

## Message from the President

Allan Kaplan, M.D.



I hope we can each find some solace and comfort during this painful, sorrowful time. Prior to the tragic events of September 11, the Board had been focused on the fall Board of Directors meeting, which has now been rescheduled for Albuquerque on Sunday and Monday, December 2-3, after the Eating Disorders Research Society Annual Meeting. During the AED meeting, the Board will hear reports from the Chairs of each of the five Councils regarding the activities of their respective Councils since the last Board meeting in Vancouver. These include Research Council (Jim Mitchell), Publications Council (Tim Walsh), Membership Council (Kelly Klump), Education and Training Council (Mike Devlin and Amy Baker Dennis) and Public Affairs/Fundraising Council (Ann Kearney-Cooke). We will also discuss the important issue of our continuing relationship with Wiley & Sons, publishers of the International Journal of Eating Disorders. Our contract with Wiley is up shortly and a new contract will need to be negotiated in the next few months. Input received from the membership, through the members survey, regarding this important issue was posted on the AED chat line last month. It will be utilized in informing the negotiating process and decision making. We will also be discussing the fundraising event planned for the annual meeting in Boston next spring, and with the help of an expert facilitator, specific future fundraising strategies the Academy needs

to consider adopting in order to increase the Academy's financial resources. Assuring financial stability and viability is an important goal of mine and the other Board members in order to allow the Academy to proceed with implementing its strategic vision. I will provide a summary of the proceedings of the Board meeting for members in the next newsletter.

Over the past few months, the Board has also dealt with a number of other important issues. These include developing, with the assistance of Marsha Marcus who is Chair of our Media Relations Committee, an official AED position statement regarding the pro-anorexia websites which have generated a lot of important debate. The Board has finalized a letter of agreement with NEDA to work together on issues of common interest and concern to both organizations. One example of such an endeavor is the upcoming jointly sponsored Junior Scholars Teaching Day prior to the Eating Disorders Research Society annual meeting in New Mexico. The Board also renewed its commitment to support the advocacy activities of the Coalition for Eating Disorders. The Board agreed to rename the "Third Party Payer and Government Relations Committee" and instead call it the "Public Policy Committee." This emphasizes our role as a developmental policy making group rather than an activist advocacy group. The Education and Training Council has been busy preparing for the upcoming Regional Teaching Day Workshops which will be occurring on October 18 in Atlanta and on October 19 in Chicago. This program will address three of the empirically supported treatments for eating disorders, CBT (Dr. Terry Wilson), IPT (Dr. Denise Wilfley), and family therapy (Dr. Daniel le Grange).

I wish to reiterate what I said in my first message to the membership in the previous newsletter. Please get involved in the activities of the Academy. It is your orga-

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## Message from the Editor

Lisa Lilienfeld, Ph.D.

I am writing this column three days after the worst disaster in the U.S. in my lifetime. I send my condolences out to each of you who have been the most directly impacted by this unspeakable tragedy. I would like every American Academy member to know just how much support we have from our colleagues worldwide. The Academy listserve has been flooded with heartfelt sorrow, caring and support from members all over the globe, including Argentina, Brazil, Uruguay, Israel, Canada, Mexico, England, France, Austria, Iceland, South Africa, and the Czech Republic. In the worst week in memory, I cannot recall a time when so many people have demonstrated such solidarity, and this Academy is no exception.

Communication on the Academy listserve is also what generated the current newsletter article concerning the debate over "pro-anorexia" websites, nearly all of which have just recently been banned. All Academy members are welcome to join us on the listserve for these interesting discussions and debates at no extra cost. Academy

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## Fall Regional Teaching Day Workshops Fast Approaching

Michael Devlin, M.D. & Amy Baker-Dennis, Ph.D., Education and Training Council Co-Chairs

There's still time to register for AED's Fall 2001 Regional Teaching Day Workshops, *Best Practices in the Treatment of Eating Disorders*, to be held in Atlanta and Chicago on October 18 and 19, respectively. These full day workshops, the first of their kind to be sponsored by AED, represent a unique opportunity for in-depth clinical learning provided by expert clinicians and educators.

This year's topics and faculty include cognitive behavioral therapy (Dr. G. Terence Wilson), interpersonal therapy (Dr. Denise Wilfley), and family therapy (Dr. Daniel le Grange), and the program will be presented in full at both locations. Following a morning of clinical overviews by our faculty, participants will attend an afternoon training session focused on one of the three treatment modalities—small group settings for discussion of clinical material and interaction with faculty.

The AED regional teaching workshops have been specially designed to promote the sharing of clinical expertise between clinical researchers and practitioners on the front lines who wish to expand their knowledge and skills in using empirically validated treatments for eating disorders. To register, visit the AED website ([www.aedweb.org](http://www.aedweb.org)) or contact the AED central office to obtain registration materials. If you have ideas about topics, locations, or speakers for future regional training days, or other types of clinical training opportunities which would meet your needs, please contact Education and Training Council Co-Chairs Amy Baker Dennis ([ABDennis@aol.com](mailto:ABDennis@aol.com)) or Michael Devlin ([mjd5@columbia.edu](mailto:mjd5@columbia.edu)).

