PARTICIPANT RECRUITMENT INFORMATION

Our University of Auckland research team are interested in finding new ways to increase early access to specialist treatment for adults affected by anorexia nervosa.

Clear empirical evidence shows that prompt access to specialist treatment is predictive of full recovery however access to specialist funded services is typically limited to those with moderate to severe illness presentations both within New Zealand and internationally. This leaves poor treatment options for those with mild and subthreshold eating disorders, which captures an estimated 13.2% of females by the age of 20.

We are conducting a **pilot study** to assess the feasibility of a specialist self-help treatment workbook for mild and subthreshold cases of anorexia nervosa, that may not otherwise access treatment services.

We kindly request your assistance with identification and referral of appropriate participants to the study.



v2.0 06/02/2020 Feasibility of an early intervention self-help psychological treatment for adult anorexia nervosa in the primary care setting

Feasibility of an early intervention self-help psychological treatment for adult anorexia nervosa in the primary care setting

Inclusion criteria

- 1. 18 years or older
- 2. <u>Mild or subthreshold anorexia nervosa</u>, as per DSM-V criteria (over leaf). Formal diagnosis will be made by the study research fellow/clinical psychologist.
- Medically stable 3.
- 4. Have a body mass index > 17.0
- 5. No history of psychotic illness, prior specialist treatment for an eating disorder or current suicidal ideation.

If you identify any potential participants please direct their attention to the participant information flyer (download link: www.EDselfhelp.auckland.ac.nz) and email their details (with consent) to the study research fellow. Alternatively, you may prefer to prompt patients or service users to initiate their own referral by emailing the research fellow directly.

Potential participants will be contacted by the research fellow for a brief information and screening telephone call.

Research team

The project is being conducted by researchers at the University of Auckland.

If you have any questions, concerns or complaints about the study, you can contact the Principal Investigator Dr Marion Roberts or Research Fellow Dr Zara Godinovich, in the Department of General Practice and Primary Healthcare. For study referrals please contact the Study Coordinator Alexandra Neilson <u>anei697@aucklanduni.ac.nz</u>.

Dr Marion Roberts

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Dr Zara Godinovich Research Fellow and Clinical Psychologist Email: zara.godinovich@auckland.ac.nz

Ethical review

This project has been approved by Southern Health and Disability Ethics Committee (ref: 19/STH/189).

PARTICIPANT RECRUITMENT INFORMATION

Seeking study participants with mild or subthreshold anorexia nervosa (i.e. some but not all of the below are presenting):

DSM-V Diagnostic criteria for full threshold Anorexia Nervosa

- of the seriousness of the current low body weight.

Severity specifier

The minimum level of severity is based, for adults, on current body mass index (BMI) (see below) or, for children and adolescents, on BMI percentile. The ranges below are derived from World Health Organization categories for thinness in adults; for children and adolescents, corresponding BMI percentiles should be used. The level of severity may be increased to reflect clinical symptoms, the degree of functional disability, and the need for supervision.

<u>Mild</u>: BMI \geq 17 kg/m2 Moderate: BMI 16–16.99 kg/m2 Severe: BMI 15-15.99 kg/m2 Extreme: BMI < 15 kg/m2



A. Restriction of energy intake relative to requirements, leading to a significantly low body weight in the context of age, sex, developmental trajectory, and physical health. Significantly low weight is defined as a weight that is less than minimally normal.

B. Intense fear of gaining weight or of becoming fat, or persistent behaviour that interferes with weight gain, even though at a significantly low weight. C. Disturbance in the way in which one's body weight or shape is experienced, undue influence of body weight or shape is experienced, undue influence of body weight or shape is experienced.

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