

Helping patients with binge eating disorders: There's an app for that

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Icahn School of Medicine at Mount Sinai

Behavioral therapy assisted by a smartphone app, delivered via telemedicine by a health coach, was an effective treatment for several symptoms of binge eating disorders, according to a study conducted by researchers from the Icahn School of Medicine at Mount Sinai and published this week in *The American Journal of Psychiatry*.

According to The American Psychiatric Association, [psychiatric disorders](#) characterized by binge eating, including binge eating disorder and bulimia nervosa, affect up to 6.5 million Americans. Cognitive behavior therapies (CBT) have demonstrated efficacy in individual, group, guided self-help, and pure self-help versions, yet have limitations that include the need to attend in-person sessions consistently and the limited availability of trained therapists.

Since mobile technologies are increasingly available and popular among patients and clinicians, the researchers wondered if a digital treatment platform might offer a preferred and more accessible option that could serve as a cost-effective alternative to specialized treatments. The researchers focused on the Noom Monitor, a [smartphone app](#) developed to facilitate CBT with guided self-help (CBT-GSH).

"Through a previous pilot study of the Noom Monitor by our team, we know the platform is acceptable to patients, feasible to deliver, and when combined with CBT-GSH with a trained clinician, improves symptoms," said Thomas D. Hildebrandt, PsyD, Chief of the Center of Excellence in Eating and Weight Disorders at The Mount Sinai Hospital and lead author of the study. "The purpose of this study was to evaluate the robustness of the intervention when delivered by non-specialist health coaches in a community health care system via telemedicine. We were encouraged by the results that showed that this intervention is effective and can be scaled outside of specialty clinical programs."

Specifically, this randomized, controlled telemedicine trial compared 52-week outcomes of CBT-GSH plus the Noom Monitor versus standard of care, which included traditional psychiatric or medical care, in 225 members of an integrated health care system in the Pacific Northwest who had been diagnosed with binge eating disorder or bulimia nervosa. CBT-GSH treatment involved coaching sessions with a routine health coach and use of both a CBT-GSH self-help book and the Noom

Monitor, which uses a customized self-monitoring system that tracks exercise, meals/snacks, compensatory behavior, body scrutinizing, craving, and weight. The research team found that patients receiving CBT-GSH plus Noom reported significantly more reductions in objective binge days (about 3 less days per month) and achieved higher rates of remission (56.7 percent vs. 30 percent) than the control group exposed to standard care (no specific eating disorder treatment). Similar patterns emerged for compensatory behaviors (vomiting, laxatives, excessive exercise), eating disorder symptoms (shape/weight/eating concerns, restraint), and clinical impairment.

For this study, all CBT-GSH coaching sessions were conducted via telephone and involved six sequential steps establishing self-monitoring, regular eating (three meals/two snacks), alternative activities to binge eating/purging, problem-solving, reduction in dietary restraint, importance of shape/weight, and relapse prevention. The first session lasted 60 minutes, and each subsequent session was 20-25 minutes. The first four sessions occurred weekly, while the following four sessions were biweekly. All coaches completed an eight-hour training led by Dr. Hildebrandt and another eating disorders specialist. Although coaches ended their intervention at 12 weeks, participants had access to the self-help manual and Noom Monitor beyond the coaching period and were encouraged to continue using the program until they achieved remission.

"In addition to providing an improvement in primary eating disorders symptoms, related depression, and impairment in functioning, the group treated with CBT-GSH plus the Noom Monitor had an increased remission rate beyond the intervention, suggesting that the effects of the intervention continued to facilitate changes within the follow-up period that were not observed among those who received standard care," said Dr. Hildebrandt. "Scaling and implementing empirically supported interventions have become an important priority across mental health conditions and our study shows that CBT-GSH via telemedicine is

effective and scalable as an intervention for binge eating [disorders](#)."

More information: Tom Hildebrandt et al, Randomized Controlled Trial Comparing Health Coach-Delivered Smartphone-Guided Self-Help With Standard Care for Adults With Binge Eating, *American Journal of Psychiatry* (2020). [DOI: 10.1176/appi.ajp.2019.19020184](https://doi.org/10.1176/appi.ajp.2019.19020184)

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