



Promoting excellence in research, treatment, and prevention of eating disorders.

AED ACADEMY FOR EATING DISORDERS

Message from the President

Scott J. Crow, MD, FAED



As we reach the midpoint of the Academy year, I am struck by the high level of energy and activity in AED. The Credentialing Committee is hard at work with sub-committees exam-

ining different aspects of that important task. The Barcelona Conference Planning Committee is in the midst of reviewing a record number of abstract submissions, and the various SIGs remain very active.

While these (and many other) things are happening, the board is focused on several new initiatives. Foremost among these is a reorganization of the board structure, which was discussed throughout the first half of this year and approved at the board meeting in Montreal.

In the reorganized structure, the six elected board members will each take on a "portfolio" of responsibility, from among: public affairs, membership, annual conferences, teaching days, print media and electronic media. A seventh portfolio, finances, will be aided by the treasurer. In most cases, these portfolios will involve the oversight of areas currently under the purview of council chairs or task force chairs. Between now and the official installation of this system at the annual meeting in Barcelona, the new portfolio holders and the existing council and task force chairs will be (in fact, already are) working to ensure a smooth transfer of ongoing activities and responsibilities.

This new structure will allow substantially better and faster communication between the board and the councils, committees and task forces of AED, and will help to further support the work of our energetic and growing Academy.



La Casa Milà (La Pedrera), Barcelona

On a final note: Barcelona is only six months away, so finalize your plans to attend the meeting!

Message from the Editor

Debbie Franko, PhD

As one part of the world moves into winter and another into summer, you will read about news from around the world in this issue of the *AED Forum*. First up is news about the AED 2006 International Conference on Eating Disorders in Barcelona, Spain to be held June 7–10. As you will read, a stellar lineup has been assembled for a conference that promises to be innovative, educational and global. Register and make your hotel reservations soon. Also featured in this issue are reports from a number of conferences around the world, including SIG-sponsored teaching days and more — check out the articles and photos of some of our esteemed AED members who participated in these successful events. Our Global Spotlight features Portugal (complete with a geography lesson), and there is exciting news about eating disorder treatment centers from New York state. The new AED Patient-Carer Task Force provides an enlightening

look at a new initiative and our regular features highlight junior researchers, authors and news from AED members. Hope to see you all in Barcelona!

Inside this Issue

Message from the President	1
From the Editor	1
¡Barcelona!	2
Hispano Latino American Conference on Eating Disorders	3
SIG Report	3
Position Papers	5
Female Athlete Triad Conference	6
Report from the 5th International Seminar on Eating Disorders	6
Global Spotlight on Portugal	7
Fellows in Profile	8
Patient/Carer Task Force Report	8
AED-NIMH Junior Researcher Standouts	10
Member News	11
Update from ANAD	11
News from New York State	11
Upcoming Conferences	12
Book Review Corner	13
Classified Ads	14



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2006 International Conference on Eating Disorders

“Eating Disorders throughout the World: Exploring Similarities and Differences”

June 7–10, 2006
Hotel Fira Palace
Barcelona, Spain

The 2006 conference program committee, chaired by Daniel le Grange, PhD, FAED, and Tracey Wade, PhD, FAED, has created a program that truly draws on expertise from around the globe and focuses on the theme, “Eating Disorders throughout the World: Exploring Similarities and Differences.” This conference will take place in beautiful and exciting Barcelona, Spain, and will be the first AED conference held outside North America.

Our keynote speaker, well known and admired throughout the eating disorder community as a long-term contributor of important research and ideas, is **Ruth Striegel-Moore, PhD, FAED**, Professor of Psychology at Wesleyan University, Middletown, Conn., USA. She will present an address on “Reducing the Burden of Suffering in Eating Disorders: Toward a Global Perspective.”

In 2006 we will have three plenary sessions, each with four presenters.

- The first of these is titled: “*When nature meets nurture: Constitution-environment interactions in eating disorders.*” Presenters are: **Avshalom Caspi, PhD**, Institute of Psychiatry, King’s College, who will address his work on gene x environment interactions and psychopathology; **Kelly Klump, PhD**, from Michigan State University, who will address the interplay between genes, environment and puberty; **Alan Stein, MD**, from the Royal Free & University Medical School in London, who will discuss the influence of maternal eating disorders in the postnatal period on child development; and **Corinna Jacobi, MD**, from the Clinical Psychology and Psychotherapy Technical University in Dresden, Germany, who will present on the important topic of risk and resilience in eating disorders.
- The second plenary is focused on the topic of *treatment guidelines*. Presenters are: **Joel Yager, MD, FAED**, University of New Mexico, discussing the new revision of the American Psychiatric Association Eating Disorder Treatment Guideline; **Gail Huon, PhD, FAED**, Australian National University, presenting on eating disorder treatment guidelines — local and global perspectives and implications for prevention; **Alan Jackson, MD**, Southampton General Hospital, will address the clinical nutritional care of severely underweight individuals; **Johannes Hebebrand, MD**, Rheinischen Kliniken University of Duisburg-Essen in Germany, will discuss guidelines pertaining to the prevention and treatment of childhood obesity.
- The third plenary will include various perspectives on *diagnostic issues*. Presenters are: **Walter Vandereycken, MD, PhD**, Catholic University of Leuven, Belgium, discussing “Diagnosing Eating Disorders — A Constructive or Constrictive Enterprise?”; **Armando Barriguete, MD, FAED**, U Iberoamericana, U AE Morelos (MX), U Paris XIII and U Martinique (FR), U Valencia and U Int Mendez Pelayo Univ (ES), presenting on eating and feeding behavior and disorders, and the transcultural diagnosis of eating disorders; **Timothy Walsh, MD, FAED**, from Columbia University and former chair of the Eating Disorders Workgroup, DSM-IV, discussing eating disorders in DSM-V; **Dasha Nicholls, MD**, Great Ormond Street Hospital London, discussing diagnosis of eating disorders in children from a developmental perspective.

Watch your mail for the preliminary program and registration information in early 2006. Check the AED Web site for the latest information about this conference at www.aedweb.org.

www.aedweb.org

2nd Hispano Latino American Conference on Eating Disorders

Monterrey, Mexico,
October 20–21, 2005

Cindy Bulik, PhD, FAED

This year marked the second annual Hispano Latino American Conference on Eating Disorders held at the Technological University of Monterrey (Instituto Tecnológico y de Estudios Superiores de Monterrey). The conference theme was “Eating Disorders: Yesterday, Today, and Tomorrow.” Dr. Eva Ma. Trujillo, MD, founder and medical director of Comenzar de Nuevo, A.C., organized the event, which was hosted by Mrs. Marisa Fernández de García and her husband, Armando. Mrs. Fernández de García is the founder and board president of Comenzar de Nuevo, A.C., a residential treatment facility for eating disorders located near Monterrey (<http://www.comenzardenuevo.org/>). Comenzar de Nuevo, A.C. was created in August 1999 to distribute free information regarding eating disorders on a local, regional, national and international level. This year's event included the First Conference on Eating Disorders for Parents and Families.

Dr. Gilberto Montiel Amoroso, the secretary of health of Nuevo Leon, Mexico, conducted the official inauguration. His presence reflected the considerable work that the Monterrey group has done to increase public awareness of eating disorders in Mexico. In addition to keynote speeches attended by all participants, parallel sessions were conducted for practitioners and families. International guest

speakers included several AED members: Cynthia Bulik, PhD, FAED; Jim Mitchell, MD, FAED; Mike Devlin, MD, FAED; Daniel le Grange, PhD, FAED; Marsha Marcus, PhD, FAED; Doug Bunnell, PhD, FAED; Arnold Anderson, MD, FAED; Luis Beato-Fernandez, PhD, MD; Luis Rojo-Moreno, MD; Maria Teresa Rivera, RD; Adela Spalter, MD, Paolo Machado, PhD; and Carolyn E. Cochrane, PhD, RN, CS. In addition, the core HLA SIG founders, including Fernando Fernandez-Aranda, PhD, FAED, Ovidio Bermudez, MD, FAED, Fabian Melamed, PhD, FAED, and J. Armando Barriguete-Melendez, MD, FAED, presented to both families and practitioners.

A special organizational meeting, held during the conference, was led by Dr. Andrea Pinheiro of Brazil with assistance from Drs. Bulik, Sullivan, Fernandez and Barriguete, marking the first meeting of a consortium hoping to develop a Hispano Latino American Eating Disorders Genetics Initiative.

Conference attendees were also treated to the sights, sounds and tastes of Monterrey as they experienced such regional specialties as eating cabrito (goat) and glorias (nut-based sweets), and watching preparations for Dia de los Muertos (Day of the Dead).

