

THERAPEUTIC APPROACHES

Cognitive Behavioural Therapy

CBT identifies the thoughts, beliefs and behaviours maintaining a problem and tests them directly through behavioural experiments, graded exposure and structured practice.

It remains the most strongly evidenced approach for the anxiety disorders and for depression.

BEST SUITED TO

- Generalised anxiety, panic disorder, social anxiety, specific phobias
- Obsessive compulsive disorder, with exposure and response prevention
- Health anxiety and illness related worry
- Mild to moderate depression and recent onset low mood
- Insomnia, using CBT for insomnia protocols
- Clients who want a time limited, structured piece of work with clear homework between sessions

TYPICAL COURSE

8 to 16 sessions for a circumscribed presentation. Where the difficulty is longstanding or developmental in origin, CBT is usually a component rather than the whole treatment.

INDICATIVE DIAGNOSES

Generalised anxiety disorder; panic disorder with or without agoraphobia; social anxiety disorder; specific phobia; obsessive compulsive disorder; body dysmorphic disorder; major depressive disorder; illness anxiety disorder; insomnia disorder; bulimia nervosa; and binge eating disorder.

This list is indicative rather than exhaustive. Diagnosis guides the choice of approach but does not determine it on its own.