

tier3

Weight
Management Service

NHS

**Doncaster and Bassetlaw
Teaching Hospitals**

NHS Foundation Trust

CBT Session 6

www.dbth.nhs.uk

Welcome back!

- Any difficulties accessing the website / filling in forms?
- Any Significant reflections after last session?
- Homework completed?
- Any questions?

Course content.....

1. Stigma, changing perspectives and the compassionate self
2. Breaking down resistance to change and goal setting
3. Mindfulness
4. Positive reframing of emotions and thought challenging
5. Food rule challenging, fighting cravings and changing habits
6. Preparing for tier 4 / bariatric surgery and relapse prevention

How are you getting on with..

1. Food rule challenging?
2. Fighting cravings?
3. Changing habits?

Relapse prevention

First rule of relapse prevention.....

1) Prepare for a lapse / relapse

A lapse is a one-time (or temporary) step back on a recovery journey.

Whereas a relapse refers to a more prolonged return of an unwanted behaviour, which someone has previously managed to control or quit completely.

As human beings, lapses in effort towards difficult goals are inevitable, life gets in the way and we are far from perfect

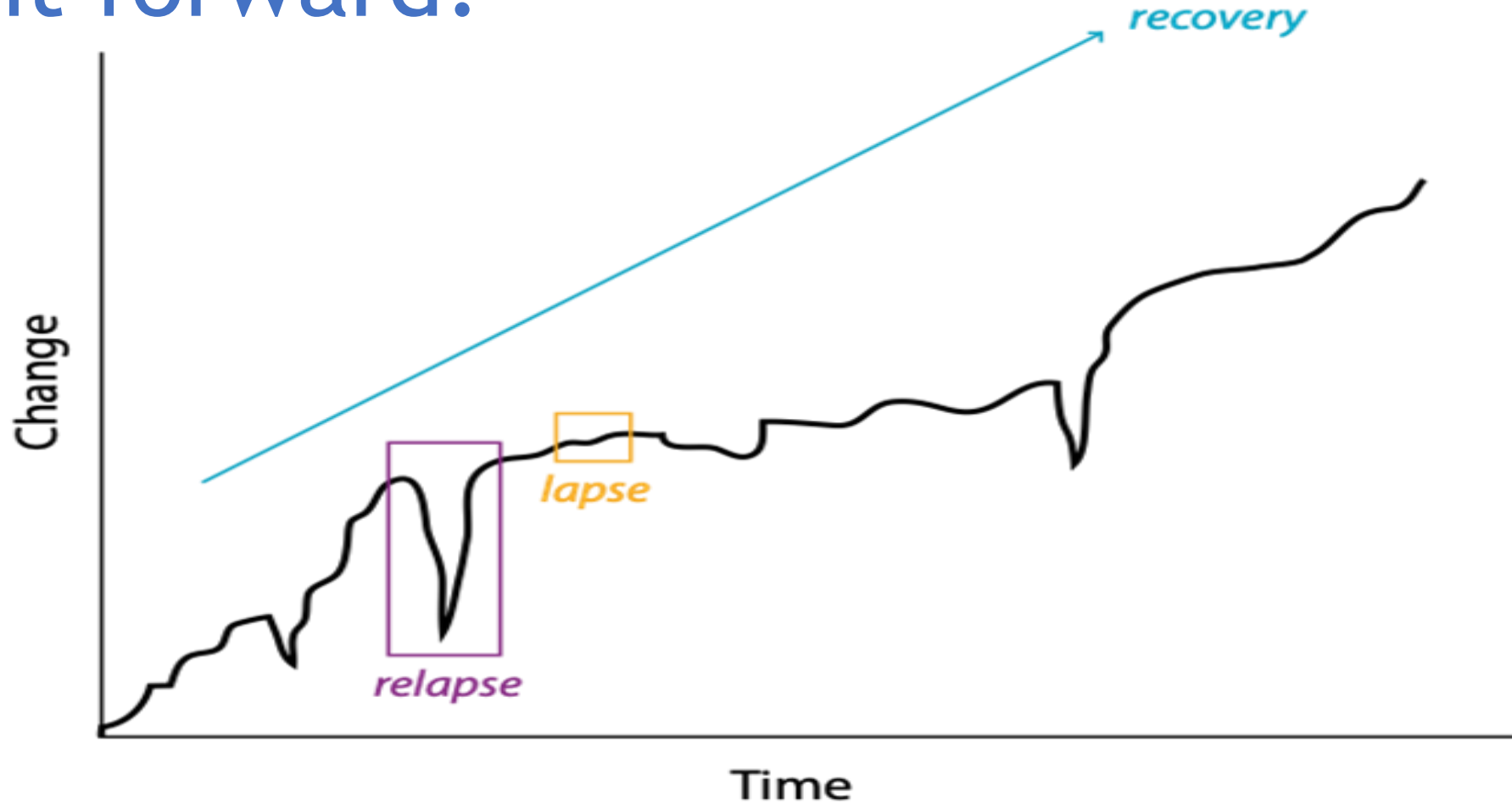
Life is a
rollercoaster

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Accept the natural ups and downs of life!

- Remember from session 3 – mindfulness; all emotions serve a function
- It would not be helpful or normal to be happy all of the time; what goes up must come down!
- David Burns “if you are happy more than 60% of the time you need a mood stabiliser”
- We experience uncomfortable emotions for a reason – to highlight threats / mistakes, to learn from and grow.

A typical journey of recovery / growth is never straight forward!



What have your journey's
of weight loss been like in
the past?

Rule no.2

2) When a lapse happens be reflective and constructive not critical!

