

Developing a Physiotherapy led physical activity and exercise pathway as part of a multidisciplinary treatment approach on an inpatient eating disorder unit

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Dysfunctional Exercise may be present in 20- 80% of people with ED and implicated in relapse and chronicity (SEES 2020)

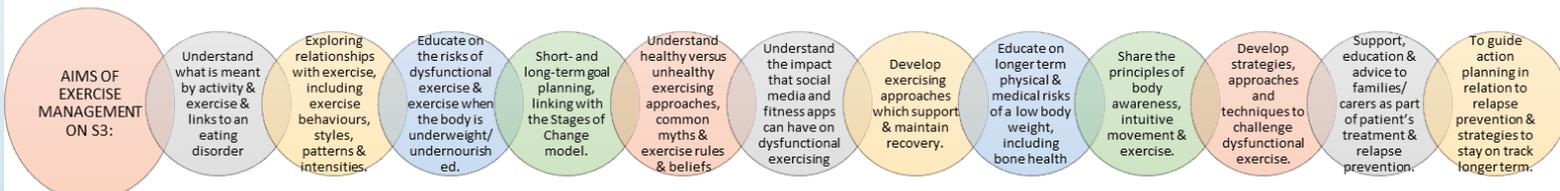


Background and Aim

Ward S3 is a Specialist Adult Eating Disorder unit in Cambridge, where the emphasis is on multi-disciplinary working in the delivery of its treatment pathways. Treatment pathways include both a recovery pathway and harm minimisation pathway. As part of these pathways, the aim was to develop and include a Physical Activity and Exercise pathway, to support patients to work towards a healthy relationship with exercise and activity during their admission. Evidence shows that if dysfunctional exercising behaviour is not addressed as part of eating disorder treatment, then risk of relapse is higher. Therefore, including management of dysfunctional exercise as part of multi-professional eating disorder treatment is essential in order to support development of a healthy relationship with exercise. Physiotherapy plays a key role in delivering this treatment as specialist exercise professionals, with "expertise in the body and the body in movement" (Probst, 2013)

Methodology

The pathway was developed through identification and formulation of key physiotherapy assessment and treatment interventions for supporting safe and appropriate movement, body awareness, activity and exercise, at different stages of an eating disorder and individual recovery. This was combined with key components of psycho-educational approaches relating to principles of healthy exercise engagement, and exercise prescription. As part of pathway development physiotherapy resources and exercise management worksheets were collated to develop a 'managing exercise and activity workbook' which provided a structure for psycho-educational and patient self-directed work in between practical and exploratory exercise and activity sessions. Review of the patients engagement in the pathway was included in multi-disciplinary meetings, patient reviews and care plan meetings.



Development of the physical activity and exercise pathway

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| <p>Admission and medical stabilisation</p> <ul style="list-style-type: none"> Goal: Assessing and supporting safe mobility and activity on the ward Physiotherapy assessment, as required – exercise, pain, mobility and function | <p>Formulation and weight restoration</p> <ul style="list-style-type: none"> medically stable or inline with medical recommendations Goal: Introduction of low-level activity and body awareness movement (>BMI 13.0) Supervised and guided ward based activity, e.g. Stretch and Relax/Body Awareness session Introduce Physical Activity and Exercise workbook | <p>Weight restoration</p> <ul style="list-style-type: none"> Goal: Incorporating appropriate activity and exercise in lifestyle alongside exercise management Supervised and guided Physical Activity on the ward: e.g. Pilates/Yoga/Strengthening and Core Stability group Begin exploration of community-based exercise opportunities Continue Physical Activity and Exercise workbook | <p>Maintenance and discharge planning</p> <ul style="list-style-type: none"> Goal: Developing longer term plan for physical activity and exercise Further community-based exercise opportunities Continued ward based exercise engagement Exercise relapse prevention work |
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Depending on progress, weight restoration, compensatory behaviours, exercise relationship

Outcome

Development of the pathway now supports individualised physical, functional and behavioural assessment in relation to exercise and body movement. Through the inclusion of the pathway on the ward, as part of the treatment pathways, Physiotherapy assessments and treatments are used to support patients to explore and understand their relationship with exercise, to plan goals & develop strategies for activity & exercise management. Following multidisciplinary assessment of both physical and psychological risk, where appropriate, patients are supported to engage in supervised and adapted physical activity and exercise. This takes place alongside weight restoration and psycho-educational sessions relating to exercise, to ensure exercise engagement remained safe and appropriate. The pathway was also developed to include transitional work for community integration and longer-term exercise management. The pathway has is now embedded within the multi-disciplinary treatment pathways on ward S3 and provides opportunity for continued review and progression of a patients exercise management along the pathway, as part of treatment and recovery. Compulsive Exercise Test (CET) outcome measures were included within the pathway process, being completed by patients during their admission, and will support future qualitative data analysis of multi-disciplinary treatment that includes exercise management.

Examples of feed back from patients who engaged in the pathway approach:

- "Exercise was such a big thing for me when I first came in, and it had taken over my life so much. A big way I coped with everything. But it wasn't a healthy way of coping at all, it was all consuming, compulsive and exhausting. I felt so stuck in it and needed to stop, but I didn't know how. Then physiotherapy sessions helped guide me, keep me safe, and break the exercise cycle I was in."
- When I first came in [exercise] had taken over my life so much. It was a big way in which I coped with everything, but it wasn't a healthy way to cope at all, it was all consuming, compulsive and exhausting. Then [therapist] came along & guided me through each step. I've come so far in my relationship with exercise, knowing I can stop, change, & do it because I want to not because I have to"
- "The sessions gave me an opportunity to explore my existing relationship with exercise for what it was, not what I thought it was, and how is could re-create the relationship I would like with exercise"
- "The theory enabled me to see and understand when and why the practical was introduced when it was, the impacts different activity can have on my body and how to target and strengthen specific areas in a safe and controlled way."
- "[Therapist] hasn't just taught me about exercise but how to have more fun; free of excessive restrictions, routines and punishment. Helping both my physical and internal strength to carry me through the next stage of this journey."

Conclusions and next steps

A multi-disciplinary team approach supports the inclusion of a physiotherapy led physical activity and exercise pathway, providing specialist assessment and treatment, through psycho-educational and practical interventions, for patients to challenge dysfunctional exercise behaviour as part of eating disorder treatment. Patient feed back demonstrates improved patient experience in support of the intended aims of exercise management on S3.

Recommended next steps include collation and publication of qualitative data on outcomes of exercise management, including CET outcome data on S3. In addition to continued opportunity for the inclusion of physiotherapy and exercise management as part of the multidisciplinary approach to eating disorder treatment.