

ENCOURAGEMENT
UNDERSTANDING HOPE
BODY DYSMORPHIC
CARE DISORDER
INSPIRATION RELAXATION
HOPE HEALTH LOVE
CONFIDENCE EXHILARATION
ACCOMPLISHMENT
STIMULATING LIGHTENING
COMFORT CLEAN REVITALISING
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Body dysmorphic disorder (BDD) is a condition that is often misunderstood. This leaflet aims to help you understand BDD — its causes, effects and treatment.

What is BDD?

BDD is a disorder where an individual believes they have a problem with the appearance of a part of their body, and that is all they can think about.

Another term for BDD still used in the UK is 'dysmorphophobia', although the media today sometimes refer to it as 'imagined ugliness syndrome' (which is a particularly unhelpful term as sufferers really believe they are ugly).

When does a concern with my appearance become BDD?

Many people are concerned with some aspect of their appearance, but to be diagnosed with BDD must be very distressing and have a serious effect on your life. For example, you may:

- avoid social and public situations; or
- try to hide the part of your body that you are not happy with by wearing heavy make-up, brushing your hair in a particular way or wearing loose clothes.

People who suffer from BDD may spend several hours a day thinking about their appearance and what they think is wrong with it. They may ask for constant reassurance about their appearance, repeatedly check their appearance in front of mirrors, pick their skin to make it smooth, or cut or comb their hair until they think it is perfect. They are very self-conscious, and may have a picture in their mind of the impression they give which no-one else can see and a feeling of shame that others do not experience.

What are the most common areas of the body involved in BDD?

People who suffer from BDD may think that there is something wrong with any part of their body, including their breasts or genitals. However, most sufferers are concerned with one or more aspects of their face. The most common concerns are with the nose, the hair, the skin, the eyes, the chin, the lips, or the overall body build. Sufferers may complain of a lack of symmetry, feel that something is too big or too small, or that it's out of proportion to the rest of their body.

How common is BDD?

It's hard to say as many people with BDD are too ashamed to talk about their problem, but one survey has suggested it affects nearly 1% of the population. It's more common in people with a history of depression and social phobia, and mild BDD is more common in women and young teenagers.

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How serious is BDD?

With the most severe cases, BDD can affect your ability to work or study as well as your social and family life. Many sufferers are single or divorced, suggesting that they find it difficult to form relationships. Some sufferers may be housebound, in hospital or attempt suicide.

Are sufferers aware of their problem?

Some sufferers usually realise that other people believe that their appearance is 'normal' and acknowledge that they're blowing things out of all proportion. Others are firmly convinced that they have a problem with their appearance and feel very alone and misunderstood.

What causes BDD?

From what little research there is, causes are thought to be psychological and biological.

BDD may have a genetic influence, and it usually develops when you were a teenager — a time when people are generally most sensitive about their appearance. You may have had bad experiences like being teased or bullied. You will have developed a low self-esteem, may fear being alone and isolated, and begin judging yourself by your appearance.

Is BDD linked with other illnesses?

You will usually feel demoralised or clinically depressed, you may suffer from social phobia and be afraid of social situations. Many BDD patients have also suffered from obsessive compulsive disorder (OCD) at some time in their life.

Are people with BDD vain?

No! People with BDD believe they are ugly or there is something wrong with them. They tend to be very secretive and reluctant to get help because they're afraid others will think they are vain or self-obsessed.

How is the illness likely to progress?

Many people with BDD regularly receive treatment from dermatologists (skin specialists) or cosmetic surgeons but with little satisfaction, or they become concerned about a different feature. Only years later do they get psychiatric or psychological help. Even when they do get help from a doctor or therapist, they often present other symptoms such as depression, social anxiety or OCD, and do not reveal their real concerns.

What treatments are available?

Contacting your GP is often the easiest way to get help and further treatment. He or she may refer you to a specialist for further assessment. This may lead to outpatient treatment or, if more serious, day or inpatient treatment.

If you're worried about talking to your GP, consider writing down your concerns and questions. You can:

- take a friend or family member with you;
- see another doctor in the practice; or
- join a new GP practice.

The type of professional support offered will depend on the services that are available in your area and the arrangements that your primary care trust (PCT) have with other health authorities or private providers. Treatment for BDD is also available privately through the Priory Group.

There has been very little research on the treatment of BDD. Two treatments that have been shown to work include cognitive behaviour therapy and antidepressant medication.

What is CBT?

Cognitive behaviour therapy (CBT) is based on a structured programme of self-help, helping you learn to change the way you think and act. During therapy, you will learn different ways of thinking about your problem and to refocus your attention away from yourself. You would learn to confront your fears and stop your rituals, such as checking mirrors and grooming yourself more than normal.

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What are the side effects of CBT?

The main side effect of the treatment is the anxiety you will feel in the short term. However, it will get easier and easier to face up to your fear and your anxiety will gradually reduce.

Why use antidepressants?

Certain types of antidepressants called SSRIs have been shown to be helpful.

How long will I need to take antidepressants?

You may have to take a high dose every day for at least 12 weeks so we can work out how effective it is. If the drug is effective, you will need to stay on it for at least a year.

