

Beating BDD Episode 43

The author, speaker and therapist Scott Granet has lived with BDD for many decades, but he's now learnt to manage the disorder so that it's 'no more than a minor nuisance'. In this conversation, Scott tells us about the childhood roots of his condition, the serious episodes that have marked his life, and how his daughter has changed his perspective on what matters.

"People value me well beyond what my hair looks like. I think intellectually I knew that before, but I never really felt it."

How Scott's life is now

[02:08] Scott acknowledges he might not have been as effective a therapist if he hadn't been able to manage his BDD.

[03:10] He now feels "normal" and can enjoy life, which is a huge relief. He especially enjoys spending time with his daughter. He also loves playing the guitar as it helps him put his BDD behind him for a while.

How his BDD started

[05:50] Scott's BDD came on suddenly at 19, when he became convinced that he was losing his hair and felt he couldn't live if he went bald. A dermatologist found nothing wrong.

[07:46] Other stressors – his parents' divorce, money problems, difficulty dating – likely fed the obsession, alongside what Scott believes is a biological susceptibility to the disorder. He also received a lot of attention for his hair as a young child.

[09:35] For the next decade he coped, but developed compulsions: extensive mirror checking, avoiding brushing his hair, cutting his own fringe.

[10:39] Scott's mother would try and reassure him, but it didn't help. And as BDD wasn't yet a recognised diagnosis, he had no name for what he was going through.

The serious episodes

[11:30] At 30, a second severe bout hit. Scott went from dermatologist to dermatologist seeking help for hair loss no doctor could see. One suggested he see a psychiatrist who didn't understand what was wrong either. Years of not being understood and given the wrong medications followed.

[13:50] The turning point came at 40, when a newsletter article about people obsessed with their appearance made Scott realise, for the first time, what he had. He started taking antidepressants which helped a lot, but he still had bad episodes.

[17:20] The worst one came during the pandemic, after 13 years of doing well. He'd thought he'd beaten it. He got back into therapy, switched medication, and has been much better since.

What's helped most

[20:10] CBT and medication have had a big impact for Scott. He stays very careful about mirror checking and reminds himself that his thoughts about his hair are his own and not shared by the people around him.

[21:50] His last therapist helped him see that severe childhood bullying and an absent father were genuine trauma feeding the BDD.

[25:55] Scott would like to see trauma become the next frontier in BDD research. One study suggests around 80% of people with BDD have some form of childhood maltreatment in their background.

[26:55] He finds that medication and CBT are very helpful in his work with clients with BDD – along with treating the whole person, not just the BDD.

[32:40] He's now cautiously optimistic that he'll continue to be okay, but he also knows he needs to address stress and watch for compulsive behaviours creeping back in.

A breakthrough moment

[34:50] About 20 years ago, after taking his daughter with him to his haircut appointment, she told him his hair looked 'goofy'. But they went to Costco anyway and had a great time, laughing over pizza. It hit him: she loved him for who he was, not how his hair looked. And if she felt that way, maybe others did too.

[37:50] His advice to anyone struggling is: ask yourself whether you think less of the people you love when they have bad hair or a spot. Almost always the answer is no – and people with BDD deserve to apply that same standard to themselves.

[38:55] With effective treatment now available for BDD, people can and do get better.

Resources

- The BDD Foundation: bddfoundation.org
- *Body Dysmorphic Disorder, Yours and Mine: a Personal and Clinical Perspective* by Scott M Granet

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