The organization and hospitality of the Monterrey group were unparalleled. The program was highly informative and inspirational for practitioners and family members. The next annual Hispano Latino American Conference on Eating Disorders will be held June 6 in concert with the AED international conference in Barcelona, under the directorship of the new President of the HLA SIG, Fernando Fernandez-Aranda, PhD, FAED, who was elected to a two-year term at the Monterrey meeting.

AED Special Interest Group (SIG) News

Judith Banker, LLP, MA, FAED, and
Katharine Loeb, PhD, SIG Oversight
Committee Co-Chairs

The AED Special Interest Groups (SIGs) address a wide range of fascinating topics within the field of eating disorders. There have been a few changes in SIG leadership since the Montreal conference. The following is a recently updated list of the current SIGs, and their chairs and co-chairs:

Athletes

Chairs: Roberta Sherman, PhD, FAED, and Ron Thompson, PhD, FAED

Bariatric Surgery

Chair: Carol Signore, MAT, MS, LMFT, FAED
Co-Chair: Edi Cooke, PsyD

Body Image

Chair: Stacey Tantleff Dunn, PhD
Co-Chair: Leslie Heinberg, PhD

CBT

Chair: Wayne Bowers, PhD

Child and Adolescent

Chair: Shelagh Wright
Co-Chair: Nancy Zucker, PhD

Family Therapy

Chair: Elizabeth McCabe, MSW

Graduate Student

Chair: Andie Ulrich

Health At Every Size

Chairs: Ellen Shuman and Deb Burgard, PhD

Hispano Latino American

Chair: J. Armando Barriguete, MD, PhD, FAED

Co-Chair: Fabian Melamed, PhD, FAED

Information Technology

Chairs: Jennifer Shapiro and Steffi Bauer, PhD

Inpatient/Residential

Chair: Craig Johnson, PhD
Co-Chair: Stefanie Setliff, MD

Males

Chair: Mark Warren, MD
Co-Chairs: Thomas Hildebrandt, MD, and Rita Debate, MD

Medical Care

Chair: Ovidio Bermudez, MD, PhD
Co-Chairs: Garry Sigman, MD, and Richard Kreipe, MD

Neuroimaging

Chair: C.Laird Birmingham, MD
Co-Chair: Sloane Madden, PhD

Neuropsychology

Chair: Kate Tchanturia, PhD
Co-Chair: Janet Treasure, FRCPsych

New Investigators

Chair: Marci Gluck, PhD
Co-Chair: Jennifer Boisvert, MA

Nursing

Chair: Carolyn Cochrane, PhD, RN, CS



HLA SIG members and conference speakers.

Nutrition

Chair: Erica Goldstein, MS, RD, CDN

Co-Chair: Jillian Croll, PhD, RD, MPH

Prevention

Chair: Ricardo Dalle Grave, PhD

Co-Chair: Carolyn Becker, PhD

Private Practice

Chair: Jill Strasser, PsyD

Psychodynamic Psychotherapy

Chair: Judith Banker, LLP, MA, FAED

Co-Chair: David Tobin, PhD

Transcultural

Chair: Richard Gordon, PhD, FAED

SIG membership offers access to excellent specialized educational opportunities and the chance to network and collaborate with colleagues around the world. AED members are invited to join any number of SIGs. To learn more about a particular SIG, or to join, go to www.aedweb.org and click Join AED>Special Interest Groups. Joining a SIG also provides members access to the individual SIG listserv where members can network with colleagues and find ways to get more involved in SIG activities.

2006 SIG Activities at the Barcelona International Eating Disorders Conference

The AED SIGs have become an integral part of the AED international conferences.

The SIG discussion panels will be must-see events at the 2006 conference. Seven SIG-sponsored discussion panels will be offered at the conference in Barcelona, including:

Hispano-Latino American (HLA) Model for Prevention in ED / Modelo Hispano-LA para la Prevención de los TCA

Clinical Teaching Day presentation sponsored by the HLA SIG

This panel will address the development of an evidence-based prevention program in schools for the Hispano population. It proposes an HLA network to work in prevention and support, and to implement prevention research on eating disorders in HLA populations.

Moderator: Armando Barriguete, MD, PhD, FAED

Panel Participants: Armando Barriguete, Mexico; Luis Rojo, PhD, Spain; Fabian Melamed, PhD, FAED, Argentina; Teresa Rivera, RD, and Marisa Emmelhains, RD, Mexico

Prevention Update: An International Perspective

Sponsored by the Prevention SIG

Presenters from Australia, Canada, Israel and Spain will discuss best practices, and unique or interesting aspects of eating disorders prevention programs in their respective countries.



Attendees at the SIG Teaching Day on Bariatric Surgery.

Moderator: Riccardo Dalle Grave, PhD

Panel Participants: Susan Paxton, PhD, Australia; Gail McVey, PhD, Canada; Ana R. Sepulveda, UK; Yael Latzer, PhD, and Daniel Stein, MD, Israel

The Use of New Technologies in the Treatment of Eating Disorders

Sponsored by the Information Technology SIG

This panel introduces a variety of technological approaches developed by leading experts in the field. The presenters will each discuss their work in treatment enhancement via information technology, and the potential these approaches hold for the optimization of ED care.

Moderators: Jennifer Shapiro and Stephanie Bauer, PhD

Panel Participants: Cynthia Bulik, PhD, FAED, USA; Ulrike Schmidt, MD, PhD, UK; Fernando Fernandez Aranda, PhD, FAED, Spain; Eric van Furth, PhD, FAED, Netherlands; Hans Kordy, Germany

Mending Broken Hearts: Evaluation and Management of the Cardiovascular Complications of Anorexia Nervosa

Sponsored by the Medical Care SIG

This panel will discuss the evaluation and management of cardiovascular complications of anorexia nervosa both from a literature review perspective and a practical clinical perspective. Each presenter will discuss a relevant topic, such as bradycardia, EKG abnormalities, hypotension and postural tachycardia, and special considerations for athletes. An open discussion will follow with the opportunity for participants to discuss cases or clinical scenarios.

Moderator: Ovidio Bermudez, MD, FAED

Panel Participants: Kim McCallum, MD, USA; Dr. Josep Comin, Spain; Maria Portilla, MD, USA; Ed Tyson, MD, USA

Men and Eating Disorders — Current Knowledge and Research Directions

Sponsored by the Males SIG

This panel will provide an overview on the current state of the science of men and eating disorders. In a field where the prototypical patient is female, the emerging understanding of the epidemiology, etiology and treatment of men with eating disorders is a key movement in our understanding of these illnesses for the entire population.

Moderators: Mark Warren, MD, and Rita Debate, MD

Panel Participants: Arnold Anderson, MD, FAED, USA; Fernando Fernandez Aranda, PhD, FAED, Spain; Theodore Weltzin, MD, USA; Thomas Hildebrandt, MD, USA

Neuroimaging in Anorexia Nervosa: Where Next?

Sponsored by the Neuroimaging SIG

The panel will look at current imaging technologies, including options for combining imaging and neuropsychological test batteries to better quantify the complexities of eating disorders.

Moderator: Sloane Madden, PhD

Panel Participants: Sloane Madden, PhD, Australia; Kate Tchanturia, PhD, UK; Ian Frampton, UK; Bryan Lask, MD, FAED, UK

The Therapeutic Relationship as a Tool in the Treatment of the Core Interpersonal Issues Accompanying Eating Disorders

Sponsored by the Psychodynamic Psychotherapy SIG

This discussion will focus on the understanding and use of the dynamics within the therapeutic relationship as a central tool in addressing the core interpersonal issues frequently encountered in eating disorder treatment. The presentations will begin with a discussion of the



Russell Marx, MD

rationale for turning to dynamically-informed ideas and therapies at a time when CBT is regarded as the first line treatment of choice, followed by presentations on relationship-focused psychotherapy techniques adapted to eating disorder treatment, the therapeutic use of the countertransference experience and the impact of gender on the therapeutic relationship in the treatment of the challenging eating disorder patient.

Moderator: Judith Banker, LLP, MA, FAED

Panel Participants: Howard Steiger, PhD, FAED, Canada; Bob Palmer, MD, UK; Charles Portney, MD, USA; Patricia Fallon, PhD, FAED, USA

Discussion panels are highly interactive, providing attendees with an opportunity to participate in the lively exchange of ideas and experiences. Attendance at these discussion panels is open to all conference attendees; it is not necessary to be an AED or SIG member to attend.