We hope to see you there.



## Call for 2002 Academy Fellows, to be Inducted at April Meeting

Dianne Neumark-Sztainer, Ph.D.

The Academy Fellowship Committee announces its call for 2002 Fellow Applications. The Academy awards Fellow status to AED members from various disciplines and recognizes the diverse ways they may contribute to the field of eating disorders. Eligibility is open to those who have been full members of the Academy for at least five years. Application requires the endorsement of two current Fellows of the Academy who are familiar with the work of the applicant. Applicants/endorsers should document significant contributions in at least five of the following ten areas:

1. Active involvement in the work of the Academy in a leadership role.
2. Positions in other professional organizations.
3. Clinical contributions demonstrating excellence in the care of patients.
4. Teaching contributions in an academic or clinical setting.
5. Research accomplishments that have expanded knowledge in the field.
6. Scientific and scholarly publications and service on the editorial boards of journals.
7. Significant participation in conferences.
8. Active involvement in advocacy organizations.
9. Uncompensated community service in the treatment or awareness of eating disorders.
10. Development or administration of programs for eating disorders.

Obtain applications from the Academy Central Office ([aed@degnon.org](mailto:aed@degnon.org)). The deadline for submission of applications is January 2, 2002. Applications will be reviewed by the Fellowship Committee, and applicants will be notified of the committee's decision by February, 2002. The induction of all 2002 Fellows will take place during the International Conference on Eating Disorders in Boston, April 25-28, 2002.

### Call for Nominations

Please send recommendations by November 23 for 2002 President-Elect, two Board Members-At-Large, and two members of the Nominating Committee to the Academy central office at [aed@degnon.org](mailto:aed@degnon.org).

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## Boston 2002: Something New

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Cynthia M. Bulik, Ph.D.

On April 25-27, 2002, the 2002 International Conference on Eating Disorders will debut in Boston, USA. This is the first time our meeting will not be in New York and we are excited about exploring the opportunities and wonders of a new city. We are especially pleased that lower costs will make it more affordable for more conference participants to attend!

The 2002 conference committee chaired by Cindy Bulik, Ph.D. and Scott Crow, M.D. has put together an innovative program that will reach beyond the boundaries of eating disorders research in order to present relevant perspectives from researchers outside of the field. The overarching theme of the conference is a timely revival of one of the most central unanswered questions in our field: New Aspects of Gender in Eating Disorders.

The committee has convened four plenary sessions—Cross Cultural, Nutrition, Neurobiology and Genetics, and Treatment Updates.

The Cross-Cultural plenary will feature Hans Hoek, M.D., Ph.D. (Netherlands), Chris Szabo, Ph.D. (South Africa), Anne Becker, M.D. (USA), and Kathy Phillips, Ph.D. (USA).

The second plenary was developed in order to increase the Academy's commitment to the field of Nutrition. This plenary will illustrate the breadth of the field of nutrition and include topics ranging from biology to nutritional anthropology. Speakers include Cheryl Rock, Ph.D., R.D. (USA), Barbara Rolls, Ph.D. (USA), John DeCastro, Ph.D. (USA) and Julie Parks, Ph.D. (New Zealand).

The third plenary is a special NIMH-sponsored plenary on Neurobiology and Genetics of Eating Disorders. We have invited two speakers from outside of the field to provide new perspectives on the psychobiology of attachment (Steve Suomi, Ph.D. USA) and an endocrinological anthropologist on hormonal changes in puberty (Carol Worthman, Ph.D., USA). In addition, Howard Steiger, Ph.D. (Canada) will speak on the neurobiology of trauma

in eating disorders and Wade Berrettini, M.D., Ph.D. (USA) will provide an update on the latest findings of the Price Foundation Studies on the Genetics of Anorexia and Bulimia Nervosa.

Finally, the fourth plenary will focus on recently completed clinical trials and naturalistic outcome studies. Speakers for this plenary include Mike Devlin, M.D. on BED (USA), Peter Joyce, Ph.D., FRANZCP on anorexia nervosa (New Zealand), Ulrike Schmidt, Ph.D. on naturalistic outcome studies (UK), and Ivan Eisler, Ph.D. on family therapy (UK).

In addition to these rich plenary sessions, we will be hosting a pre-conference teaching day, a welcome reception followed by discussion panels on Thursday evening, expanded SIG (special interest groups) meetings, special membership breakfasts for new and prospective members, a wine and cheese poster session, plenty of high quality papers and workshops, and the first AED fundraising gala (see the next column).

So start making plans for Boston 2002. The initial call for abstracts has been issued and we are using a new web-based submission system. Visit the AED website ([www.aedweb.org](http://www.aedweb.org)) for more information.

We look forward to making this a productive and enjoyable conference for all participants.



### ***President, cont. from page 1***

nization and we need to constantly renew and invigorate the Academy by involving new members in its important activities. Please feel free to contact me or any other member of the Board to discuss ways for you to get involved. One obvious way is to participate in the nominating process by responding to the call for nominations that appears in this issue of the Newsletter.

Best regards to all.



