last decade of research on Dialectical Behavior Therapy (DBT) for the treatment of eating disorders. DBT and recent adaptation, Radically Open-DBT (RO-DBT), have been proven highly effective for the treatment of EDs. DBT's unique emphasis on treating chronic emotional dysregulation yields more efficacious outcomes in comparison to therapies that focus on symptom management.

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Author

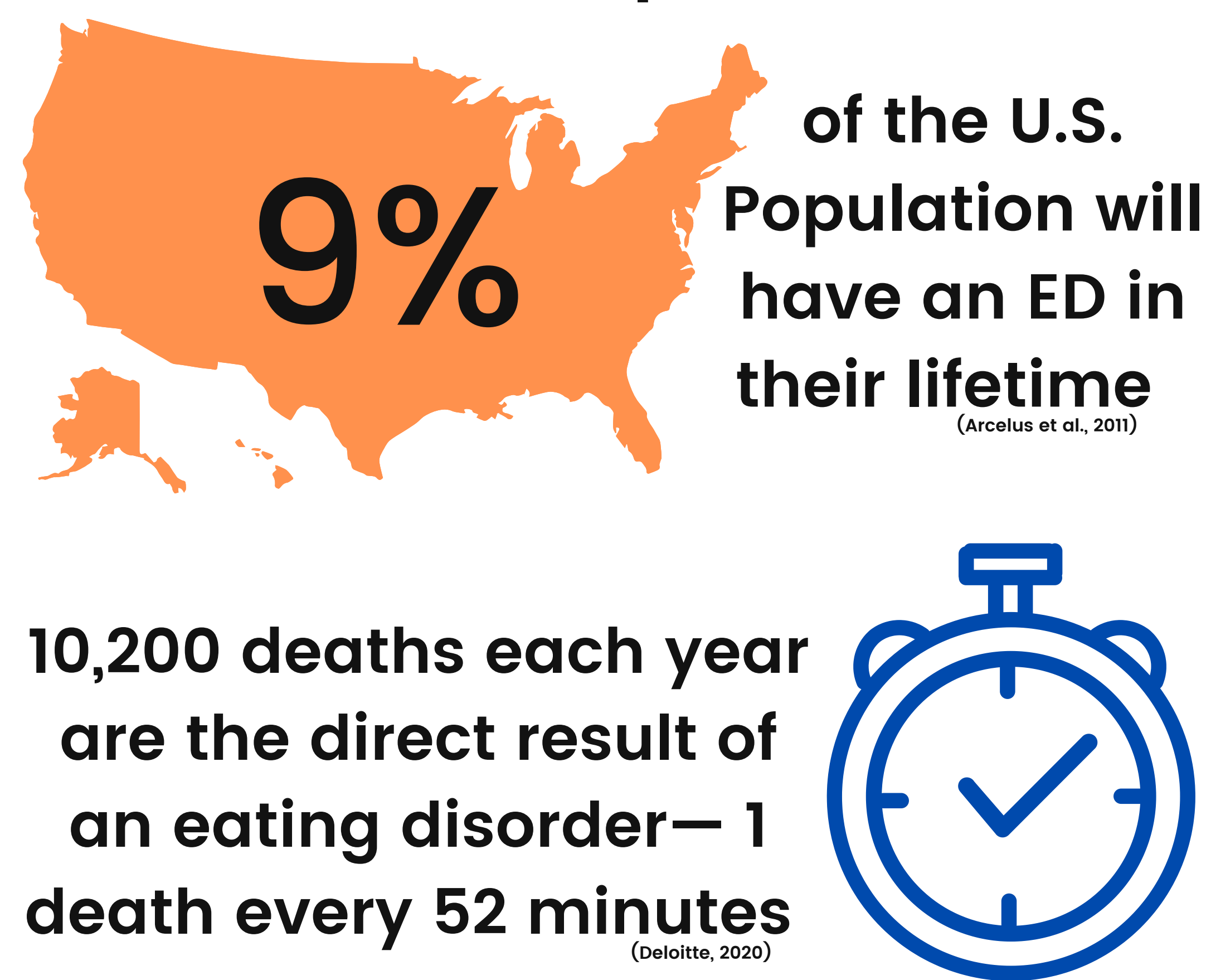
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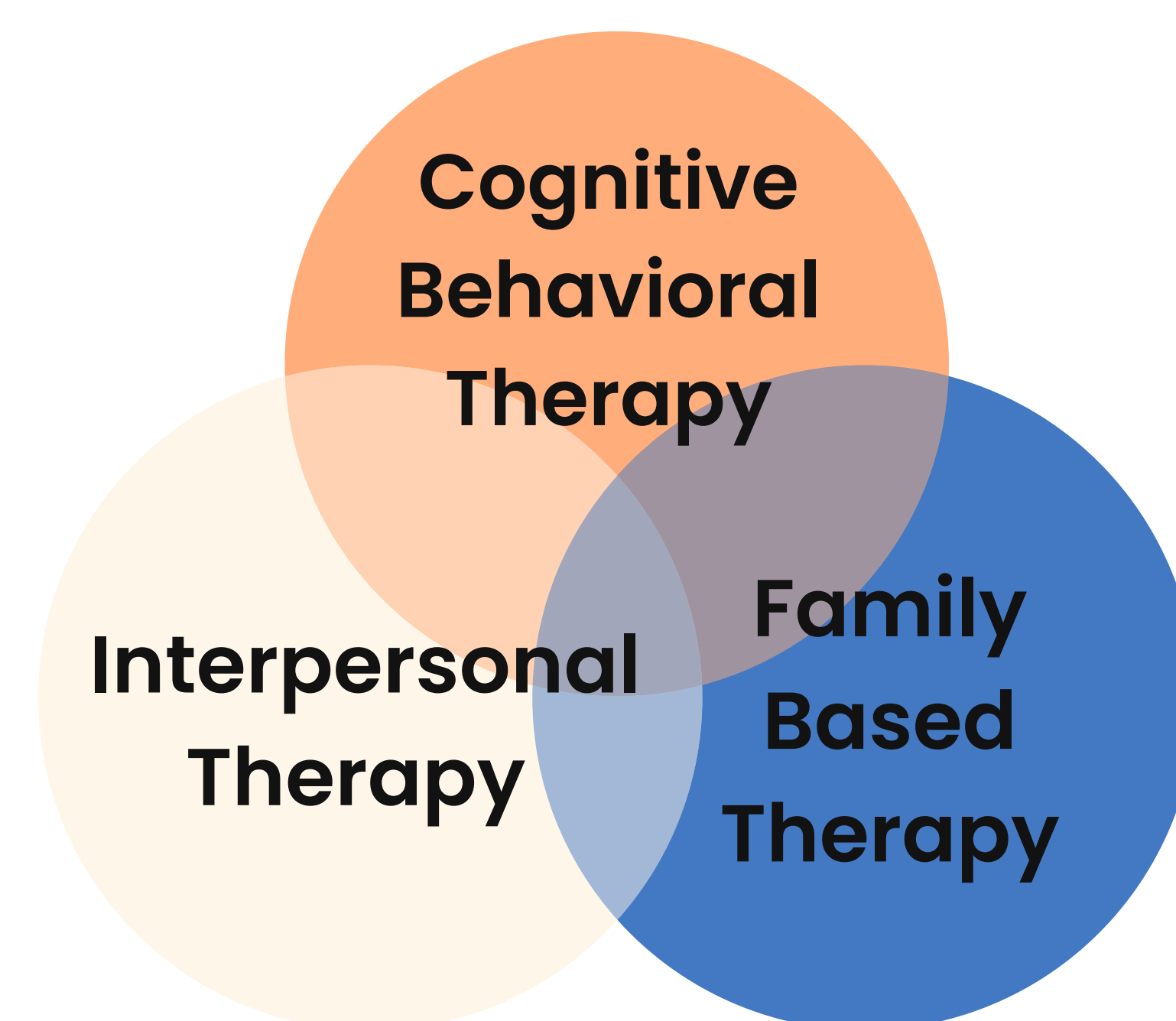
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This literature review investigates the last decade of research on Dialectical Behavior Therapy (DBT) for the treatment of eating disorders. DBT's unique emphasis on treating chronic emotional dysregulation yields more efficacious outcomes in comparison to therapies that focus on symptom management.