TWO NEW SIGS FORMED!

The AED is pleased to announce the addition of two new Special Interest Groups — the Inpatient/Residential Treatment SIG and the Neuropsychology SIG.

The Inpatient/Residential Treatment SIG, co-chaired by Craig Johnson, PhD, and Stephanie Setliff, MD, will focus on creating a forum for professionals to discuss the variety of challenges they face. Issues of interest could include: techniques and acceptable rates of weight restoration, establishing more precise methods for establishing target weights, estimating length of stay, accomplishing family therapy for “out of area” families, program designs, recruiting and retaining staff with expertise in eating disorders, and

designing and implementing outcome studies. The exchange of information is designed to improve the overall quality of care for more severely disturbed patients and contribute to the AED’s efforts to establish guidelines for intensive treatment programs. The development of this new SIG is timely, since the collaborative credentialing process for residential care that has begun with AED and NEDA will generate many new questions regarding this level of care. This SIG is expected to help support the new, much needed, credentialing initiative.

The Neuropsychology SIG, co-chaired by Kate Tchanturia and Janet Treasure, FRCPsych, aims to provide a better understanding of the mechanisms underlying eating disorders. The use of designed experimental tasks and neuropsychological testing can provide clarity in prognoses and maintaining factors, and help plan intervention strategies.

Both of these groups will host meetings at the Barcelona 2006 ICED, where they plan focused discussions and strategy sessions. To join these or other AED SIGs go to www.aedweb.org and click Join AED.



*Ovidio Bermudez, MD, FAED and
Carol Signore, MAT, MS, LFMT, FAED*

SIG Regional Teaching Days a Success

On November 9, the Medical Care SIG (Ovidio Bermudez, MD, FAED, chair) and the Bariatric Surgery SIG (Carol Signore, MAT, MS, LFMT, FAED, chair) co-hosted a teaching day in King of Prussia, Pennsylvania, USA, titled “*Learning How to See Success: Cutting Edge Issues in the Treatment of Eating Disorders and Bariatric Surgery Recovery.*”

Fifty participants attended from as far away as Chicago, Utah and the Netherlands. Speakers Melissa Kalarchian, PhD, Matt Kirkland, Russell Marx, MD, Janelle McLeod, Alan Schuricht, David Wernsing, Ovidio Bermudez and Carol Signore represented the disciplines of primary medicine, psychiatry, psychotherapy and nutrition. “The teaching day was not only a success but also highlighted the need for front line professionals to access quality education in these matters. People are eager to learn what are the best treatment options to offer to their patients,” said Bermudez.

“I think the teaching day exceeded expectations in delivering everything that was promised,” said Signore, who was enthusiastic about the prospect of making it an annual event. “Local physicians and other professionals working with eating disorders and bariatric patients were impressed with the caliber of program that the AED and its members were able to provide.”

Position Papers Wanted

The Board of Directors of the Academy for Eating Disorders recently approved a new policy and procedure for the development of position papers. “Position paper” is defined as a “scholarly work that expresses an opinion about an issue related to eating disorders that may be controversial or a source of consumer confusion or misinformation, that needs clarification for professionals, or that represents an issue deserving advocacy on behalf of individuals with eating disorders.” In taking a stand on an issue, a “position” would consist of 1) “statement(s)” declaring the AED’s official stance regarding an important issue germane to the mission and objectives of the AED that emanate from a 2) “paper” that provides pertinent data and other sources of evidence to support the statement(s). All AED members are encouraged to become involved in the process of developing position papers. See <http://www.aedweb.org/policy/Proposal1.cfm> for more details.

Female Athlete Triad Conference Scores Again

Ron Thompson, PhD, FAED, and Roberta Sherman, PhD, FAED

The AED Athlete Special Interest Group co-sponsored its second mini-conference with the Community Nutrition Section of the Indiana State Board of Health on October 7, in Indianapolis. The conference was titled, "Identification and Treatment of the Female Athlete Triad: Disordered Eating, Amenorrhea, Osteoporosis and Related Issues." The 97 registrants included coaches, athletic trainers and other sport personnel, along with health-care professionals. Four attendees chose to become members of the Academy at the meeting. As with the 2003 Athlete SIG conference, this year's event was truly international, with presenters from the Netherlands, Canada and the United States. Two highlights from the conference were the keynote addresses by Barbara Drinkwater, PhD, whose landmark studies on amenorrhea and bone loss in exercising women began the focus on the Triad 20 years ago, and Kimiko Soldati, a diver on the 2004 U.S. Olympic Team, who talked about her struggle dealing with an eating disorder as an elite athlete.

In related news, Athlete SIG co-chair Roberta Sherman recently participated in a Consensus Conference in Lausanne, Switzerland, related to the International Olympic Committee Medical Commission (IOCMC) Position Stand on the Female Triad. Sherman and SIG co-chair Ron Thompson were contributing authors to the Disordered Eating section of the position stand. Sherman and Barbara Drinkwater represented the United States along with eight other healthcare professionals from Egypt, Israel, Australia, Norway, Canada, the Netherlands, Argentina and Austria. The purpose of the meeting was to discuss ways to implement the recommendations of the position stand, which is available on the IOCMC Web site: www.olympic.org/uk/organisation/commissions/medical/index_uk.asp. Go to the Web site and link to "Female Athlete Triad."

Roberta Sherman and Ron Thompson, in conjunction with the NCAA, developed the "NCAA Coaches Handbook: Managing the Female Athlete Triad," which can be downloaded at: http://www1.ncaa.org/membership/ed_outreach/health-safety/index.html.



Janet Treasure, Fernando Fernández-Aranda, Ulrike Schmidt, Daniel le Grange, Rosa M. Raich, Walter Vandereycken and Howard Steiger

Tratamientos basados en la evidencia

Fernando Fernández-Aranda, PhD, FAED

The 5th International Seminar on Eating Disorders "Tratamientos basados en la evidencia" (Eating disorders: Updates on evidence-based therapies), co-sponsored and recognized by the Academy for Eating Disorders (AED) and the International Teaching Day Task Force (ITDTF), was held in Barcelona (Old University of Barcelona), Spain on November 25. The event was also co-sponsored by the Catalan Health Department and the University of Barcelona, and organized by the University Hospital of Bellvitge.

More than 140 participants, representing a wide range of professional disciplines (psychologists, psychiatrists, general practitioners and nurses), attended the Seminar at the wonderful and historic scenario of the Aula Magna of the University. The morning and

early afternoon lecture program provided an excellent overview of evidence-based therapies and practical guidelines for treating ED. Prof. Janet Treasure (UK) opened up the meeting with a discussion about effective, state-of-the-art therapies for eating disorders. Prof. Walter Vandereycken (Belgium) gave a practical lecture on denial of the disorder in anorexia nervosa and therapeutic management. Prof. Daniel le Grange (USA) discussed practical issues on family therapy for eating disorders. During the afternoon, Dr. Ulrike Schmidt (UK) presented the therapy program and guidelines for treating adolescent bulimia nervosa patients and BED. Prof. Howard Steiger (Canada) illustrated practical issues on the management of difficult ED with comorbid personality disorders. The International Seminar concluded with a roundtable on the application of new technologies for the therapy and prevention of eating disorders, where Prof. Rosa M. Raich (Barcelona), Prof. Luis Rojo (Valencia) and seminar chair Prof. Fernando Fernández-Aranda (Barcelona) presented new advances on the use of Internet procedures for treating eating disorders in Spain.



AED ACADEMY FOR
EATING DISORDERS

Global Spotlight on Portugal

Paulo P. P. Machado, PhD

Portugal is a small country located in south-western Europe, bordered by Spain to the north and east and the Atlantic Ocean to the south and west. In addition, Portugal includes two archipelagos in the Atlantic, Azores (Açores) and the Madeira Islands. It measures 92,391 square kilometers, and is a little smaller than the U.S. state of Indiana. Portugal has a population of 10.4 million, of whom, almost 2 million live in the Lisbon (capital city) metropolitan area and 1.5 million live in the Porto metropolitan area. The north of continental Portugal is mountainous, with a cool and rainy climate, while the warmer, drier southern area between the Tejo River and the Algarve consists largely of rolling plains. The Algarve, in the southern tip of the country, enjoys a Mediterranean climate. The Azores are located in the Mid-Atlantic Ridge, and Madeira is located off the coast of Northern Africa.

The Portuguese health care system is comprised of three co-existing systems: (1) the National Health Service (NHS) covers the whole population, and was enacted as law and included in Portugal's Constitution of 1976; (2) special public and private insurance schemes for certain professionals or groups (e.g., government employees, bank employees), where care is provided either directly or by contract with private or public providers; and, (3) voluntary private health insurance, covering about 10% of the population.