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## Save the Date: Academy for Eating Disorders Gala in Boston

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Ann Kearney-Cooke, Ph.D. and Cynthia M. Bulik, Ph.D.

In conjunction with the April, 2002 International Conference on Eating Disorders in Boston, we will be hosting the first Academy for Eating Disorders Fundraising Gala. The Gala will be held on Friday, April 26 in the Imperial Ballroom of the Boston Park Plaza from 8-11 p.m.

The goal of this event is to raise funds to continue and expand the mission of the Academy. Money raised will enable researchers and clinicians to continue to address some of the tough, challenging questions about the prevention and treatment of eating disorders. A number of prominent national leaders now serve on our advisory board including: Carol Story, a producer at the CBS Morning Show; Abbey Britton, founder of Mode Magazine; and Karen Licitra, President of Ethocon. The Fundraising Committee within the Academy includes: Ann Kearney-Cooke, Cindy Bulik, Marsha Marcus, Pam Owens, Laura Hill, Beth McGilley, and Lucene Wisniewski.

Plans for the event include dinner followed by a program which will include an inspiring speaker. We are negotiating with a number of potential outstanding speakers for this event. Following the program, there will be an opportunity for participants to dance to the music of the sixties, seventies, and eighties to celebrate the commitment of all professionals in the field of eating disorders. Ondi Timoner (member of Advisory Board) winner of the Yale Prize for Film for her documentary *Girls in Prison*, is helping us find musical entertainment for the event.

We are looking for members to assist with all aspects of the Gala. Have you designed invitations, planned decorations for an elegant dinner, done photography for a special event or done any event planning? This is a great opportunity for you to join in our efforts. To help with this exciting event, email Ann Kearney-Cooke at [akc@fuse.net](mailto:akc@fuse.net) or call (513) 588-9431.



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## Academy Members Debate over Pro-Anorexia Websites

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Lisa Lilienfeld, Ph.D.

### *Overview*

The fascinating several week debate last month on our Academy listserve prompted the current column. Self magazine's August issue featured the topic of "pro-anorexia" websites in its article entitled, "Anorexia Outrage." Below you will find the announcement about Yahoo removing all of its pro-eating disorder websites in August. Next you will find the policy statement put forth by our Academy regarding these sites. Finally, you will find selected e-mail excerpts from our members on the listserve, representing both sides of the debate. I look forward to continued dialogue about this important issue.

### *Websites Shut Down*

"Yahoo Removes Pro-Eating Disorder Internet Sites"

By Catherine Holahan, Boston Globe Correspondent, 8/4/01

Leaders of a national movement fighting eating disorders claimed victory yesterday after the popular Internet search engine Yahoo agreed to remove websites promoting anorexia and bulimia from its server.

With names like "Stick Figures" and "Anorexic and Proud," pro-eating disorder forums have exploded on the Internet during the past year, according to health care specialists. The forums, run by individuals who call their eating habits a lifestyle choice rather than a disorder, offer everything from tips on starving and purging to photos of celebrities doctored to look anorexic.

"These sites can be life-threatening to people with eating disorders," said Holly Hoff of the National Eating Disorder Association, based in Seattle. "It was a real challenge to get them removed because we're up against free speech."

Anorexics and bulimics can suffer from impaired brain function, bowel and kidney problems, depression and heart failure, according to Dr. David Herzog, a Harvard professor of psychiatry and president of the Harvard Eating Disorder Center. Anorexia has the highest death rate of any mental illness; many of these deaths are from suicide. For the past six months, Hoff said, her organization, along with other health care groups, sent letters to Yahoo and other

hosts urging removal of the forums. Hoff said they often received the same response: "We're not responsible for the content on our servers; it's protected by freedom of speech."

But three days ago, Yahoo became the first to relent. Yahoo spokeswoman Dianna Lee said yesterday that she could not confirm when the company removed the sites, adding that user complaints are reviewed within 24 hours and in "extreme" cases, sites that violate Yahoo's service agreement prohibiting "harmful, threatening, and abusive" messages are removed.

"We strive to promote a forum that promotes a wide range of free expression on the Internet," said Lee. "The Internet is a rapidly growing medium and we as well as our users are struggling with its content." That content included sites like Silent Chaos's Bathroom, a pro-anorexia Web ring developed by a 22-year-old Boston woman who claimed in a text posting on the site that she had to move from Yahoo Geocities to another server after being shut down. The site includes tips on not eating, purging, and hiding the disorder, including carrying around photos of anorexic-looking models to look at, taking specific diet pills, and ways to pretend to eat.

"I want to be anorexic but I can't keep control, any tips?" writes a Web user identified as Heather Gage in a posting from a site attached to the Web ring on the Silent Chaos site. She receives a reply from another user, Celeste: "When I started out it was hard for me too but I just slowly cut things out of my diet, every two days I would take away another food and now I'm down to apples and celery. Good luck."

