



**East London**

**NHS Foundation Trust  
Information Governance**

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31<sup>st</sup> December 2024

**Our reference: FOI DA5770**

I am responding to your request for information received 5<sup>th</sup> December 2024. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF

Tel: 0303 123 1113  
Web: [www.ico.org.uk](http://www.ico.org.uk)

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We promise to work together creatively to: learn 'what matters' to everyone, achieve a better quality of life and continuously improve our services.  
**We care . We respect . We are inclusive**

**Chief Executive Officer:** Lorraine Sunduza  
**Chair:** Eileen Taylor

**Request:** I am writing to you under the Freedom of Information Act 2000 to request the following information from one or more of your Talking Therapies (IAPT) services within your Trust regarding data for adults with Body Dysmorphic Disorder (BDD).

**Question 1:** Please identify the Talking Therapies service that you are answering on Behalf of.

**Answer:** Newham Talking Therapies, Bedfordshire Talking Therapies and Tower Hamlets Talking Therapies.

**Question 2:** Please may you inform us whether Body Dysmorphic Disorder (BDD) appears on your drop-down menu as a diagnosis/ problem descriptor on for example IAPTus or PC-MIS software for measuring outcomes? (If not, what descriptor, do you use?)

**Answer:** Yes, BDD is available as a drop down menu diagnosis on IAPTUS.

**Question 3:** If it is not on the drop-down menu, can you identify people with BDD in a different way (for example, the number who have completed the Body Image Questionnaire for BDD)?

**Answer:** Not applicable.

**Question 4:** Do you use a digital front door like Limbic to screen clients? If yes, which one do you use, and does it directly screen for BDD?

**Answer:** No, the Trust does not use Limbic or a similar system. We collect information through our online referral form, for the majority of patients who refer themselves through our websites, and through other questionnaires, to support the telephone triage.

**Question 5:** Please inform us whether your staff ask the recommended screening question to help identify people with BDD? (The “Talking Therapies manual for anxiety and depression” recommends a question “Have you worried a lot about your appearance or the way a bodily feature looked and wish you could think about it less?”.) If you do not use the recommended question, do you routinely screen for BDD with a different question or leave it up to therapists to identify if it appears clinically relevant? (if yes, what is the question)?

**Answer:** In our current triage process, we do not screen for BDD presentations as a routine measure. If the triager identifies that there are possible BDD indicators then this will be followed up as part of the triage assessment but this is not asked as standard. If it is relevant to the individual then we would use screening questions around the patient’s relationship with their own body, mirrors, others, etc. These are found on the triage guide, along with other follow-up diagnostic questions.

**Question 6:** If you use a screening question to try to identify people with BDD, at what stage do you ask the question. e.g., (a) first contact/triage, (b) at assessment at step 2 guided self-help (c) at assessment for step 3 (high intensity)?

**Answer:** As above, we do not use a standard screening question to all patients but will follow-up on any indications of body-image concerns that are expressed at triage.



**Question 7:** Please inform us if you use the recommended Anxiety Disorder Specific Measure (ADSM) “The Body Image Questionnaire” (BIQ) in people with BDD to determine outcomes during therapy? If not, do you use the PHQ9 and GAD7 for BDD or something else?

**Answer:** The BIQ is available on IAPTUS for measuring but has only recently been incorporated into the calculations for clinical outcomes (Reliable Recovery and Reliable Improvement) on IAPTUS. Therefore prior to October 2024 clinical outcomes were calculated from PHQ-9 and GAD-7, with BDD being used as an additional supporting questionnaire where clinically appropriate.

**Question 8:** For people discharged in the year 1st April 2023 - 31st March 2024, please inform us of the total number of people you discharged (all diagnoses, at least one contact) and the total number of people discharged for BDD as the main problem.

**Answer:** Please see table below:

Total number of individuals discharged (all diagnoses, at least one contact)	Total number of individuals discharged for BDD as the main problem.
32,482	26

**Question 9:** For people discharged in the year 1st April 2023 - 31st March 2024, please inform us of the total number of people you took on for therapy (all diagnoses, at least 2 contacts) and the total number of people with BDD that you took on for therapy (at least 2 contacts) that were discharged.

**Answer:** Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Total number of individuals accepted for therapy (all diagnoses, at least 2 contacts).	Total number of people with BDD accepted for therapy (at least 2 contacts).
16,023	11

**Question 10:** Of those that you took on for therapy, what proportion / numbers of people with BDD received treatment at Step 2 with a PWP? If treatment is with a PWP, what proportion and number is a generic CBT for anxiety/ depression or other approach, and what proportion and number received a specific computer program or workbook for BDD? Please specify which one you use.