In the NHS, flat rate fees are charged for appointments (primary care and hospital outpatient visits), emergency visits, home visits, diagnostic tests and therapeutic procedures. Low income patients, handicapped or chronically ill patients, pregnant women, children up to 12 years of age, drug addicts in rehabilitation and chronic mental patients are not subject to these fees. In the NHS, general practitioners (family doctors) serve as gatekeepers for specialized care and hospitals. There are 3,200 psychiatric beds in the public system.

Psychotherapy services are provided in a limited number of health care centers and in psychiatric and general hospitals. Private insurance policies rarely reimburse for psychotherapy services, which are provided mainly by the private health system or professionals in private practice.

As in most countries, patients with eating disorders are seen and treated within general psychiatry. There are no treatment centers for eating disorders, only special units in general hospitals' psychiatric departments. The first clinical cases of anorexia nervosa described in Portuguese clinical literature were likely presented by Elysio de Moura, a well-known psychiatrist from the University of Coimbra, who described several cases from his clinical practice in a historic paper, referring to patients he saw in the late 1920s.



The first hospital to open a specialized treatment unit was the Santa Maria in Lisbon, in the late '80s. Initially created as a special service of the endocrinology department, it recently became an autonomous service within psychiatry. During the '90s, other hospitals began offering specialized services for eating disorders, including the São João Hospital in Porto, and the University Hospital in Coimbra. The number of hospitals and centers offering some form of specialized treatment rose from three to ten within the last couple of years. However, there is still considerable pressure on the specialized treatment centers, particularly in Lisbon.

The Portuguese collaboration in the European COST Action B-6 on "Efficient psychotherapy for eating disorders" provided important information about the services for eating disorder patients. In general, services provided tend to reflect the theoretical orientation of the treatment facility. Most centers primarily offer outpatient treatment, although inpatient treatment is provided for the most severe clinical conditions. Treatment in the specialized centers is provided by a multi-disciplinary team, including psychiatrists, endocrinologists, psychologists, nutritionists and specialized nurses. Treatment modalities include pharmacological treatment, individual and group treatment, and psychotherapy. Family therapy is also provided mostly in the centers that favor a systemic approach, whereas centers that favor a cognitive-behavioral approach tend to offer individual and group psychotherapy.

The community of mental health professionals working in the eating disorders field has increased considerably in the last decade. In 1994, the Portuguese Scientific Society for the Study of Eating Disorders (Núcleo de Doenças do Comportamento Alimentar, www.comportamentoalimentar.pt) was created with the aim of organizing regular meetings to foster communication and service coordination among centers and professionals providing specialized care for eating disorders, and to disseminate knowledge and promote public awareness. In 1998, family members and friends of eating disorder patients organized (Associação dos Familiares e Amigos dos Anorécticos e Bulímicos) and have since been lobbying for the opening of more specialized centers. They regularly hold information sessions and programs to promote eating disorder awareness and provide support for patients and families.

Fellows in Profile

Diann Ackard, PhD, LP, FAED

(Editor's note: This feature highlights AED Fellows, who are active organization members and have been deemed to have made significant contributions to the field of eating disorders. The feature is designed to be informal yet informative, and to highlight the manifold achievements of the Academy Fellows.)

An interesting series of high school events and last-minute decisions landed me at the University of Minnesota to pursue an undergraduate degree in engineering. Yes, you read that correctly — engineering! Heeding to my nerdy aspirations, I plunged into my calculus and physics courses with great dedication, only to be met with the horrifying realization that a *job* in engineering might mean being surrounded by *Hal 9000s* or being part of the “Borg.”

Quick to flee danger, I switched my major to psychology, as I recognized the power of human interaction in stimulating my learning. After my undergraduate advisor requested that I strengthen my graduate school application with research experience, I volunteered for anything I could find. For months, I listened to tapes of eye movements of schizophrenia patients and recorded the reel-to-reel tape counter when I heard a certain type of sound. After completing that experience, I questioned my previous judgment that psychology would be more fascinating than engineering, but decided to give psychology research a second try. In a career-solidifying moment, I met Carol Peterson, PhD. Dr. Peterson (at the time, a graduate student at the University of Minnesota's clinical psychology program) was collecting her dissertation data on taste perception in patients with bulimia nervosa. She accepted my offer to assist with her research interests, and I worked for three years at the University of Minnesota's Department of Psychiatry. There, I had wonderful opportunities to learn from other exceptional clinicians and researchers, such as: James Mitchell, MD, FAED, Scott Crow, MD, FAED, Nancy Raymond, MD, Ross Crosby, PhD, and Martina deZwaan, MD, FAED. These mentors have been integral to laying the foundation for my continued interest in eating disorders.

Additional layers of brick-and-mortar mentoring were laid during graduate school at the University of Cincinnati. The artistry with which Ann Kearney-Cooke, PhD, FAED, intertwines clinical practice with research demonstrated to me that the integration of

scientist and practitioner can be implemented in a private practice setting. I am indebted to her for sharing the blueprints of the Boulder model in clinical practice. During my predoctoral internship at Yale University, Carlos Grilo, PhD, and Robin Masheb, PhD, introduced me to another marriage of science and practice — providing manual-based treatments to research subjects. These experiences solidified my intent to provide direct patient care and continue researching, yet I was unsure how best to achieve this duality.

The path to my version of the scientist-practitioner model was paved during my postdoctoral internship at the University of Minnesota, Division of Epidemiology. It was here that I was introduced to Dianne Neumark-Sztainer, MPH, RD, PhD, FAED, who graciously encouraged me to research my interests. Through this collaboration, we have investigated aspects of eating disorders including its association with adolescent dating violence, family connectedness and family mealtimes. Also during this time, I met Jillian Croll, PhD, currently a clinical practice director at the Eating Disorders Institute, and co-principal investigator with me on two grants investigating stages of change among a treatment-seeking population of individuals diagnosed with eating disorders.

While my avidity for science and knowledge is facilitated by my research collaborations, my passion for helping those struggling against eating disorders is filled by private practice. The opportunity to assist clients in finding better life experiences is incredibly rewarding, as is the quest for knowledge in my areas of research. Serving as co-chair of the AED Membership Recruitment and Retention Committee is an additional reward, affording me the opportunity to work intimately with some of the most zealous, industrious individuals I know, and to fulfill one of the AED's missions — to reach out to a broader, global audience of individuals who work in the field of eating disorders. Finally, in my quest to give back to the community, I serve on the advisory boards to the Eating Disorders Institute's Anna Westin House residential treatment program and the University of Minnesota's Aurora Center/Program Against Sexual Violence. I served as a peer counselor at the Aurora Center 15 years ago as an undergraduate student, and it is with full recognition of the past that I now serve on their board. Clearly, my return to Minnesota has come full circle.

If you had asked me 12 years ago when leaving Minnesota for graduate school if I would return after completing my PhD, I am nearly certain that my answer would have been “no.”

Between the bitterly cold winter temperatures and the multitude of state birds (otherwise known as the mosquito — they are huge!) during summer, one must question the sanity of Minnesota residents. However, my return here has been an exceptional piece of my journey. Private practice possesses many of the ingredients for loneliness, but through my research, clinical and community connections, I feel fulfilled. In the words of Sandra Day O'Connor, “We don't accomplish anything in this world alone ... and whatever happens is the result of the whole tapestry of one's life and all the weavings of individual threads from one to another that creates something.” My thanks to the exceptional mentors, brilliant collaborators, inspiring patients and valued friends who have been part of this journey.

Patient/Carer Task Force Formed

*Judith Banker, LLP, MA, FAED,
Ulrike Schmidt, MD, PhD, and
Mary Tantillo, PhD, RN, CS, FAED*

In an effort to better address the needs and interests of eating disorder patients, and their families and loved ones, the AED launched a Patient/Carer Task Force comprised of 13 individuals and patient/carers organizations around the world. The task force has met by teleconference twice in the last several months to discuss the focus of the group and the development of planned initiatives.

