Beating BDD Episode 18 – Professor David Veale

We had a real treat in this episode: an interview with Professor David Veale. David is a leading specialist in BDD, based at the South London and Maudsley NHS Foundation Trust and at the Priory Hospital North London. He joined us to talk about how he came to specialise in BDD, and to answer questions sent in by people with the condition.

“Try not to focus on what you look like. Instead, try to do the things in life that are important to you – despite what you think you look like.”

What led David to become a specialist in BDD and what’s he researching now?  
[00:02.26] While a consultant psychiatrist at the Priory Hospital North London, David ‘missed’ BDD in a patient who subsequently took his own life. He began to study the condition and possible treatment in the days when very little was known about it.  
[00:04.46] Awareness of BDD, diagnosis, drug treatment and CBT training have improved but there’s still more to do.

What is best practice treatment? And what is he researching now?  
[00:05.59] Best practice is either BDD-specific CBT or an SSRI or both. The difficulty is in applying the strategies in the moment.  
[00:06.55] David wants to study the effects of psilocybin (a psychedelic in magic mushrooms). He’s also interested in whether changing your diet can help reduce symptoms. And he’s looking into the culture for women to over-fill their lips.  
[00:11.10] Compassion-based therapy is very relevant to help BDD sufferers feel safe rather than shamed.

How does BDD affect the way you see yourself?  
[00:12.31] It’s hard to know what people can see in their mind’s eye. Shame and being bullied can contribute to the ‘felt impression’ of someone with BDD.  
[00:14.10] It is possible to have BDD and still have days where you think you look good – often because the body image of a person with BDD isn’t stable.  
[00:18.47] Most people with BDD want to fit in rather than be seen as very attractive.  
[00:20.18] Comparing and ranking yourself is a way of reducing the sense of threat.

Is there research into bullying and BDD?  
[00:15.05] A good third of people with BDD have very specific memories about being bullied about their appearance in adolescence.  
[00:16.09] ‘Imagery rescripting’ is a possible treatment option, as is ‘eye movement desensitisation reprocessing’ (EMDR). (See links at the bottom of the show notes.)  
[00:17.25] Bullying can be dealt with early on in BDD treatment.

What role does shame play in BDD?  
[00:17.35] Someone who’s ashamed to tell someone they have BDD can think, ‘What’s the worst that can happen?’, then prepare for it through role play.  
[00:20.57] Someone with internal shame feels ugly but doesn’t care what others think. External shame is the belief that others are judging you. ‘True’ society anxiety is focused more on worth or performance, while true BDD is focused on appearance.

What do we know about BDD and PMT?
We know that mood can get worse in the pre-menstrual period so it’s not surprising if BDD gets worse too.

What are the effects of having cosmetic procedures?
- At least a third of people we treat in the clinic with BDD have had cosmetic procedures and aren’t satisfied or still have BDD.
- Some procedures may be ‘safer’ than others, while nose jobs seem to be quite risky even for people without BDD. If you’re having treatment for BDD it’s better to commit yourself to following the recommendations than having procedures.

Treatment: medications and CBT
- SSRIs aren’t a total no-no for bipolar disorder – it’s something to discuss with your doctor.
- The quality of the CBT you get is key to whether or not it works. There’s a clear pathway in the UK for national specialist services.

What does acceptance mean in BDD and how important is it to recovery?
- Acceptance involves embracing your body image and emotions without judgement and doing things despite them. But it’s a difficult thing to do.

What would you say to someone who’s struggling with BDD?
- Don’t give up. You’ve got nothing to lose by testing out your fears and acting against them.
- It’s important to try and connect with others and develop self-compassion.
- Try not to focus on what you look like. Instead, try to do the things in life that are important to you – despite what you think you look like.

Resources
- The BDD Foundation: bddfoundation.org
- The Compassionate Mind Foundation: www.compassionatemind.co.uk
- Webinar on using self-compassion skills with BDD: https://youtu.be/2GcJ-CWb780
- Treating BDD with imagery rescripting: www.researchgate.net/publication/281476243_Imagery_Rescripting_for_Body_Dysmorphic_Disorder_A_Multiple-Baseline_Single-Case_Experimental_Design
- Rob Willson’s webinar on imagery and rescripting memories in BDD: https://youtu.be/2GcJ-CWb780
- Treating BDD with EMDR: www.emdr.com/somatoform-disorder-studies