The ease with which sites can move from server to server is a problem, said Hoff. Currently, dozens of forums promoting eating disorders turn up at other Web hosting sites, though they are no longer among Yahoo's "clubs." A search on Microsoft Network communities brings up the Stick Figures Web community. The site, which boasts more than 42,000 hits, or site visits, since the end of January, features an altered picture of Angelina Jolie with the actress's face digitally shaded and elongated to appear starved and sickly. Next to the image is the slogan, "Anorexia is a lifestyle not a disorder."

"These sites infuriate me because people who have the disorder don't really choose," said 22-year-old Kimberly Leerssen, a re-

covering anorexic from Alabama. Leerssen, who at 5 feet 7 inches tall once weighed 90 pounds, knows how devastating the disorder can be. "I've lost friends, I've lost my health," said Leerssen. "It's a struggle every day to get through this."

This story ran on page A2 of the Boston Globe on 8/4/01. © Copyright 2001 Globe Newspaper Company. *Used with permission.*

### *The Academy Response*

The Academy for Eating Disorders has adopted the following policy statement with regard to "Pro-Anorexia" Websites. Media inquiries are handled by the Academy Media Relations Committee, chaired by Marsha Marcus, Ph.D. [marcusmd@msx.upmc.edu](mailto:marcusmd@msx.upmc.edu).

The Academy for Eating Disorders, the world's largest professional organization for those who work with individuals suffering from eating disorders, is extremely concerned about the proliferation of "pro-anorexia" websites. We understand that Yahoo, the server for a large number of these sites, has removed them because of concerns about the safety of children; others, including MSN have not.

Anorexia nervosa is a devastating illness that affects up to 1% of young women; however, symptoms of anorexia including significant calorie restriction and preoccupation with weight and thinness affect many more individuals, and are also associated with negative emotional and physical consequences.

The starvation behavior seen in anorexia nervosa can affect every organ system and can lead to decreases in bone mass, osteoporosis, changes in the brain, heart problems, and ultimately, death. One of the diagnostic criteria for anorexia nervosa is denial of the seriousness of the illness; thus websites that glorify anorexia as a lifestyle choice play directly to the psychology of its victims. There is always a creative tension between respecting the right of free speech and protecting vulnerable individuals, particularly children. It's important to note that the peak age of onset of eating disorders is during adolescence, and thus these sites target largely an audience of children. The websites pose a danger in that they promote anorexia nervosa as a lifestyle, provide support and encouragement to engage in health threatening

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behaviors, and neglect the serious consequences of starvation.

The Academy for Eating Disorders is committed to using our resources and collective influence to communicate that eating disorders are serious illnesses that can have devastating consequences for those who suffer from them. We work with the media, eating disorders advocacy groups, and patients and families to influence public opinion, shape public policy, and promote effective treatment of eating disorders. We can only hope that our activities, and those of numerous other organizations, can counteract the effects of these web-sites and other forces that glamorize these serious disorders.

*The Debate*

"I have some mixed feelings about being drawn into being 'anti' the 'pro-anorexia' websites...I have found that exploring the benefits of having an eating disordered life with my patients has often been important so they don't have to pretend compliance just to please me..."

Hugh Clarkson M.B., Ch.B., FRANZCP  
Psychiatrist in private practice,  
Auckland, New Zealand

"I agree— are we being pressured to take some kind of stand on this?...I have an ambivalent reaction to the efforts to censor the pro-anorexia sites. As much as I find the pro-anorexia sites disturbing, as an eating disorder specialist I also recognize that this is the way the disease makes people think. I am much more interested in [opposing] the bigger forces causing the illness than in silencing the voices of the victims, even when they are saying things that I think they will later come to understand are distortions...I also understand that as an organization we may take a stand on this issue— and I appreciate that the statement expresses concern as opposed to advocating censoring the sites—but I think some kind of statement contextualizing the sites might be better, and emphasizing that our activism efforts are pro-treatment, pro-insurance coverage of eating disorders, pro-hope-of-recovering—rather than aligning ourselves against this disease's sufferers."

Deb Burgard, Ph.D.  
Licensed Psychologist  
Los Altos, CA

"...I agree this issue (censorship) is a difficult one, but I feel that the pro-anorexic websites are very destructive. I do not see them in any way as a positive or therapeutic avenue for one to explore the desire to remain anorexic, view cognitive distortions or deal with the eating disordered self. I agree that exploring the eating disorder self is essential to recovery but I do not feel this is a safe or therapeutic way to do so...The pro-anorexia websites avenues of expression—where those with eating disorders share tips on how to purge and water-load...have no benefit to the eating disorder client...I feel they undermine the recovery process which is already a difficult one for these clients. I have talked to anorexics who view these websites as inspirational tools. They will look at the pictures and read the comments in their "moments of weakness" (i.e., when they want to eat). Further, I do not believe that the "dieting tips" shared on these websites are the same as the "tips" that young women share with one another (one needs to only read a few posts to see what I am talking about)..."

Christine Hartline, M.A.  
Eating Disorder Referral and  
Information Center

"...This ongoing discussion is fascinating. I appreciate hearing the different viewpoints expressed, and I'm ready to add mine as well. Taking a position for or against the pro-anorexia sites, in my opinion, is a losing position for AED and for people suffering with eating disorders in general. We all appreciate, I'm sure, that control issues are deeply embedded in the symptoms of anorexia. To support force, i.e. censorship and control, to gag the voices of these people, no matter how misguided those voices may be, shows that the organization has limits in terms of what it will accept from eating disorder sufferers. People suffering from eating disorders will take notice, and perhaps wonder what the limits are in terms of their being understood and respected by clinicians in this field...I believe we can find a better way."