Current members include:

Mary Ellen Clausen, Executive Director, Ophelia's Place, USA; Laura Collins, author of *Eating With Your Anorexic* (McGraw-Hill, 2005), USA; Jan Cullis, Executive Director, The Bronte Foundation, Australia; Cheryl Dellasega, GNP, PhD, Pennsylvania State College of Medicine, USA; Eating Disorders Network of Japan, Kaeko Nomura (representative), Japan; Barbara Haid, Austrian Network for Eating Disorders (Netzwerk-Esstörungen), Austria; Debbie Jaffe, actress, concerned carer, USA; Madeleine Mesterton/Oliver Bjerstrom, Riksföreningen Anorexi/Bulimi-Kontakt, Sweden; Susan Ringwood, Eating Disorders Association, UK; Grainne Smith, North East Eating Disorders Support (NEEDS), Scotland; Erik Vleeschdrager, Stichting Anorexia en Boulimia Nervosa (SABN), Netherlands; Kitty Westin, Executive Director, The Anna Westin Foundation, USA; Ira Sacker, Help Eliminate Eating Disorders (HEED), USA.

AED Representatives: Ulrike Schmidt, Mary Tantillo, and Judith Banker

There was strong consensus within the task force regarding areas that need improvement related to treatment, service and research, including:

1. Communication and partnership among people with eating disorders, carers and professionals
2. Resources for families and access to and dissemination of information
3. Research language and bias about role of families and carers
4. Recognition of parent/carer expertise and "lived experience"
5. Expanded training and education for professionals around the globe
6. Support and education in issues related to caring for an adult with an eating disorder
7. Preparation for transition from hospital to the community
8. Care standards, credentialing and guidelines
9. Advocacy

Implementation

A number of the ideas and recommendations suggested by the Patient/Carer Task Force were presented to and approved by the AED Board and are in the implementation process. The following initiatives are being developed to address the areas of need cited by the task force:

- The AED is forming an Advisory Board to include representation from the Patient/Carer Task Force, which will work to guide the AED in activities related to the interests of patients and carers;
- Patient/carer representation will be included on the 2007 conference planning committee with plans to organize a plenary addressing patient/carer concerns for the 2007 conference;
- Participants from the task force are invited to take part in the World Summit on Eating Disorders currently being organized by the AED to take place during the international conference in Barcelona in 2006, which will focus on the development of a professionals and patient carer charter.

The Patient/Carer Task Force will continue to meet throughout the next year to build on the suggestions and initiatives that emerged from the initial meetings.

Patient/Carer Spotlight

by Grainne Smith, Judith Banker, Ulrike Schmidt, and Mary Tantillo

To introduce the AED community to our Patient/Carer Task Force members we will be featuring excerpts from the personal introductions we shared on our e-mail chats.

This month we would like to introduce Grainne Smith, chairperson of the North East Eating Disorders Support (NEEDS) in Scotland.

From Grainne Smith: Still getting used to being 60, I've lived for 18 months now in Stonehaven, just south of Aberdeen, Scotland. When my daughter, then 23 and following a disastrous relationship, told me her diagnosis of "anorexia with elements of bulimia," I was unprepared for the roller coaster the following years would bring. After spending several years in what felt like a black hole, she finally accepted that she couldn't beat this by herself. She then saw Jane, a rather fantastic dietician, once a month for two years. Now my daughter Jay is well, working in a bank, and moving next week into her own house in Macduff, where she stayed after I moved here. I feel so very grateful to be able to say that.

I have worked for 6-7 years on the local/EDA helpline and am now chairperson of the combined NEEDS groups. NEEDS Scotland, supported by Scottish Eating Disorders Interest Group (mainly professionals), started and organized the successful petition to persuade health services to implement the NICE guidelines in Scotland and start specialist training for professionals in eating disorders. I am delighted to say discussions are now under way to initiate a career structure in ED, and eating disorders were included for the first time in a review of mental health nursing.

My passion is writing in all forms, including the use of writing as therapy. I gave up my full-time job eight years ago to concentrate on writing, and have published many stories and poems in magazines and anthologies. I have also written a novel, as yet unpublished (I live in hope!). I've enclosed "Garden Frames," a series of images written over the last year, which I hope you enjoy. Having searched in vain for years to find a practical support book, I decided to write one myself for carers, families and professionals, *Anorexia and Bulimia in the Family*, which John Wiley and Sons published last year.



Grainne Smith

Garden Frames

Frothing pink blossom
on branches waltzing crazy.
And so lately bare.

*

Birdsong cascades, drifts
on incandescent air, falls
through leaves pale with dew.

*

Boisterous wind, warm,
brings invitation to dance.
Washlines bow, leap, sway.

*

Seed cloud transparent
attached to a single stalk,
gone in a breath.

*

Late, the bud opens,
meeting warmth long forgotten,
hesitant wakening.

*

Lavender spears stretch,
dream in the dark'ning garden
of sun tomorrow.

Junior Researcher Standouts

The following are a subset of the 15 individuals awarded one of the AED-NIMH Fellowships at the International Conference on Eating Disorders in Montreal in April 2005.

The Academy for Eating Disorders (AED) anticipates funding from the National Institute of Mental Health to support travel fellowships for students and early career investigators to attend the AED 2006 International Conference on Eating Disorders in Barcelona, Spain, June 7–10, 2006. For details and application information, see http://www.aedweb.org/conference/travel_fellow.cfm.

Jodie Richardson, BSc

Jodie Richardson, BSc, is a graduate student in the clinical psychology doctoral program at McGill University. She received her BSc from McGill University in 2003. Her research interests include the relationships between serotonergic gene polymorphisms, environmental stressors and psychopathological traits in bulimia nervosa.

The 5HTTLPR polymorphism, psychopathological symptoms, and childhood abuse in bulimic eating syndromes.

Jodie Richardson, BSc, Howard Steiger, PhD, FAED, Ridha Joobar, MD, PhD, Mimi Israël, MD, Kenneth R. Bruce, PhD, N.M.K. Ng Ying Kin, PhD, Lise Gauvin, PhD, Simon N. Young, PhD and Melanie Aubut, BA. Eating Disorders Program, Douglas Hospital; Psychiatry Department, McGill University; Department of Social and Preventive Medicine, University of Montreal

Introduction: A short (s) allele polymorphism in the promoter region of the 5-HT transporter gene (5HTTLPR) has been associated with such clinical manifestations as impulsivity, suicidality, affective disorders and bulimic symptoms. **Methods:** We assayed 90 women with bulimic eating syndromes and 57 healthy control women (62 and 56 of whom, respectively, were unmedicated) for the 5HTTLPR polymorphism, eating symptoms, psychopathological traits, childhood abuse, and platelet [³H-] paroxetine binding (a proxy for 5-HT transporter function). **Results:** Presence or absence of the 5HTTLPR “s” allele was never linked to variations in eating symptoms. However, in women with binge eating syndromes, the “s” allele was associated with elevations in such characteristics as affective instability, attachment problems, self harming behaviors, borderline personality disorder and childhood abuse. On some dimensions, “diagnosis” x “allele” interactions suggested phenotype specific expression of underlying genetic potentials. Findings from a previous report, suggesting that 5HTTLPR variations also predicted levels of platelet paroxetine binding, were not replicated. **Discussion:** Our

results suggest that “borderline” manifestations in bulimic syndromes may have genetic determinants, and that childhood abuse may contribute to the activation of such genetic vulnerabilities. Furthermore, given different expressions of 5HTTLPR in bulimic spectrum and normal control samples, we speculate that we may be observing an eating disorder dependent activation of genetic potentials.

Myralys Calaf, BA

Myralys Calaf, BA, is a doctoral student in the Clinical Psychology PhD program at the Carlos Albizu University in Puerto Rico.

Binge eating disorder in the Puerto Rican population.

Myralys Calaf, BA, Carlos Albizu University, San Juan Campus, Mae Lynn Reyes, PhD, University Center for Psychological Services and Research, University of Puerto Rico, Río Piedras Campus and José Martínez, PhD, Carlos Albizu University, San Juan Campus

Introduction: Binge-Eating Disorder (BED) is a condition characterized by recurrent episodes of binge eating associated with subjective and behavioral indicators of impaired control and significant distress, along with the absence of the regular use of inappropriate compensatory behaviors. In national samples drawn from weight-control programs, the overall prevalence of BED varies from approximately 15% to 50%. There have been no epidemiological studies in Puerto Rico on the subject of eating disorders, yet investigators have found a prevalence of bulimia nervosa similar to that in the United States. Since the findings of epidemiological studies suggest that BED is more common than BN, higher prevalence rates should be expected for BED in the Puerto Rican population. The first aim of this research was to translate and adapt the Questionnaire on Eating and Weight Patterns-Revised (QEWP-R), currently the sole diagnostic procedure used exclusively for identifying BED, for the Puerto Rican population. A second aim was to begin assessing the prevalence of BED in the Puerto Rican population. **Method:** The QEWP was translated and back-translated,

incorporating information gathered from pilot samples. It was then administered to a sample of 140 Puerto Rican adults selected from weight-control programs. **Results:** 5.8% of the subjects met criteria for BED while an additional 5.8% met criteria for subsyndromal BED. **Discussion:** BED prevalence rates appear to be slightly lower in Puerto Rican samples as compared with national samples; although, when the proposed BED criteria are altered as the pertaining literature suggests, in terms of “binge days” or level of distressed experienced, the results are comparable to the prevalence found in the United States. The implications of this study are highly relevant, especially given the scarcity of knowledge about this disorder in the Puerto Rican population.

