



Hans-Christoph Friederich
Beate Wild
Stephan Zipfel
Henning Schauenburg
Wolfgang Herzog

Anorexia Nervosa

Focal Psychodynamic
Psychotherapy

 hogrefe

Anorexia Nervosa

About the Authors

Hans-Christoph Friederich, MD, is Head of the Department of Psychosomatic Medicine and Psychotherapy at the University Düsseldorf. His main research interests are the neurobiology and psychotherapy of eating disorders.

Beate Wild, PhD, is a senior scientist whose research mainly focuses on eating disorders, mental comorbidity in older age, and statistical methods.

Stephan Zipfel, MD, is Head of the Department of Psychosomatic Medicine and Psychotherapy at the University Hospital Tübingen. His research focuses on eating disorders, psychooncology, somatic symptom disorder, and research in medical education.

Henning Schauenburg, MD, is a senior physician and scientist in the field of psychotherapy and psychotherapy process research in mental disorders.

Wolfgang Herzog, MD, is Head of the Department of General Internal Medicine and Psychosomatics at the University Hospital Heidelberg. His research mainly focuses on eating disorders, somatic symptom disorder, and health care research.

Anorexia Nervosa

Focal Psychodynamic Psychotherapy

**Hans-Christoph Friederich, Beate Wild,
Stephan Zipfel, Henning Schauenburg,
and Wolfgang Herzog**

In collaboration with Sandra Schild and Miriam Komo-Lang



This document is for personal use only. Reproduction or distribution is not permitted.

From H.-C. Friederich, B. Wild, S. Zipfel, H. Schauenburg, & W. Herzog: *Anorexia Nervosa* (ISBN 9781616765545) © 2019 Hogrefe Publishing.

Library of Congress Cataloging in Publication information for the print version of this book is available via the Library of Congress Marc Database under the Library of Congress Control Number 2018952869

Library and Archives Canada Cataloguing in Publication

Friederich, Hans-Christoph [Anorexia nervosa. English]

Anorexia nervosa : focal psychodynamic psychotherapy / Hans-Christoph Friederich, Beate Wild, Stephan Zipfel, Henning Schauenburg, and Wolfgang Herzog ; in collaboration with Sandra Schild and Miriam Komo-Lang.

Translation of: *Anorexia nervosa : fokale psychodynamische Psychotherapie.*

Includes bibliographical references. Issued in print and electronic formats.

ISBN 978-0-88937-554-3 (softcover).--ISBN 978-1-61676-554-5 (PDF).--ISBN 978-1-61334-554-2 (EPUB)

1. Anorexia nervosa--Handbooks, manuals, etc. 2. Anorexia nervosa--Diagnosis--Handbooks, manuals, etc.
3. Anorexia nervosa--Treatment--Handbooks, manuals, etc. 4. Psychodynamic psychotherapy--Handbooks, manuals, etc.
I. Title. II. Title: Anorexia nervosa. English.

RC552.A5F75 2018

616.85'2620651

C2018-904488-8

C2018-904489-6

The authors and publisher have made every effort to ensure that the information contained in this text is in accord with the current state of scientific knowledge, recommendations, and practice at the time of publication. In spite of this diligence, errors cannot be completely excluded. Also, due to changing regulations and continuing research, information may become outdated at any point. The authors and publisher disclaim any responsibility for any consequences which may follow from the use of information presented in this book.

Registered trademarks are not noted specifically as such in this publication. The use of descriptive names, registered names, and trademarks does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The cover image is an agency photo depicting models. Use of the photo on this publication does not imply any connection between the content of this publication and any person depicted in the cover image.

The present volume is a translation of Hans-Christoph Friederich, Wolfgang Herzog, Beate Wild, Stephan Zipfel, & Henning Schauenburg, *Anorexia nervosa: Fokale psychodynamische Psychotherapie* (2014, ISBN 978-3-8017-2582-2), published under license from Hogrefe Verlag GmbH & Co. KG, Germany; revised and adapted for the English-speaking market.