Joanna Poppink, M.F.T.  
Psychotherapist in private practice  
specializing in eating disorders  
Los Angeles, CA

"...In general, I am not in favor of censorship nor "big brother" kind of monitoring. But I must say that I am baffled by the

views I've read this week. Why would we campaign against advertisers who promote unhealthy messages that impact vulnerable teens and young women and not want to do the same when it comes to these frightening websites?... Isn't it our obligation to fight against these pro-anorexia websites in the same ways we'd fight against anything else promoting eating disorders? The fact that they're created by those suffering from the disorder isn't a pertinent factor for me—that merely reflects the depth to which these illnesses have destroyed their thinking and judgment. I'm very much in favor of any efforts aimed at removing these sites."

Laura K. Ratner, LCSW-C, BCD  
Private Practice, Chevy Chase, MD

"Dear Joanna and Colleagues,  
...Even though we have a right to freedom of speech, I am against messages of hate, I am against messages that are dangerous to our young people. Our organization has fought to get ads removed that encourage dangerous and deadly dieting behavior so I do not view this effort as much different."

Christine Hartline, M.A.  
Eating Disorder Referral and Information  
Center

"...Huckleberry Finn was also considered a message dangerous to young people. Who decides what is dangerous to whose mind? The test of a free society is toleration of the fringes."

Joanna Poppink, M.F.T.  
Psychotherapist in private practice  
specializing in eating disorders  
Los Angeles, CA

"Joanna—I am concerned about your (and others) position against removing pro-anorexia websites based on issues with censorship...The vulnerable girls and women who view these chilling websites are doing so not within the safe boundaries of therapy. They do not have any-one, as they view these, to do a bit of reality testing. So, it seems important to me that we don't confuse what seems helpful to encourage within the context of therapy and what we encourage outside those boundaries."

Laura K. Ratner, LCSW-C, BCD  
Private Practice  
Chevy Chase, MD

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## Book Review Corner

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Debra L. Franko, Ph.D.

*Eating Disorders: Innovative Directions for Research and Practice*

Ruth H. Striegel-Moore, Ph.D. and Linda Smolak, Ph.D.

(American Psychological Association, 2001, ISBN 1-55798-778-5, \$39.95, 304 pages)

The Academy for Eating Disorders book reviews published in the newsletter thus far have focused primarily on clinician-oriented volumes. The selection for this month is a book that will appeal to clinicians, but one that represents an especially significant addition to the research literature. This edited volume includes chapters by major researchers in the field who were challenged by the editors to answer the following questions in their topic areas: "What new paths need to be explored, what methods appear most promising, and what questions have yet to be raised in the field of eating disorders?" As you read this book, I think you will find that these questions were thoughtfully and carefully answered by this esteemed group of researchers resulting in a book that will be of great value to both eating disorder clinicians and researchers.

Drs. Striegel-Moore and Smolak begin with an overview and introduction that nicely sets the stage for the book by providing a brief summary of each chapter. They organized the book into major sections on classification and etiology, treatment, and prevention, with several chapters in each covering specific topic areas. An introduction to these sections by the editors was effective at orienting the reader to the following chapters. The book opens with a chapter by Garfinkel and Dorian that describes the need for development in seven areas (treatments, diagnoses, understanding mechanisms, prevention, the consumer movement, and the public trust). In each area, they raise critical questions for future research such as "how, specifically, does the media influence the development of eating disorders," and "how will we address the wider questions in prevention related to teacher attitudes, teasing and harassment?"

Five chapters fall under the "Classification and Etiology" section, each of which raises important questions. Herzog and Delinsky focus first on the history of the eating dis-

order diagnoses and take up the interesting question of crossover between the two major disorders. Eating Disorder Not Otherwise Specified, though a frequently utilized diagnostic entity, is underrepresented in nosological research and they offer suggestions for further refinement of this category. Stice's chapter on risk factors is illuminating. After reviewing the definition of a risk factor ("a variable that has been shown to prospectively predict a subsequent pathological outcome"), he reviews the empirical evidence for major areas of risk, including adiposity, thin-ideal idealization, body dissatisfaction, and dieting, among others, and concludes that there are relatively few empirically validated risk factors in the current research literature. His recommendations include more innovative research employing prospective and longitudinal studies to better understand the development of eating disorders. Crago, Shisslak, and Ruble point out the dearth of research focused on identifying factors that protect against the development of eating disorders. Only one factor, sports participation in nonelite and nonlean sports, has been reported to be a protective factor; however, most of the studies in this meta-analysis were cross-sectional, limiting a true demonstration of the protective effect of athletic activity. The authors reasoned that high self-esteem may serve as a protective factor; however, this has yet to be studied. The next chapter focuses on the question of why eating disorders are a gender-specific disorder. Smolak and Murnen review newer understandings of gender differences in personality, development, biology, and social learning, concluding that the "lived experiences" of females in this culture help explain the gendered nature of eating disorders. They define lived experiences as growing up in a culture that emphasizes an unrealistic body ideal, limited opportunities for achievement, and sexual abuse and harassment and suggest that objectification theory can address how such experiences translate into eating concerns. This chapter provides a provocative look at an underrepresented area. The last chapter in this section takes up the role of ethnicity in the development and classification of eating disorders. Smolak and Striegel-Moore point out that although most research has targeted white women, recent efforts have highlighted the extent to which eating disorders occur in ethnic minority