Vicki L. Clark, MS

Vicki L. Clark, MS, is a graduate student in the clinical psychology PhD program at Rutgers, The State University of New Jersey. She received her BA from the University of Pennsylvania in 2001 and her MS from Rutgers University in 2005. Her research interests include the treatment of body image disturbance, eating disorders and obesity as well as the identification of factors that contribute to the development and maintenance of body dissatisfaction and disordered eating.

An examination of the relationship between rumination about body image/attractiveness, body dissatisfaction, eating disorder psychopathology, and depressive symptoms.

Vicki L. Clark, BA, and G. Terence Wilson, PhD, Rutgers, The State University of New Jersey

Numerous studies have documented the relationship between rumination and depression. In addition, females are more likely than males to ruminate in response to a variety of negative events. Given the frequent comorbidity of body dissatisfaction, eating disorders and depression, the identification of common risk factors and maintenance mechanisms might aid prevention and treatment efforts in

all these areas. This study examined the relationships between rumination about body image/attractiveness, body dissatisfaction, eating disorder psychopathology, and depressive symptoms. Undergraduate females (N=145) completed measures of rumination about body image/attractiveness, body dissatisfaction, eating disorder symptoms (binge eating, compensatory behaviors, dietary restraint, and concerns about shape and weight), and depressive symptoms. Rumination about body image/attractiveness was significantly associated with body dissatisfaction ($r = .738, p < .001$), objective binge episodes ($r = .411, p < .001$), subjective binge episodes ($r = .324, p < .001$), excessive exercise ($r = .232, p < .01$), dietary restraint ($r = .450, p < .001$), concerns about eating ($r = .647, p < .001$), shape ($r = .739, p < .001$), and weight ($r = .676, p < .001$), lack of acceptance of shape and weight ($r = .477, p < .001$), and depressive symptoms ($r = .404, p < .001$). Because depressive symptoms have previously been associated with both body dissatisfaction and rumination, partial correlations were calculated in order to evaluate these relationships controlling for depressive symptoms. The pattern of results remained the same. The tendency to ruminate about negative body image/attractiveness events was related to body dissatisfaction and eating disorder psychopathology controlling for depressive symptoms. Clinical interventions aimed at diverting attention away from body image concerns might simultaneously facilitate improvements in body dissatisfaction, eating pathology and depressive symptoms.

Member News

Nicole C. Barbarich-Marsteller recently won the U.S. Department of Energy Graduate Student Award to attend the 55th Annual Meeting of Nobel Laureates and Students in Lindau, Germany. Since 1951, Nobel Laureates in chemistry, physics, and physiology/medicine convene annually in Lindau, Germany, to conduct open, informal meetings with students and young researchers. The United States was asked to send a group of graduate student representatives in the sciences, and Nicole was selected by the Department of Energy.

Catherine Steiner-Adair, PhD, recently received the Amy Irving Award for Prevention from the National Eating Disorders Association. She also received a "Woman to Watch" award from Jewish Women International.

Kristin von Ranson, PhD, CPsych, University of Calgary, Canada, received The Laureate

Young Investigators' Grant for \$10,000 from the National Eating Disorders Association for her study, "Survey of Psychotherapy Providers for Individuals with Eating Disorders."

On September 10, 2005, the National Eating Disorders Association recognized **Dr. Ken Weiner**, Eating Disorder Center of Denver, Ellen Hart-Pena, and Toni Saiber, Founders of the Eating Disorder Foundation, at Donna and Malcom Wheelers' residence in Denver. The event was also a benefit to increase family involvement at the 2006 NEDA Conference in Washington, D.C.

Books Published

Kathy Kater, LICSW, *Healthy Body Image: Teaching Kids to Eat and Love Their Bodies Too!* Second Edition. Available at www.nationaleatingdisorders.org.

News from the National Association of Anorexia Nervosa and Associated Disorders (ANAD)

Annie Carpenter Hayashi
Director of Communications

Did you happen to catch "The Early Show" on CBS the morning of October 10? Dr. Patricia Santucci, ANAD's executive vice president and AED member, appeared on a segment on "pro-ana" Web sites.

The segment featured a 35-year-old single woman in Texas, mother to four children. When asked by a CBS correspondent what her ideal weight is, "Stephanie" answered, "I'll know when I get there." "But you could die," replied the CBS correspondent. At that point, "Stephanie" began to cry, saying that she thought about the possibility of dying every day. "It's like having cancer," she said.

ANAD is serving as technical adviser for *ELLEgirl*, a magazine for teen-age girls and sister publication to the very popular *ELLE*, on a questionnaire and article related to body image they are working on for 2006.

Prompted by a growing trend in Hollywood toward both "ultra-thinness," and the use of drugs to regulate weight, *The New York Post* ran a full-page feature article on the co-morbidity of anorexia and substance abuse, particularly cocaine and methamphetamine, in New York City.

The piece revealed the enormous pressure many women feel to be thin and the extreme measures they will take to achieve that goal. In the article, one woman stated, "I'd be starving at a dinner party while people are complimenting me on how skinny I was. I would sneak into the bathroom to do a line [of cocaine] to stop the cravings." We appreciate the attention brought to this issue.

Contributions to this story were made by: Patricia Santucci, MD, FAED, an AED member and ANAD executive vice president; Steven Levenkron, MA; and Cynthia Power, MS.

Three Comprehensive Care Centers for Eating Disorders Grants Awarded in New York State

Sharon Alger-Mayer, MD, Drew Anderson, PhD, Evelyn Attia, MD, Robert Greenbaum, PhD, Richard Kreipe, MD, and Mary Tantillo, PhD, RN, FAED

Eating disorders are little understood, yet produce some of the most disabling physical and psychological effects for patients and families. Anorexia nervosa is the most fatal psychiatric illness. Women ages 15–24 with this condition have a death rate 12 times higher than all other causes of death combined for that demographic. New York is the only state that has had the foresight to create legislation requiring Comprehensive Care Centers for Eating Disorders (CCCED). The CCCED legislation was signed into law by Governor George Pataki in June 2003 following aggressive advocacy on the part of State Senate Majority Leader Joseph Bruno.

In fall 2005, three geographically distinct CCCEDs covering all of New York state were awarded grants of \$500,000 per year to support their first two years of operation. The Comprehensive Care Centers will a) ensure access to comprehensive, individualized and continuous care for patients and families; b) promote community education, outreach, information and referral, prevention and early intervention; c) provide case management for high risk patients; and d) ensure research to examine the most effective treatment and prevention approaches.

The CCCED for the New York Metropolitan region was awarded to The New York Presbyterian Hospital in conjunction with Schneider Children's Hospital and The New York State Psychiatric Institute. Dr. Evelyn

Attia will be serving as overall program director for this Center, working together with a board of directors that includes Dr. Neville Golden from Schneider Children's Hospital, Dr. Katherine Halmi from New York Presbyterian Hospital, and Dr. B. Timothy Walsh from NYSPI. The Metro Region CCCED hopes to improve evaluation and referral services for eating disorder patients in the New York Metropolitan area and to better integrate available specialist services at the three affiliated hospital centers. The Metro Region CCCED will be working together with the National Eating Disorders Association (NEDA) and Federated Employment and Guidance Service, Inc. (FEGS) on community outreach and educational initiatives.

The CCCED for the Northeast region of New York state was awarded to a collaborative comprised of Albany Medical Center, Four Winds Hospital and Bellevue Woman's Hospital. This collaboration will allow the region to benefit from the unique strengths of each institution. Albany Medical Center will provide medical stabilization and initial refeeding. Four Winds will provide psychiatric services including inpatient, partial hospitalization, and intensive outpatient programs. Bellevue Hospital, in conjunction with NEDA and the Capital Region Association for Eating Disorders (CRAED), will develop the prevention component of the program. A 24-hour triage line will be instituted to assist patients and providers in attaining access to the most appropriate level of care. Dr. Robert Greenbaum, CEO and clinical director of Four Winds Hospital, will serve as interim executive director. Dr. Sharon Alger-Mayer, associate professor of medicine, Albany Medical College, will serve as medical director, and Brenda Mayette, RD, CDN, manager of nutrition services at Bellevue Woman's Hospital, will head the prevention initiative.