What are the side effects of antidepressants?

Medication may have side effects, but most people suffer only minor irritations that decrease after a few weeks. If you do experience any side effects, we can adjust the dose or prescribe a different drug. The drugs are not addictive, but you should stop them only under medical advice.

Does treatment work?

Treatment works for many sufferers. However, some sufferers may feel reasonably well for a time then go back to old behaviour, while others remain chronically ill. Although there is no research on medication combined with therapy, if you have more severe symptoms then you are more likely to recover from BDD by combining the two.

Self help

Self help may be useful as the first stage of treatment or alongside other treatments. There are also several different self help leaflets and books available. You will need to find the right one for you.

Self help groups, such as those listed on the OCD Action website (www.ocdaction.org.uk), can be a useful support but they do not replace professional treatment. However, they can help sufferers and families understand that they are not alone, and offer valuable support and practical advice.

Recommended reading

'The broken mirror, understanding and treating body dysmorphic disorder' by Katherine Phillips (Oxford University Press)

Finding help

If you feel that you or a close relative are affected by BDD and would like help or more information, you can ask your GP or contact any of the following organisations can provide support.

OCD Action 0207 226 4000
(www.ocdaction.org.uk)

NHS Direct (England and Wales) 0845 4647
(www.nhsdirect.nhs.uk)

NHS 24 (Scotland) 08454 242424
(www.nhs24.com)

The Samaritans 08457 90 90 90
(www.samaritans.co.uk)

The British Association of Behavioural and Cognitive Psychotherapists can provide a list of accredited cognitive behaviour therapists, both private and NHS

01254 875 277
(www.babcp.org.uk)

Priory 0845 4 PRIORY
0845 4 774679
(www.priorygroup.com)

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If you are interested in receiving treatment from us, your GP will be able to refer you.

If you or your relative have private medical insurance, your insurer will probably insist that your GP refers you to us.

Why should I choose Priory?

Our service

At Priory, our committed and professional staff provide the highest standards of care, understanding and service for everyone. This service brings hope and confidence, allowing our patients to take control of their lives within a safe and secure environment.

Expertise and innovation

Through our close links with the public and private sectors, we've developed the expertise and innovation to offer consistent and successful treatment. And, as Europe's leading independent provider of specialist mental health, neuro-rehabilitation and special education services, we bring experience and an excellent reputation.

We admit patients 24 hours a day, seven days a week.

Edited by Dr David Veale MD FRCPsych,
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The Crystal Mark applies to wording only.



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The Priory Hospital Altrincham

Rappax Road, Hale, Cheshire, WA15 0NX
Phone: 0161 904 0050 Fax: 0161 980 4322

The Priory Hospital Bristol

Heath House Lane, Stapleton, Bristol, BS16 1EQ
Phone: 0117 952 5255 Fax: 0117 952 5552

The Priory Hospital Chelmsford

Stump Lane, Springfield Green, Chelmsford, Essex, CM1 7SJ
Phone: 01245 345 345 Fax: 01245 346 177

The Priory Hospital Glasgow

38-40 Mansionhouse Road, Glasgow, G41 3DW
Phone: 0141 636 6116 Fax: 0141 636 5151

The Priory Hospital Hayes Grove

Prestons Road, Hayes, Bromley, Kent, BR2 7AS
Phone: 020 8462 7722 Fax: 020 8462 5028

The Priory Hospital Hove

14-18 New Church Road, Hove, East Sussex, BN3 4FH
Phone: 01273 747 464 Fax: 01273 727 321

The Priory Hospital North London

Grovelands House, The Bourne, Southgate, London, N14 6RA
Phone: 020 8882 8191 Fax: 020 8447 8138

The Priory Clinic Nottingham

Ransom Road, Nottingham, NG3 5GS
Phone: 0115 9693 388 Fax: 0115 9693 381

The Priory Hospital Preston

Rosemary Lane, Bartle, Preston, Lancashire, PR4 0HB
Phone: 01772 691 122 Fax: 01772 691 246

The Priory Hospital Roehampton

Priory Lane, Roehampton, London, SW15 5JJ
Phone: 020 8876 8261 Fax: 020 8392 2632

The Priory Hospital Southampton

Hythe Road, Marchwood, Southampton, SO40 4WU
Phone: 023 8084 0044 Fax: 023 8020 7554

The Priory Ticehurst House

Ticehurst, Wadhurst, East Sussex, TN5 7HU
Phone: 01580 200 391 Fax: 01580 201 006

The Priory Hospital Woking

Chobham Road, Knaphill, Woking, Surrey, GU21 2QF
Phone: 01483 489 211 Fax: 01483 797 053

Woodbourne Priory Hospital

21 Woodbourne Road, Edgbaston, Birmingham, B17 8BY
Phone: 0121 434 4343 Fax: 0121 434 3270

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Priory Group, Priory House, Randalls Way,
Leatherhead, Surrey, KT22 7TP

Phone: 01372 860 400 Fax: 01372 860 401

Email: info@priorygroup.com www.priorygroup.com