groups and cite two large-scale studies (Smith et al., 1998; Striegel-Moore et al., 2000) finding comparable prevalence rates of binge eating disorder in black and white women. They also point out that research is needed to examine the roots of ethnic differences. Specifically, Smolak and Striegel-Moore remind us that "it is important to identify which risk or protective factors come from the ethnic culture, which come from the dominant culture, and which result from discrimination."

The four chapters comprising the Treatment section illuminate the current state of our knowledge in a number of areas. Garvin and Striegel-Moore begin by documenting the important changes that have occurred in recent years in the nature of treatment for eating disorders. Their discussion of how managed care has affected services highlights the need for future research in this area to improve the care for individuals with eating disorders. Kaplan and Wonderlich report on recent advances in professionally developed self-help interventions and offer a timely examination of current evidence for the efficacy of these approaches. In light of limited healthcare resources, increased attention to self-help treatment is needed. Wonderlich, Mitchell, Peterson, and Crow go beyond the original manual-based cognitive behavior therapy to describe an "integrative" approach to treatment for bulimia nervosa. Citing new research in cognitive neuroscience, they highlight the need to add a focus on emotional and interpersonal functioning to current CBT approaches. These authors call upon their years of clinical experience to propose a new paradigm for CBT with the goal of effectively treating a greater number of eating disordered individuals. Mitchell then reviews the empirical literature on the psychopharmacology of eating disorders and finds that although no medications can claim to successfully treat anorexia or bulimia nervosa, recent advances in biology and neuroanatomy hold promise for future developments.

The four concluding chapters on Prevention cover interesting and provocative topics. Heinberg, Thompson, and Matzon suggest that, contrary to the current zeitgeist, body dissatisfaction may not be entirely maladaptive. They argue that some

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## Last Call for 2001 Academy Recruit-a-Member Campaign

Lisa Lilienfeld, Ph.D.

The campaign is open to all new members joining the Academy for Eating Disorders in 2001 (we have over 200 new members this year so far!), **as well as to all current members who recruit new members to join the Academy** (simply ask the new member to note your name on his/her membership application).

The grand prize is a six-day, five-night stay at the Westin Innisbrook Resort in Palm Harbor, Florida (US) near Tampa. All entries must be received by December 31, 2001. The drawing will take place in January, 2002.

Your promotion of the Academy will make it a stronger, more effective organization to meet the needs of its members. To learn more about the new campaign, contact the Academy office at [aed@degnon.org](mailto:aed@degnon.org). You can also view the website of the Westin Innisbrook Resort at [www.westin-innisbrook.com](http://www.westin-innisbrook.com).



### Debate, cont. from page 5

"...I commend the AED on its position statement regarding Pro-Anorexia websites...On the Internet, you can learn how to kill yourself, how to kill others and even how to make an atomic bomb. At the same time, you can choose to learn how to heal yourself. Now that the Internet is here, whether we like it or not, the genie is out of the bottle and all information both good and bad is available to everyone with a computer...It is safe to say that freedom of speech will allow these Pro-Anorexia websites to continue to exist...However, as eating disorder professionals, how can we condone the availability of this dangerous content and the glamorization of thinness provided on these websites?...The fact that Yahoo removed their Pro-Anorexia websites demonstrates that our voices can be heard."

Christine Hartline, M.A.  
Eating Disorder Referral and Information Center



## Academy Member Honored

Lisa Lilienfeld, Ph.D.

The Academy Member highlighted in the current newsletter is Armando Barriguete, M.D. Armando was recently named, "Honorary Consultant" to the Instituto Nacional de Ciencias Medicas y Nutricion, the top national health institute in Mexico. This honor is a clinical distinction given to those who become clinical advisors for treatment and research in this Mexican national health institute (similar to the NIH in the U.S.).

Armando was awarded this honor for the following accomplishments:

1. Co-creator of the first eating disorders clinic in Mexico in 1986
2. Recipient of several national research prizes
3. Holds honorary national and international titles (e.g., President of the National Society of Neurology and Psychiatry; Honorary Member of the French Psychiatry Association)
4. More than 50 publications before age 45
5. Innovator of teaching programs through distance education ("Director of the Universidad Virtual Euro-America")

Felicitaciones Armando! The Academy is honored to have you as a member.

*If you would like to see an Academy member highlighted in the AED Newsletter, please send suggestions to [LLilienfeld@gsu.edu](mailto:LLilienfeld@gsu.edu).*



### From the Editor, cont. from page 1

members who would like to do so should e-mail [aed@degnon.org](mailto:aed@degnon.org).