English translation by Viola Renner; English editing by Lena Warrington

© 2019 by Hogrefe Publishing

<http://www.hogrefe.com>

PUBLISHING OFFICES

USA: Hogrefe Publishing Corporation, 7 Bulfinch Place, Suite 202, Boston, MA 02114
Phone (866) 823-4726, Fax (617) 354-6875; E-mail customerservice@hogrefe.com
EUROPE: Hogrefe Publishing GmbH, Merkelstr. 3, 37085 Göttingen, Germany
Phone +49 551 99950-0, Fax +49 551 99950-111; E-mail publishing@hogrefe.com

SALES & DISTRIBUTION

USA: Hogrefe Publishing, Customer Services Department,
30 Amberwood Parkway, Ashland, OH 44805
Phone (800) 228-3749, Fax (419) 281-6883; E-mail customerservice@hogrefe.com
UK: Hogrefe Publishing, c/o Marston Book Services Ltd., 160 Eastern Ave.,
Milton Park, Abingdon, OX14 4SB, UK
Phone +44 1235 465577, Fax +44 1235 465556; E-mail direct.orders@marston.co.uk
EUROPE: Hogrefe Publishing, Merkelstr. 3, 37085 Göttingen, Germany
Phone +49 551 99950-0, Fax +49 551 99950-111; E-mail publishing@hogrefe.com

OTHER OFFICES

CANADA: Hogrefe Publishing, 660 Eglinton Ave. East, Suite 119-514, Toronto, Ontario, M4G 2K2
SWITZERLAND: Hogrefe Publishing, Länggass-Strasse 76, 3012 Bern

Copyright Information

The e-book, including all its individual chapters, is protected under international copyright law. The unauthorized use or distribution of copyrighted or proprietary content is illegal and could subject the purchaser to substantial damages. The user agrees to recognize and uphold the copyright.

License Agreement

The purchaser is granted a single, nontransferable license for the personal use of the e-book and all related files.

Making copies or printouts and storing a backup copy of the e-book on another device is permitted for private, personal use only.

Other than as stated in this License Agreement, you may not copy, print, modify, remove, delete, augment, add to, publish, transmit, sell, resell, create derivative works from, or in any way exploit any of the e-book's content, in whole or in part, and you may not aid or permit others to do so. You shall not: (1) rent, assign, timeshare, distribute, or transfer all or part of the e-book or any rights granted by this License Agreement to any other person; (2) duplicate the e-book, except for reasonable backup copies; (3) remove any proprietary or copyright notices, digital watermarks, labels, or other marks from the e-book or its contents; (4) transfer or sublicense title to the e-book to any other party.

These conditions are also applicable to any audio or other files belonging to the e-book. Should the print edition of this book include electronic supplementary material then all this material (e.g., audio, video, pdf files) is also available in the e-book-edition.

Cover image: © Katarzyna Białasiewicz – iStock.com

Format: PDF

ISBN 978-0-88937-554-3 (print) • ISBN 978-1-61676-554-5 (PDF) • ISBN 978-1-61334-554-2 (EPUB)

<http://doi.org/10.1027/00554-000>

This document is for personal use only. Reproduction or distribution is not permitted.

From H.-C. Friederich, B. Wild, S. Zipfel, H. Schauenburg, & W. Herzog: *Anorexia Nervosa* (ISBN 9781616765545) © 2019 Hogrefe Publishing.

Foreword

*“I do not suffer and must then be well.”
“Not only does she not sigh for recovery, but she is not
ill pleased with her condition, notwithstanding all the
unpleasantness it is attended with.”*

Lasègue (1873/1997, p. 495)

Much of what we know about the perplexing nature of and contradictions in the psychology of anorexia nervosa goes back to Charles Lasègue’s careful and nuanced observations above. Based on these, he issued the following stark warning to clinicians:

“Woe to the physician who, misunderstanding the peril, treats as a fancy without object or duration, an obstinacy which he hopes to vanquish by medicines, friendly advice, or by the still more defective resource, intimidation.” (Lasègue, 1873/1997, p. 493)

In other words, never mistake anorexia nervosa for a passing phase that can easily be fixed.

Today, 150 years later, Lasègue’s early descriptions are still very pertinent, as anorexia nervosa remains an extremely challenging disorder to treat. Psychological therapy of anorexia nervosa is hard, as the confluence of several factors creates a “perfect storm.” Patients themselves present as inexpressive, or even outwardly bland, giving little away on how they feel. Typically they are very attached to their symptoms, minimize or down-play the seriousness of, or outright threat to their life, from their disorder and are highly ambivalent about treatment. In contrast, family members are understandably often extremely vociferous about their concerns and, in their desperation, may helplessly vacillate between bribery and threats to their relative. Clinicians themselves may feel overwhelmed, fearful, or torn between different feelings and courses of action.

