



# A Look at Body Dysmorphic Disorder in Young People

*Key findings from the "Practitioner Review: Assessment and treatment of body dysmorphic disorder in young people" (Krebs et al., 2024), published in JCPP*

Body Dysmorphic Disorder (BDD) is part of the Obsessive-Compulsive and Related Disorders category. It is relatively common, highly impairing, and yet frequently underdiagnosed and undertreated in Child and Adolescent Mental Health Services

## What does BDD consist of?

Excessive preoccupation with perceived appearance flaws

Flaws are usually minor or not visible to others

Repetitive behaviours (checking, hiding, comparing)

Causes distress and functional impairment

## Why does it matter?

- Onset usually in adolescence
- Affects ~2% of adolescents
- Severe school and social impairment
- High rates of self-harm and suicide attempts
- High psychiatric comorbidity

## "BDD is often under-recognised"

Why?

1. *Young people may not disclose unless asked*
2. *Often looks like depression, social anxiety or "normal teenage concerns"*
3. *Clinicians may avoid asking about appearance*

## Keys to Assessment



Ask directly  
about  
appearance  
concerns



Look for: time-  
consuming thoughts,  
repetitive  
behaviours,  
avoidance



Assess risk  
(self-harm,  
suicide, cosmetic  
behaviours)



Assess  
distress and  
functional  
impact

## What Does the Evidence Say About Treatment?

### First-line treatment

CBT for BDD, adapted for  
young people, with  
exposure and response  
prevention (ERP)

### Medication

SSRIs may be used when  
CBT is unavailable or  
insufficient; often  
alongside CBT

### Cosmetic treatment

Not recommended. It is  
typically ineffective  
and may worsen  
symptoms



Learn more about this topic in our session "An update on OCD and related disorders in children and young people", by Professor Mataix-Cols