You will notice our first advertisements in this issue. Advertising in future newsletters is currently under consideration by the Board; a final decision has not yet been reached. More information about this will be available to you in an upcoming newsletter.

As always, I welcome comments, suggestions and news of recent honors and awards from all Academy members.



## Classified Advertisements

Eating Disorders Institute (EDI) Psychiatrist: The EDI at Park Nicollet Health Services is seeking a BE/BC Psychiatrist. This position is an exceptional opportunity for a Psychiatrist interested in Child and Adolescent Psychiatry. Experience in treating patients with eating disorders preferred. Research opportunities are available and encouraged by the department. This is a rapidly expanding practice with a growing staff of 50 individuals.

The Eating Disorders Institute, a partnership of Methodist Hospital and the University of Minnesota Physicians, includes full continuum of care with After Care Groups, In-Patient, Partial Hospital Program, Intensive Out-Patient, and Out-Patient programs, dealing with over 15,000 patient visits each year. Our inpatient eating disorders unit is widely recognized in particular for its care of pre-adolescents, adolescents and young adults. Minneapolis, MN is famous for its cultural attractions, healthcare and educational systems, natural beauty and overall quality of life.

For immediate consideration, send/fax/mail your CV to: Stephanie Hatier, Clinician Recruitment, Park Nicollet Health Services, 3800 Park Nicollet Boulevard, St. Louis Park, Minnesota 55416; Phone (952) 993-2703; Fax: (952) 993-2819; Email: [haties@parknicollet.com](mailto:haties@parknicollet.com).



Children's Hospital & Creighton University seek a Nurse Patient Care Manager for Eating Disorders Program for children/adolescents/complete continuum of care. Director Mae Sokol, M.D. Advanced practice nursing degree; B.S. degree with experience considered. Relocation assistance. Apply to: Sarah Minarick, Children's Hospital, 8200 Dodge St., Omaha, Nebraska 68114 (EOE) (402) 955-7777, [recruiter@chsomaha.org](mailto:recruiter@chsomaha.org).



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## Junior Researcher “Stand-Out”

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Lisa Lilienfeld, Ph.D.

*The following researcher was among those nominated by the paper session moderators at the Academy conference in Vancouver last May as having given exceptionally strong research presentations. This column of the newsletter will allow all Academy members to learn about what these up-and-coming researchers are doing. A summary of her outstanding presentation from the conference can be found below.*

### **Veerle Decaluwé, M.A.**

#### Education

1998 M.A., Psychology, Ghent University, Ghent, Belgium; 1998 M.A., Psychology, Ghent University, Ghent, Belgium

#### Current Position

Completing a Ph.D. in Developmental Psychology at the Department of Developmental and Personality Psychology, Ghent University, Belgium

### **PREVALENCE AND CORRELATES OF BINGE EATING IN OBESE CHILDREN AND ADOLESCENTS.**

<sup>1</sup>Veerle Decaluwé M.A., <sup>1</sup>Caroline Braet Ph.D., & <sup>2</sup>Christopher G. Fairburn D.M., M.Phil. <sup>1</sup>Ghent University Department of Developmental & Personality Psychology; <sup>2</sup>Oxford University Department of Psychiatry (United Kingdom)

Recently, much attention has been focused on the prevalence of Binge Eating Disorder (BED). Binge eating without purging appears to be an especially prevalent problem among obese adults seeking help (1-3). Compared with obese adults who do not binge, those who binge are more likely to weigh more and have greater psychopathology such as depression, low self-esteem, anxiety, and difficulties in social relationships (1,4).

To our knowledge, binge eating in obese adolescents has been assessed in two studies (5, 6). These two studies have shown some limitations and it therefore seems important to study this topic in an even larger sample of obese children and adolescents (boys and girls) and with the use of better assessment techniques. The primary purpose of the present study is to investigate the prevalence of BED in obese boys and girls seeking help. The second purpose is to examine whether the severity of binge eating is associated with the degree of overweight.

Participants were 72 children and adolescents (21 boys and 51 girls) aged 10 – 16 years who were referred to an inpatient treatment program because of their obesity. Subjects were visited at home before entering into treatment. The mean age of the sample was 13 years (SD=2). Body Mass Index was calculated for each child.

In order to make BMI comparisons between obese children of different ages, an “adjusted BMI” was used. The formula is: [Actual BMI / 50<sup>th</sup> Percentile of BMI for age] x 100. The 50<sup>th</sup> percentile of BMI for age and both sexes is based on Dutch reference charts (7). The mean adjusted BMI was 69% (SD=24) with a range of 21% - 141%.

Each participant completed the following questionnaires: Eating Disorder Examination—Questionnaire (EDE-Q; 8) (the EDE-Q was modified to make it suitable for Dutch child populations; 9); the Children’s Depression Inventory (CDI; 10, 11); the Self-Perception Profile for Adolescents (PCSC; 12, 13). The parents of the subjects completed the Child Behavior Checklist (CBCL; 14, 15). Diagnosis of BED was based upon DSM-IV (16).