This book is the first-ever evidence-based psychodynamic psychotherapy treatment manual for clinicians working with people with anorexia nervosa. It was written by leading experts in brief psychodynamic psychotherapy and in clinical management and research into psychobiology of anorexia nervosa. Based on their rich clinical and research expertise, these authors have modified the

psychodynamic treatment approach to tailor it to the characteristics and needs of this challenging patient group.

The efficacy of the manualized disorder-focused treatment approach presented here was confirmed by the multi-centre randomized controlled ANTOP study of outpatient treatments of anorexia nervosa, currently the largest study of its kind. Patients found the approach highly acceptable. The authors are to be congratulated on the development of this novel, evidence-based treatment manual, which constitutes a very useful clinical and research resource.

The present manual is primarily geared towards therapists with a psychodynamic treatment orientation. However, for therapists working with other treatment approaches it constitutes a valuable aid, to help inform about the unique characteristics and paradoxes of this devastating illness. The book opens insights into the preoccupations, anxieties, and broader inner world of patients with anorexia nervosa, which form the basis for the understanding of the specific psychopathology and are crucial for the development of a robust therapeutic relationship. To help decide on the main treatment focus in a given case, the starting point for the treatment is a detailed initial interview, using criteria of the Operationalized Psychodynamic Diagnosis system. Treatment is centred around a specific therapeutic focus and, combined with a particular therapeutic stance, is structured into three therapy phases. These phases are described in detail in the book, through illustrative case stories and examples of intervention strategies and helpful patient–therapist dialog. The manual is a wonderful resource for broadening therapist understanding and behavior in relation to key features of the illness. To address nutritional aspects of anorexia nervosa, a dietetic guidance document is integrated into the manual.

The evidence from the large ANTOP study, supporting the efficacy of this approach, together with the fact that the manual has been road tested by therapists from ten large eating disorder centres across Germany, attests to the practical applicability of this manual. It is hoped that in its current translation the manual will reach a wide readership and thereby broaden options for outpatient treatment of patients with anorexia nervosa in the English-speaking world. In addition, it is hoped that the manual will act as a catalyst for future psychotherapy research.

Taken together, there are many compelling reasons to wish this book wide dissemination and uptake amongst psychotherapists and researchers alike.

Ulrike Schmidt, December 2018
Professor of Eating Disorders, Head of the Department of
Psychological Medicine, Institute of Psychiatry,
Psychology & Neuroscience,
King's College London, UK

Reference

Lasègue, E.-C. (1873/1997). On hysterical anorexia (a). *Obesity Research*, 5, 492–497.

Preface

Anorexia nervosa, unlike any other chronic illness, provokes a wide range of reactions in observers from “sympathetic identification with the affected person, to curiosity and surprise, or even admiration” (Habermas, 1994, p. 14).

Restrictive eating behavior and self-induced extreme underweight are the most obvious distinguishing characteristics of anorexia nervosa. Observed from a psychodynamic vantage point, patients can be seen to be attempting to stabilize their fragile feelings of self-worth, identity, and autonomy, with the key function of triumphing over their powerful feelings of “hunger” and denouncing other primary needs. Interconnected with this are feelings of uniqueness and exceptionality. The self-destructive consequences of their forced attempts at independence are an increasing state of being underweight, which is associated with social isolation and loss of positive interpersonal contacts, and which may lead to premature death. This set of dynamics, for its part, is disconcerting, and causes in turn an intensification of the patient’s anorexic symptoms. The disease-related symptom of *restrictive eating behavior* is influenced by constitutional factors (genetic, epigenetic, endocrinological, etc.) and also includes sociocultural aspects.

The treatment of anorexia nervosa is seen as challenging, mostly because of the pronounced difficulty of winning patients over for treatment and having them adhere to a predetermined therapy setting. This is due to the strong fixation patients have on their symptoms (often combined with partial disease denial), which is accompanied by a pronounced avoidance, an extreme need for autonomy, and a strong subjective gratification in the symptoms. This is the reason the basic initial goal of every anorexia nervosa treatment plan is winning the patient over to the therapeutic process. In relation to treatment success, it is preferable that treatment begins in the early stages, especially because the chronic underweight tends to lead, together with psychophysiological adaptation processes, to the perpetuation of the anorexic symptomatology.