Learn from it; figure out how and why it happened, to minimise the risk of it happening again.

Without negative judgement e.g. I'm useless, I've failed again

This can mean all the difference between a temporary lapse, and a complete relapse into old negative behaviours.

Rule no.3

3) Don't give up!

If you allow self sabotaging negative thoughts to win over, and give up, you absolutely will **not** achieve your goals – self fulfilling prophecy

Challenge negative thoughts – **think positive** and create a positive self fulfilling prophecy

Lapses & Relapse

Experiencing a lapse or a relapse is not a sign of 'weakness', 'failure' or inability to recover.

They are signs that old ways of coping need to be replaced with new ones.

The most important thing to remember is that both lapses and relapses are normal & can be overcome.

What to do if you lapse / relapse:

1. Reflect on why / how it happened:
 - The trigger, e.g. situation / emotions
 - The environment, e.g. availability / temptations / people
 - The maintenance, e.g. negative thoughts / avoidance.
2. Be compassionate, and understanding towards yourself; e.g. What **need** is this behaviour trying to fulfil?
3. Review exercises covered in these sessions and previous dietary advice and put them into practise
4. Use recommended self help material
5. Seek professional help sooner rather than later to prevent a spiral

Preparing for tier 4 / bariatric surgery

Q. Do you have any particular concerns regarding this?

The current pathway:

Referred by G.P.
for specialist
weight
management
advice /
bariatric
surgery



Receive
specialist
weight
management
advice from a
tier 3 MDT for
6-24months

(6 months min for
BMI>50, 12 months
min BMI<50)



6-12 months:
MDT discussion
between tiers
3&4 to agree
suitability for
tier 4



Referred to tier
4 for
assessment for
bariatric
surgery

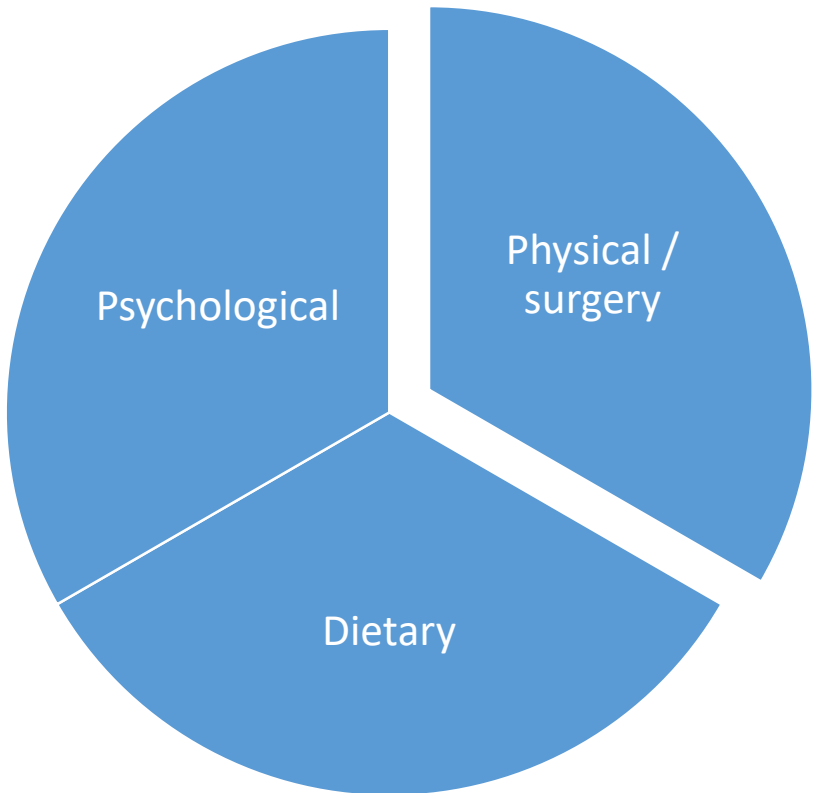
Current approx.
waiting times in this
service 24months