**Answer:** BDD is considered a step three presentation and patients with this as a primary problem would only be seen by High Intensity Cognitive Behavioural Therapists (CBT). The CCBT platform we use, Silvercloud, has a module available entitled ‘Space for Positive Body Image’ but this is rarely used.

**Question 11:** Of those with BDD who received treatment at Step 2 with a PWP, what was the average number of sessions for generic CBT for anxiety/ depression and for a specific computer program or workbook for BDD?

**Answer:** Not applicable. Patients with BDD are not treated at Step two.



**Question 12:** For people discharged from the 1st April 2023 to 31st March 2024 with the last treatment type being step 3, what was the average number of sessions in the episode for those treated with BDD and the average for all other diagnoses in the service?

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Average number of sessions in the episode for those treated with BDD	Average for all other diagnoses in the service (Talking Therapies)?
8.9	10.8

**Question 13:** For people discharged in the year 1st April 2023 - 31st March 2024, please inform us of the number of people with BDD who had 2 Body Image Questionnaires completed prior to discharge (and the number who had the GAD7 instead of the BIQ) at Step 2 and at Step 3 (high intensity)?

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Number of people with BDD who had two Body Image Questionnaires completed prior to discharge	Number who had the GAD7 instead of the BIQ) at Step two (guided self-help) and at Step three (high intensity)?
3	8 (all Step three)

**Question 14:** For people discharged in the year 1st April 2023 - 31st March 2024, what percentage and number of people with BDD in the treated sample achieve reliable improvement at Step 2 and Step 3? (Note the reliable change on the BIQ is  $\geq 10$  – please state if you are using the GAD7 for reliable improvement). How does that compare to the percentage and number who achieve reliable improvement on all the other diagnoses in the service?

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Percentage and number of people with BDD in the treated sample that achieve reliable improvement at Step two (guided self-help) and Step three (high intensity)?	Comparison to the percentage and number who achieve reliable improvement on all the other diagnoses in the service (Talking Therapies)?
91% (all Step three)  10 individuals  (BIQ is used where available, otherwise GAD-7)	69.9% - (overall percentage of patients who achieved reliable improvement)  10,720 individuals



**Question 15:** For people discharged in the year 1st April 2023 - 31st March 2024, what was the mean and standard deviation and number of clients of the Body Image Questionnaire in those taken on for treatment at Step 2 and at Step 3?

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Mean deviation and number of clients taken on for treatment at Step two (guided self-help) and at Step three (high intensity)?	Standard deviation and number of clients taken on for treatment at Step two (guided self-help) and at Step three (high intensity)?
54.3 (all Step three)	14.1

**Question 16:** For people discharged in the year 1st April 2023 - 31st March 2024, what was the mean and standard deviation and number of clients with BDD on

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Mean deviation and number of clients with BDD	Standard deviation and number of clients with BDD
33.3	3.7

**Question 17:** For people discharged in the year 1st April 2023 - 31st March 2024, what proportion and number achieve reliable improvement and recovery after treatment ( $\leq 40$  is no longer a case) with BDD on the Body Image Questionnaire at Step 2 and Step 3?

Answer: Please see table below:

Patients discharged between 1st April 2023 - 31st March 2024	
Proportion and number of patients who achieve reliable improvement after treatment with BDD*	Proportion and number of patients who achieve reliable recovery after treatment with BDD*
100%	33.3%
Three individuals	One individual

\*Step two – Not applicable – BDD is always treated at Step three.

**Question 18:** How many of your CBT therapists have attended a top up workshop or any other training in treating BDD?

Answer: Because BDD is not a frequent presentation in our services we do not tend to offer specific Continuing Professional Development (CPD) to the team, however, this is accessible via the online bespoke platform and it would be agreed in supervision when identified as an area of interest. We do not keep a record of who accesses the various modules.

Our clinicians who have attended the University of East Anglia (UEA) and Hertfordshire for their base training (the main training universities for our Bedfordshire service) will have completed some training on BDD as part of their training in complex and comorbid presentations.



**Question 19: Please can you do a survey of your CBT therapists in your service and ask them:**

**“How much of a priority do you think is training in BDD compared to other problems in your service?”**

- 1. Not a priority**
- 2. Low priority**
- 3. Medium priority**
- 4. High priority**
- 5. Essential**

**When you report the results, please provide the number of respondents and the individual scores (e.g. n=6 who scored 1,2,2,3,4,4) so we can calculate a mean across the whole of England.**

**Answer:** The Trust has reviewed question 19 of your request for information under the Freedom of Information Act (FOI) 2000.

Section 1(1) of the Freedom of Information Act 2000 states:

*Any person making a request for information to a public authority is entitled—  
(a) to be informed in writing by the public authority whether it holds information of the description specified in the request, and  
(b) if that is the case, to have that information communicated to them.*

East London NHS Foundation Trust does not record the information requested and is therefore unable to provide a response.



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