National Impact of EDs



Evidence-Based Treatments



"CBT and IPT protocols are not designed to manage and treat the cycles of self-injurious and maladaptive behaviors" (Federici & Wisniewski, 2013)

DBT as a Treatment Modality

Modes of DBT:

- Individual psychotherapy
- **Group skills training**
- 24 hour access to **telephone skills coaching**
- Therapist consultation groups

DBT Skill Modules:

- Mindfulness
- Distress tolerance
- Emotion regulation
- Interpersonal effectiveness

Standard DBT	Radically Open-DBT
Treating "undercontrol" behaviors	Treating "overcontrol" behaviors
Core problems: emotional dysregulation & impulse control	Core problems: social signaling deficits & low openness
Teaches distress tolerance, conflict avoidance, impulse restraint	Teaches flexible responding, social connection, vulnerable expression
Radical Acceptance "Letting go of fighting reality"	Radical Openness "Seek the things one wants to avoid in order to learn"

(New Harbinger, 2017)

DBT for Binge-Eating Disorder & Bulimia Nervosa

In an RCT of adults diagnosed with BED, the DBT treatment group showed significant reduction in BMI, reported lower instances of binge-eating episodes, and showed a decrease on the Difficulties in Emotion Regulation Scale (Rahmani et al., 2017)

In a study of adults with BN and AN receiving DBT, clients with BN showed the most significant improvements in decreasing ED behaviors and increasing emotional regulation, and maintained improvements at follow-up (Brown et al., 2020)

A meta-analysis of 9 studies found that DBT reduced the number of ED episodes and increased a sense of hopefulness in women with BN and co-occurring depression. (Lenz et al., 2014)

The Power of DBT Skills

"Interventions that included DBT skills training were more effective in reducing self-harm behaviors and emotional dysregulation than psychotherapy without skills training." (Linehan et al., 2015)

DBT skills training intervention decreased binge-eating episodes in 89% of participants diagnosed with BED (Linehan et al., 2001)

2 hours of weekly DBT skills training added to standard CBT protocol decreased ED behaviors in sample of women with AN + BN (Ben-Porath et al., 2014)

RO-DBT for Anorexia Nervosa

At the end of a study with adults diagnosed with AN-restricting receiving RO-DBT, 35% were in full AN-R remission, 55% were in partial remission, and the overall response rate was 90%

All participants demonstrated increases in body mass index (BMI), decreases in eating disorder behaviors, and self-reported reductions in psychological distress. (Lynch et al., 2013)

In sample of women with AN receiving RO-DBT, all who completed showed significant decreases in ED behaviors, quality of life was reported to have improved, and overcontrol behaviors were decreased (Isaksson et al., 2021)

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