



Priory Hospital North London

Treatment programmes for obsessive compulsive, body dysmorphic and related disorders

Located in a secluded part of Southgate, North London, and set in several acres of private grounds, Priory Hospital North London offers intensive treatment programmes for adolescents and adults with obsessive compulsive disorder (OCD), body dysmorphic disorder (BDD), health anxiety or a specific phobia of vomiting (SPOV).

Clinical lead

Dr Himanshu Tyagi is the OCD lead at Priory Hospital North London.

His main clinical and research focus is on OCD and related disorders in neuropsychiatric settings. He is a co-founder and vice chair of The Royal College of Psychiatrists' Network for Obsessive Compulsive And Related Disorders (OCARD). He has always been passionate about the use of technology to revolutionise healthcare delivery and eradicating technical and psychological obstacles in wider adoption of healthcare tech.

Previously Dr Himanshu Tyagi served as editor of Connect, Journal of the Royal College of Psychiatrists' Mental Health Informatics Group.

Treatment

Treatment is offered on an inpatient, day patient, or outpatient basis and follows the National Institute for Health and Care Excellence (NICE) treatment guidelines, which recommends the use of cognitive behavioural therapy (CBT) to treat adolescents or adults with OCD or BDD, including exposure and response prevention (ERP).

Inpatient service

Both adults and adolescents with OCD or BDD can be admitted to our inpatient service if their condition is too severe for outpatient treatment, or to help assist with geographical limitations.

In some cases, additional diagnoses such as depression, schizophrenia, or an eating disorder may make outpatient treatment more complex. Adolescents (aged 12 to 17) may be admitted to Priory Hospital North London's adolescent unit.

Treatment programme

The programme is designed to maximise understanding and engagement in the early stages of treatment. Patients are expected to conduct exposure or behavioural experiments at least three times a day, undertake homework diaries daily and complete weekly ratings of outcome.

In addition, all staff may model exposure or participate in behavioural experiments to help test out a patient's beliefs.

Inpatients receive:

- + Up to three individual sessions of CBT with their key therapist
- + Support in exposure and behavioural experiments from a specialist member of nursing staff
- + Group CBT sessions which are specific to OCD or BDD including compassion focused approaches
- + A range of group sessions for related problems such as depression, low self-esteem and social anxiety
- + Regular monitoring of progress, which is used to audit outcomes

Therapy may be combined with medication such as selective serotonin reuptake inhibitors (SSRIs), clomipramine or augmentation to help support CBT and develop more positive outcomes.

Outpatient or day care service

A weekly session or a more intensive outpatient programme of CBT may be offered to patients who would benefit from such treatment. The therapy would be based around the same treatment philosophy as the inpatient programme.

Family therapy

Partners and relatives are encouraged to meet with the therapy team to help inform the approach and the best ways to support the patient's treatment.

Highly specialised service for OCD, BDD and related disorders

The OCD and BDD service is commissioned by NHS England, provider trusts and local systems for a national specialist service in treatment of patients with severe treatment refractory OCD and BDD in adolescents or adults. To obtain funding from NHS England, the patient must be referred by a community mental health team, be assessed to be in the severe category, and be treatment refractory to at least two trials of CBT and two trials of SSRIs (for BDD) and augmentation (for OCD).

Commissioning by a provider trust or local system does not require patients to be treatment refractory.

The assessment process

An initial assessment for suitability and treatment planning (if necessary), ensuring that the treatment plan is jointly offered and a member of the therapy team agreed with the patient prior to admission.

If this is not possible, then an initial assessment may be conducted as a home visit or over the phone. The admission criteria can be provided on request, and a formal assessment of response to treatment is completed on the ward within the first two weeks - the assessment is focused on the patient's ability to engage in treatment. At this point, medication may also be reviewed.

Ongoing support

There are several tools that can aid further development and it is advised that patients continue the programme with the following techniques.

Self-help groups

Priory Hospital North London provides premises for OCD and BDD self-help groups which meet monthly and attendance is free. For further information, visit the OCD Action website, www.ocdaction.org.uk, or the BDD Foundation website, www.bddfoundation.org.

We aim for patients to travel as short a distance as possible so they may return home on therapeutic leave as soon as possible in order to practise in their own environment. NHS patients must have an identified local care co-ordinator to discuss follow-up arrangements and attend a Care Programme Approach (CPA) meeting with a family member.

There should be follow-up by a local cognitive behavioural therapist who would preferably act as the care co-ordinator. Alternative follow-up arrangements including phone consultations, day patient and outpatient care can also be arranged.

Funding

We are an approved provider for all the UK's leading private medical insurers, meaning patients may be able to access treatment through their policy. We also provide self-pay options for individuals and families, and corporate arrangements for businesses.

Referral and admission

To find out further information about Priory Hospital North London, please contact our dedicated 24/7 enquiry team:

Telephone: 0808 291 2170

Email: northlondon@priorygroup.com

Visit: www.priorygroup.com/northlondon

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