The mission of this collaboration is to offer a comprehensive range of services for patients struggling with eating disorders, to increase availability of outpatient services and to provide education to providers and patients throughout the Northeast region. A multi-disciplinary advisory board including providers, patients, and family members has been established and will help guide the development of this program.

The CCCED for the Western region of New York was awarded to a collaborative of Unity Health System and Golisano Children's Hospital. Mary Tantillo, PhD, RN, FAED (director, Eating Disorders Program, Unity Health System) and Richard Kreipe, MD (director, Child and Adolescent Eating

Disorders Program at Golisano Children's Hospital at Strong), collaborated with the Rochester area Eating Disorders Community Advisory Board (co-chairs, Amy Campbell, JD and Dr. Tantillo) and the Rochester Area Eating Disorders Network to develop the WNYCCED. The awarding of the WNYCCED grant to this collaborative was the outcome of strong partnerships among patients, families, recovered individuals, providers, insurers, and non-profit and business sector professionals. Excellus-Blue Cross/Blue Shield, The Mental Health Association, DePaul Community Services, Wegmans and Daisy Marquis Jones Foundation have been particularly supportive of the WNYCCED and its various service components.

Due to the availability of CCCED grant funding and the generosity of Wegmans and Daisy Marquis Jones Foundation, the WNYCCED will include St. Joseph's Villa in Rochester, the first adolescent residential treatment program in New York state, and Sage House, (operated by DePaul in Rochester), the first in the state to offer enriched housing and transitional services for eating disordered adult women. Both facilities are available to all patients and families in New York and will be used as benchmarks for development of additional housing and residential treatment programs. Additionally, the Mental Health Association in collaboration with Cindy Bitter (author of the book, *Good Enough*, and life coach) will offer the first Life Management Skills Group/Peer Mentoring Program for women with eating disorders.

The hub of the WNYCCED will be located at the Eating Disorders Programs at Golisano Children's Hospital at Strong and Unity Health System, but the WNYCCED is designed to serve individuals and families in affiliate areas throughout upstate and central New York. Affiliate providers in the WNYCCED are located in Syracuse, Buffalo, Watertown, and Binghamton. Additional information about these sites can be obtained by contacting Dr. Tantillo (tantillo@rochester.rr.com).

Affiliates have participated in the planning of the WNYCCED over the past year, along with the Eating Disorders Community Advisory Board, comprised of patients, families, recovered individuals, providers and community professionals. Dr. Tantillo will be the director of the WNYCCED, and Dr. Kreipe will serve as medical director. Amy Campbell will oversee community education, prevention and outreach.

The CCCED grants will allow providers to build on successful collaborations that have promoted comprehensive care in New York state and use these as a model for the rest of the country. The three CCCEDs are working together to develop shared protocols, assessments and outcome measures, case management approaches to patients and families, and a centralized information/referral line and Web site for the state.

Eating disorders are diseases of disconnection. Recovery from an eating disorder involves movement and growth in relationships with oneself and others while navigating the uncertainties and ambiguities of life. Disconnecting from the disease's false promises of control, connection, and comfort, and reconnecting with one's own authentic needs, thoughts and feelings, requires us to step out of isolation and allow others to walk with us in our vulnerability. If this shift toward connection is what we expect patients and families to do in recovery, then we as healers, administrators, teachers, leaders in the field, need to practice with each other. The CCCED initiative is a benchmark for how patients, families, recovered individuals, providers, insurers and leaders from the not-for-profit and business sectors can take this walk together.

Upcoming Conferences

14th European Congress of Psychiatry: New Perspectives on Treatment

March 4-8, 2006

Nice, France

For details, see

<http://www.kenes.com/aep2006/>

The Westwind Roundtable on Innovations in Treatment

March 17-18, 2006

The Victoria Inn and Convention Centre, Winnipeg, Manitoba, Canada

For information, see

<http://www.westwind.mb.ca/Conference.html>

Eating Disorders Research Society

August 30 - September 2, 2006

Port Douglas, Queensland, Australia

For information, visit

www.eatingdisordersociety.org

Book Review Corner

Renee Rienecke Hoste, PhD
University of Chicago

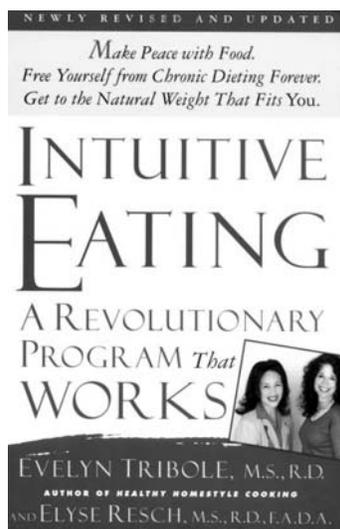
Intuitive Eating: A Revolutionary Program That Works

Evelyn Tribole, MS, RD, &
Elyse Resch, MS, RD, FADA
St. Martin's Press, 2003.

A 1991 study published by Leann Birch and colleagues in the *New England Journal of Medicine* concluded that young children, given nutritious food choices, have the ability to choose an adequate diet without parental supervision. Although the children's food choices and energy intake were highly variable from meal to meal, they balanced out over time. The concept of intuitive eating refers to this seemingly innate ability to choose a healthy and balanced diet based on inner hunger signals, rather than societal messages or external stimuli learned over time. Tribole and Resch believe that we were born with this ability and can rediscover it with a little help. In "Intuitive Eating," written for chronic dieters, the authors draw on their years of experience as nutritionists to guide readers in their rediscovery.

Tribole and Resch describe the return to intuitive eating as a process based on ten principles. The first, "Reject the Diet Mentality," encourages readers to give up on diets once and for all. The authors emphasize that years of dieting result only in frustration, guilt, overeating and weight gain. Dieters often blame themselves for not having enough willpower to stick to a diet, instead of realizing that the process of dieting itself is flawed. According to the authors, becoming an intuitive eater allows one to escape the vicious cycle of restriction and binge eating, and let go of the shame and guilt that come from years of failed dieting attempts.

The second principle, "Honor Your Hunger," explains that the process of food restriction and subsequent binge eating can diminish one's ability to recognize internal hunger cues. Readers are encouraged not only to learn to recognize these cues, but also to be willing to feed themselves adequately upon recognition. The authors describe the biological mechanisms that are in place to ensure our bodies receive their needed energy, and they argue that restricting one's eating is essentially fighting against one's biology — a fight that is inevitably futile.



"Make Peace with Food" is the third principle, which encourages readers to grant themselves unconditional permission to eat whatever they want. The logic behind this principle is that forbidden foods are often appealing precisely because they are forbidden. Once these foods are permissible, they will seem less attractive, cravings for these foods will decrease, and emotional connotations with the foods will no longer exist.

The fourth principle, "Challenge the Food Police," encourages dieters to stand up to societal dictates regarding what they should and shouldn't eat. The authors also encourage readers to be aware of negative self-talk. They review common cognitive distortions regarding shape and weight, and discuss how to challenge these thoughts. The next two principles, "Feel Your Fullness" and "Discover the Satisfaction Factor," discuss the importance of getting in touch with one's inner satiety signals and making sure that what one chooses to eat is satisfying. When dieters settle for inadequate (often low-fat or low-carb) substitutions for the foods they really want, they will eat more of the "inferior" food because they feel unsatisfied, and will often end up eating the food that they originally wanted anyway. When people eat what they want, they will end up consuming fewer calories overall, according to Tribole and Resch. "Cope With Your Emotions Without Using Food" addresses the issue of emotional eating and discusses ways to change this habit. "Respect Your Body" encourages people to stop criticizing their bodies, explaining that it is difficult to fully accept the intuitive eating philosophy if one is constantly unhappy with and critical of his or her body. Respecting one's body does not necessarily mean liking one's appearance, but rather "treating [one's body] with dignity and meeting its basic needs."

The last two principles are, "Exercise — Feel the Difference," and "Honor Your Health — Gentle Nutrition." Tribole and Resch encourage readers to include physical activity in their daily lives and to eat in a healthy manner, emphasizing the importance of variety, moderation and balance in eating. The authors argue that once people are intuitive eaters they will exercise and eat healthfully; not to lose weight, but to feel good both physically and emotionally. The final chapter presents several case studies of people who have used intuitive eating in the process of recovering from an eating disorder. Intuitive eating can be a useful component of recovery according to the authors, but they do warn, "...let us state definitively that the philosophy of *Intuitive Eating* cannot be fully embraced in the beginning of treatment for a serious eating disorder."