1st contact usually
around 12months –
offered detailed
bariatric surgery
information seminar

Why is a year in tier 3
necessary prior to bariatric
surgery?

Any suggestions?

For all the pieces of the puzzle to come together.....



**Life long
effective
weight
management**

Dietary Preparation:

Aims of Life Long Bariatric Diet:

- 3 regular meals of tea plate size portions of 'normal' textured foods per day
- Low fat, high protein, low sugar diet
- Avoid snacking/grazing in between meals
- Should take approximately 20 minutes to eat a 'normal' textured diet
- Fluids 30 minutes before/after meals
- Lifelong daily supplements

Moving away from:

- Excessive portions / binge eating
- Chaotic eating
- Skipping meals
- High fat, high sugar, energy-dense, micronutrient-poor foods
- Eating for non-hunger reasons / comfort eating
- Eating excessively fast
- Drinking whilst eating

Advice from The British Psychological Society:

- Emotional struggles are common post-surgery.
- Weight loss is sometimes less than anticipated and can take longer.
- Frustration can lead to lack of motivation and difficulty adhering to the post-operative diet (with some individuals over consuming or finding alternative ways to consume highly calorific foods).
- People who struggled with emotional eating before surgery may return to similar behaviours post-surgery, resulting in less than optimal weight loss.

Psychological advice continued.....

- Possibility of feeling uncomfortable with 'new look' and body image after losing a significant amount of weight.
- With rapid weight loss there often is sagging skin and many patients cannot afford cosmetic surgery to correct this.
- It is not uncommon for individuals to discover body image dissatisfaction in a new way, which unfortunately may result in issues with their relationships and intimacy.

Psychological advice continued.....

- Not all people will benefit from weight loss surgery to the same degree.
- The variation in weight loss success is due to the interplay between surgical, dietary and psychological variables.

The latter two you may be able to control!

But err on the side of caution if you don't feel ready,
you may waste your one opportunity.

Psychological Preparation:

Ensure you have tackled any causes of non-hunger eating:

- Addressing emotional distress in therapy / counselling
- Listening to and managing emotions effectively in the moment by problem solving and / or challenging irrational unhelpful thoughts
- Recognising unhealthy habits and swapping them with less damaging ones
- Being self aware / mindful of urges and actions
- Stay focused on goals and motivations for change
- Respect your pleasure needs and attend to them

The Psychologists 3 R's

- Resilience
- Reflective
- Readiness

Resilience:

- Having a good support network and using it
- Having a range of ways to cope with feelings/emotions and regularly practicing these e.g. hobbies, interests etc.
- Embedded alternatives to food when life is tough.

Reflective

- Be open and reflective re: your relationship with food
- Stepping back from urges/thoughts/feelings
- Practice kindness and compassion towards yourself

Readiness

- Is this really the right time?
- Are you ready / able to prioritise your health and wellbeing?
- Working on developing a neutral relationship with food; food isn't your friend or your enemy!
- Commitment to step away from your battle with food and diets - it has probably consumed so much of life your already....

Useful resources:

Further information on weight loss surgery can be found on the NHS website page: www.nhs.uk/conditions/weight-loss-surgery/

Peer support is available through a local face book page; Doncaster Bariatric Support And Advice Group:

<https://www.facebook.com/groups/330835927338691/>

Obesity UK Bariatric And Metabolic Surgery Support Group:

<https://www.facebook.com/groups/wlsinfo/>

Obesity UK support-groups: <https://www.obesityuk.org.uk/support-groups>

Any Questions?

Don't forget to check in with the website for the relevant handouts for today's session and fill in your final questionnaires

Thank you for your time
we hope you enjoyed the
sessions

We would be very grateful if you could fill in the
feedback questionnaire, your views are very
important to us.