Invited Essay

A cognitive behavioural theory of anorexia nervosa

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Abstract

A cognitive behavioural theory of the maintenance of anorexia nervosa is proposed. It is argued that an extreme need to control eating is the central feature of the disorder, and that in Western societies a tendency to judge self-worth in terms of shape and weight is superimposed on this need for self-control. The theory represents a synthesis and extension of existing accounts. It is 'new', not so much because of its content, but because of its exclusive focus on maintenance, its organisational structure and its level of specification. It is suggested that the theory has important implications for treatment. © 1998 Elsevier Science Ltd. All rights reserved.

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1. Introduction

Anorexia nervosa remains a challenge in terms of understanding and treatment. It is still seen by clinicians as “one of the most frustrating and recalcitrant forms of psychopathology” (Vitousek et al., in press). There are many different perspectives on the disorder, including sociocultural views, family views, cognitive behavioural accounts and neurobiological perspectives (see Brownell and Fairburn, 1995; Szmukler et al., 1995). Similarly there are many different approaches to its treatment, including family therapy, cognitive behaviour therapy and pharmacotherapy (see Garner and Garfinkel, 1997). Some accounts of the disorder focus on its development; others on its maintenance: often the distinction is either not made or is not clear (Cooper, 1995). In this paper we present a new cognitive behavioural formulation of the maintenance of anorexia nervosa. We have chosen this perspective since cognitive behavioural accounts of the maintenance of other psychiatric disorders have led to important advances in treatment (see Clark and Fairburn, 1997). For example, this has been true of depression (Beck

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et al., 1979; Craighead et al., 1998), panic disorder (Clark, 1986; Barlow et al., 1998) and, most notably in this context, bulimia nervosa (Fairburn, 1981; Wilson and Fairburn, 1998).

2. Evolution of cognitive behavioural accounts of anorexia nervosa

The origins of cognitive behavioural accounts of anorexia nervosa can be traced back to the clinical observations of Hilde Bruch. Despite being a psychoanalyst in orientation, she emphasised the importance of these patients’ thinking style; for example, she stressed the “paralyzing sense of ineffectiveness, which pervades all thinking and activities of anorexic patients” (Bruch, 1973, p. 254). Bruch’s ideas were subsequently refined and extended by Garner and Bemis in two seminal articles (Garner and Bemis, 1982, 1985) in which they applied to anorexia nervosa the principles of Beck’s cognitive theory and therapy of depression (Beck et al., 1979). These papers describe what is still the leading cognitive behavioural account of anorexia nervosa.

The cognitive behavioural view of Garner and Bemis (1982, 1985) has since been elaborated by Vitousek (previously Bemis) and colleagues in a series of articles that have focused on the role of information processing (Vitousek and Hollon, 1990), self-representation (Vitousek and Ewald, 1993), personality variables (Vitousek and Manke, 1994), and motivation (Vitousek et al., in press) respectively. Vitousek has summarised the account in the following terms:

Reduced to its essence, the cognitive–behavioural model holds that anorexic and bulimic symptoms are maintained by a characteristic set of overvalued ideas about the personal implications of body shape and weight. These attitudes have their origins in the interaction of stable individual characteristics (such as perfectionism, asceticism, and difficulties in affect regulation) with sociocultural ideals for female appearance. Once formed, the beliefs influence the individuals who hold them to engage in stereotypic eating and elimination behaviors, to be responsive to eccentric reinforcement contingencies, to process information in accordance with predictable cognitive biases, and, eventually, to be affected by physiological sequelae that also serve to sustain disordered beliefs and behaviors. (Vitousek, 1996, p. 384.)

Various authors have modified this cognitive behavioural account while retaining its central premise that the extreme concerns about shape and weight are the core feature that maintains the disorder (for example, Wolff and Serpell, 1998). Other authors have taken a different cognitive behavioural perspective; for example, Guidano and Liotti (1983) proposed that the central feature of anorexia nervosa is a deficit in cognitive structures relating to personal identity but how this view accounts for the disorder’s self-perpetuating and egosyntonic character was not specified. Of particular interest in the context of the present paper is the ‘functional analysis’ of Slade (1982) in which he suggested that a need for control is central to the development and maintenance of anorexia nervosa. This need is expressed in dieting, which is reinforced both positively through the resultant feelings of success, and negatively through fear of weight gain and avoidance of other difficulties. As a result, the dieting intensifies,
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