Many of the messages in this book could be useful for someone who has struggled for years with the vicious cycle of food restriction and overeating. Tribole and Resch encourage readers to rediscover the pleasures of eating while letting go of the guilt that, for many, has accompanied eating for so long. However, although the book is filled with clinical vignettes of people who have overcome years of chronic dieting by becoming intuitive eaters, no research evidence is presented to support the authors' ideas. Becoming an intuitive eater is an appealing idea; but, without empirical support, the extent to which the actual process is effective remains unclear.



Classified Ads

Postdoctoral Fellows

The University of North Carolina at Chapel Hill — Interdisciplinary Obesity Center (IDOC) is seeking applicants for its inaugural Interdisciplinary Obesity Training (IDOT) postdoctoral fellowship program for 2006-2008. Postdoctoral scholars will receive training in interdisciplinary research in obesity. Applicants will be selected from a wide range of disciplines, but should have interests in the area of obesity as it relates to the biological, genetic or socioeconomic and behavioral factors linked to obesity or obesity-related dietary or physical activity trends. Research will require postdoctoral fellows to go beyond current disciplines to develop new and innovative research methodologies. UNC is committed to increasing representation of women and minorities in its postdoctoral programs and particularly encourages applications from such candidates. Only U.S. citizens and permanent residents are eligible for this two-year award. Applications began to be accepted December 1. Successful applicants must start their fellowships no later than July 30, 2006. To apply, please follow the instructions found in the IDOT Application Guidelines. For more information, please contact IDOC Deputy Director Mary Beth Powell at mbpowell@email.unc.edu. Or go to the Web site: www.uncidoc.org.

Clinical Psychologist in Adolescent Medicine and Eating Disorders

The University of Arkansas for Medical Sciences Department of Pediatrics in Little Rock, Ark. is seeking a clinical psychologist experienced in the treatment of eating disorders to direct the psychosocial services in an outpatient Adolescent Medicine section. Two years experience and Arkansas licensure is desired. Primary responsibilities include supervision of outpatient psychological services in an Adolescent Medicine clinic and in an Adolescent Eating Disorder Program, conducting psychological assessments and outpatient individual, group and family cognitive-behavioral therapy for eating disorders. Training in cognitive-behavioral therapy and/or dialectical behavioral therapy is essential. Although the position is primarily clinical in nature, medical student/resident/psychology intern training opportunities are available. Clinically oriented research is encouraged and supported. Opportunities for collaboration with other pediatric services are available. Requirements include completion of an APA-accredited doctoral and internship program in psychology. Candidates must also be licensed or eligible for licensure in the State of

Arkansas. Arkansas Children's Hospital is among the largest children's hospitals in the United States. The Department of Pediatrics employs more than 185 faculty members and 75 residents. The Adolescent Medicine section sees 10,000 medical visits annually and the Eating Disorders program maintains continuous enrollment of 90-100 patients. To apply for the position, please send a detailed letter of interest, curriculum vitae, three letters of reference and two sample clinical reports to:

Maria G. Portilla, M.D.
Director, Eating Disorders Program
Section on Adolescent Medicine
UAMS Department of Pediatrics
Arkansas Children's Hospital
800 Marshall Street
Little Rock, AR 72202-3591
portillamariag@uams.edu
501-364-1849

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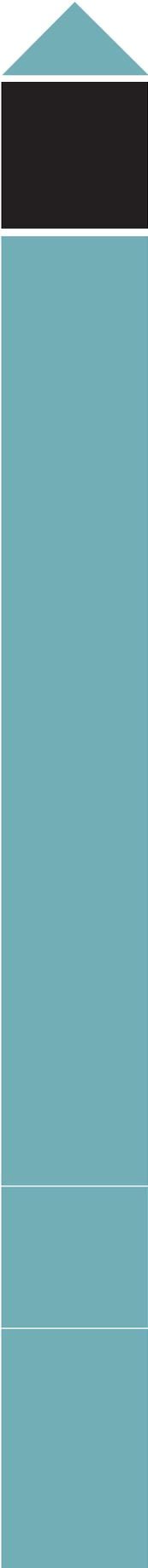
In a nation increasingly captivated by weight loss and gain, eating disorders are a serious problem facing every community in our state. At **Atlantic Health System**, one of New Jersey's largest and most respected nonprofit health care systems, we're proud of our dynamic and growing Eating Disorder Programs, offering the highest quality identification, evaluation and behavioral treatment services for our patients. We currently seek Eating Disorder Therapists to join this exceptionally talented team.

Eating Disorder Therapists

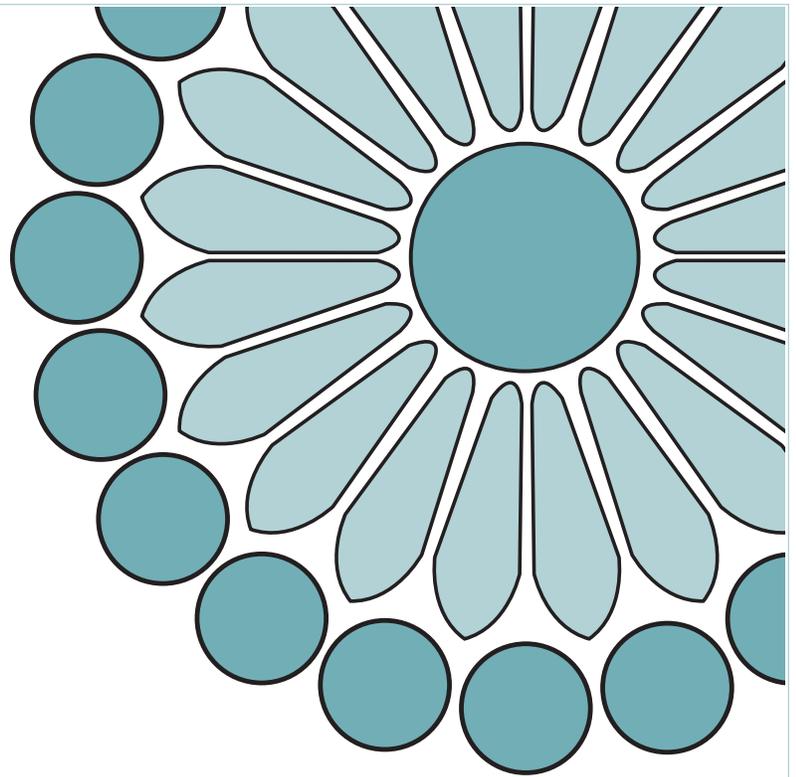
You will provide individual, group and family therapy to both patients and their families. This will include identifying and prioritizing significant problems, handling crisis interventions, using advanced clinical psychosocial assessments, and liaising with multi-disciplinary treatment teams. You must be Master's prepared, or a Doctorate level therapist or a social worker, with 3+ years of experience in treatment of patients with eating disorders, preferably adolescent patients. Additionally, you should be LCSW or a licensed psychologist.

For immediate consideration, please e-mail your resume to linda.yovanovich@ahsys.org or apply online at www.atlantichealth.org. We are an equal opportunity employer.





Save the Date!



2006 International
Conference on
Eating Disorders

June 7–10, 2006
Hotel Fira Palace

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www.fira-palace.com
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Nominees for the AED Board of Directors

*Michael Devlin, MD, FAED, on behalf of
the 2005–2006 nominations committee*

After careful consideration, the nominations committee is pleased to present the AED board of directors with the following slate of nominees for 2006–2007. As chair of the committee, I have contacted all of these individuals and each has expressed his or her willingness to serve:

President-Elect:

Kelly Klump, PhD

Secretary:

Mimi Israel, MD, FRCP

Board Members:

Paulo Machado, PhD

Susan Paxton, PhD (two-year term to
complete Mimi Israel's term)

Lucene Wisniewski, PhD, FAED

Nominations Committee:

Allan Kaplan, MD, FAED

Tracey Wade, PhD, FAED

The AED Forum

Please send all suggestions for articles, job opportunities, information regarding upcoming events or meetings, letters to the editor, awards, honors, or news about Academy members, (e.g., published books) and all other items of interest to:

Debbie Franko, PhD

Department of Counseling Psychology
Northeastern University
203 Lake Hall
Boston, MA 02115-5000 USA
Phone: (617) 373-5454
Fax: (617) 373-8892
E-mail: d.franko@neu.edu

Submission deadline:

March 1, 2006

All contributions must be submitted to the editor via e-mail or disk in Microsoft Word format.