According to the national treatment guidelines for eating disorders of the American Psychiatric Association (APA, 2006), the Association of the Medical Societies in Germany (AWMF, 2011), and the UK National Institute for Health and Care Excellence (NICE, 2017), physically stable patients who are not suffering from

severe physical or psychological comorbidities should primarily receive outpatient psychotherapeutic treatment. Systematic analysis of the efficacy of such outpatient psychotherapy has recently been intensified. In the context of the promotion of psychotherapy networks in Germany and funded by the German National Ministry for Education and Research between 2006 and 2013, the efficacy of outpatient psychodynamic psychotherapy for the treatment of anorexia nervosa has been closely investigated. In a large, multicenter randomized controlled trial (the Anorexia Nervosa Treatment of Outpatients study, or ANTOP study), evidence from secondary analyses was collected that showed that a manualized and specifically tailored psychodynamic approach could be superior to treatment as usual (i.e., conventional treatments) at 1-year follow-up (see Section 6.2: The ANTOP Study).

Anorexia nervosa is characterized by multiple contradictory behaviors: the pursuit of an ideal autonomy and the wish for security, inner uncertainty and “splendid isolation”, the hoarding of food and starving. These *aporia* constitute the fascination of anorexia nervosa and are all part of the challenge of treating this disorder. The goal of this manual is to provide a deeper understanding of the discrepancies in the inner experiential world of patients suffering from anorexia nervosa. At the same time, suggestions are made for disorder-specific adaptations of psychodynamic interventions and of the therapeutic stance. Our suggestions specifically focus on the repertoire of therapeutic behavior in order to expand the range of competences in the treatment of anorexia nervosa patients.

While we were developing this manual, many patients and their families, as well as our colleagues, showed interest in, and helped contribute to, our research. A heartfelt thank you goes out to them. Especially noteworthy has been the work of C. Growther, I. Eisler, and U. Schmidt from the Maudsley Group (Institute of Psychiatry, Kings College London, UK); the work of the members of the work-group Anorexia Nervosa in generating the German guidelines for eating disorders (under the charge of S. Herpertz), and more specifically, those for anorexia nervosa (under the charge of A. Zeeck); and that of the therapists involved in the ANTOP study, in providing valuable suggestions for the manual during the workshops; as well as the contributions of H. Kächele, A. Sandholz, and T. Grande in sharing their extensive experience as supervisors for psychodynamic therapy in the treatment of anorexia nervosa patients.

This manual was first published in German in April 2014. Due to the considerable international interest in the landmark ANTOP study, published in the journal *Lancet* (Zipfel et al., 2014),

we decided to also publish an English translation of the manual. The current book represents a complete revision of the German publication and integrates the published research findings of the ANTOP study to date.

December 2018

Hans-Christoph Friederich
Beate Wild
Stephan Zipfel
Henning Schauenburg
Wolfgang Herzog

Contents

Foreword	v
Preface	ix
1 Description of the Disorder	1
1.1 Description	1
1.2 Definition	1
1.3 Epidemiological and Sociodemographic Data	6
1.4 Predisposing Factors	7
1.5 Course and Prognosis	8
1.6 Differential Diagnoses	9
1.6.1 Psychological Differential Diagnoses	9
1.6.2 Medical Differential Diagnoses	10
1.7 Comorbidity	11
1.8 Diagnostic Instruments and Documentation	12
2 Theories and Models	15
2.1 Psychodynamic Understanding	15
2.1.1 The Intrapsychic Dynamic	15
2.1.2 The Interpersonal Dynamic	17
2.2 Concepts of the Cognitive Behavior Theory Model ..	19
2.3 Family Dynamic Aspects	20
2.4 Sociocultural Aspects	21
2.5 Biological Aspects	21
3 Diagnosis	23
3.1 Operationalized Psychodynamic Diagnosis	23
3.1.1 Axis I: Experience of Illness and Prerequisites for Treatment	24
3.1.2 Axis II: Interpersonal Relations	24
3.1.3 Axis III: Conflicts	24
3.1.4 Axis IV: Structure	24
3.2 Initial Interview and Deriving a Focus for Therapy ..	25
3.3 Operationalized Psychodynamic Diagnosis of Anorexia Nervosa	26
3.3.1 Relationship Patterns	26
3.3.2 Topics of Conflict	27
3.3.3 Structural Impairments	30
3.4 Therapeutic Handling of the Focus	30