Overall, 43% reported that they had eaten a very large amount of food and experienced a loss of control over their eating at the time. Five percent of the sample met criteria for BED. The rate of occurrence of binge eating was the same in boys as in girls. A number of the obese subjects tried to control their shape or weight by self-induced vomiting (4%), laxative or diuretic misuse (7%), or intense exercising (39%). This weight-control behavior did not occur frequently enough to be classified as inappropriate compensatory behavior. Therefore, no one met criteria for Bulimia Nervosa.

In order to compare the present study with previous studies, two groups of obese children were selected for subsequent analyses: obese children who reported binge eating episodes (n = 31) and obese children who did not binge (n = 41). T-tests were conducted to assess differences in depression (CDI), degree of overweight, and age. Differences in eating disturbed behavior (EDE-Q), self-esteem (PCSA) and psychopathology (CBCL) were examined using MANOVA.

These analyses revealed differences between binge eaters and non-bingers. Namely, binge eaters reported greater levels of Eating Concern (p<.01), Weight Concern (p<.01) and Shape Concern (p<.01). Binge eaters were similar to non-bingers with respect to restrained eating. Obese binge eaters had significantly lower scores on Physical Appearance (p<.01), Behavioral Conduct (p<.05) and Global Self-Worth (p<.05) compared to obese children without binge eating problems. Compared to non-bingers, binge eaters were on average one year younger (p<.05). There were no differences between binge eaters and non-bingers on the degree of overweight, nor did they differ on the degree of depression. As reported by the parents, there were no differences in emotional and behavioral problems between binge eaters and non-bingers.

The findings of the present study were only partly consistent with our hypotheses. In line with our predictions and an earlier child study (3), obese binge eaters differed from obese children who did not binge on self-esteem and on a broad range of eating related characteristics. Unexpectedly, bingers were slightly younger. Also contrary to our predictions, obese adolescents with binge eating problems did not differ from non-bingers on degree of overweight, depression, and psychopathology.

A limitation is that the present findings cannot be taken as an estimate of the prevalence of binge eating among all obese children and adolescents. The sample in the present study was a highly selected pool of extremely obese subjects seeking inpatient treatment. Assessment of the prevalence of binge eating will require assessment of a representative sample of obese teenagers seeking inpatient and outpatient treatment. Secondly, the current study relied on self-reports. We suggest that future studies use clinical interviews, such as a modified child version of the Eating Disorder Examination (17), to assess binge eating problems. Generally, dietary restraint is assumed to be a contributor in the development of binge eating among individuals with Bulimia Nervosa (18). Therefore, one should expect a higher score on restrained eating in binge eaters. Our findings indicate that young obese binge eaters score similarly

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Continued on page 9

to obese children without binge eating problems on Restraint on the EDE-Q. Therefore, it is hypothesized that dietary restraint is not a significant contributor to binge eating problems in young obese binge eaters. It remains unclear to what extent dietary restraint serves a function in the maintenance of binge eating problems in obese adolescents. Because our findings suggest differences between bingers and non-bingers on different measures of self-concept, it is reasonable to hypothesize that other negative emotional characteristics like poor self-esteem may play a role in the maintenance of binge eating.

Our results suggest that binge eating is a prevalent problem among obese children and adolescents seeking help. The differences in psychological and eating related characteristics between obese children with and without binge eating suggest the need for special treatment focusing on the problems of obese binge eaters.

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## Book Review, cont. from page 6

degree of body image concern, particularly in the overweight and obese, may be beneficial and perhaps even necessary to motivate individuals to engage in healthy dieting and exercise behaviors. Calling upon numerous studies highlighting the connection between distress and behavior change, these authors hypothesize that *some* worry about body image may be an important predictor of health behaviors. Levine and Piran ask us to think carefully about current traditional individualistic approaches to prevention and then to move beyond them by adopting an ecological tripartite model of knowledge, action, and advocacy to further our efforts in this area. Their thorough review of the literature finds that prevention efforts have been successful in changing knowledge and attitudes (in 53% of studies), but that long-term behavioral changes remain elusive. Among several conclusions, they suggest that "classroom lessons need to be combined with participatory, ecological programs designed to change the behavior of teachers, parents, and other adults, and the policies, values, and norms operating within the school system and within larger communities and cultures." Taylor, Winzelberg, and Celio point out the exciting possibilities that multimedia technology provide to prevention researchers in their review of a series of studies conducted with college students. Their successful efforts represent a fruitful attempt to reach many at risk for developing an eating disorder with a low-cost alternative to traditional prevention programs. The experts in the field cover both theoretical ideas and the latest empirical studies in each of the chapters, resulting in a book that poses innovative questions for research in classification, etiology, treatment, and prevention. This thought-provoking book is likely to make an important contribution to defining research agendas in eating disorders in the years to come and I highly recommend it to Academy members.



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## Upcoming Conferences

**Academy for Eating Disorders  
Regional Teaching Day Workshop  
October 18, 2001**

Ramada Atlanta Airport South, Atlanta, GA  
**or**

**October 19, 2001**

Holiday Inn O'Hare International, Chicago, IL  
"Best Practices in the Treatment of Eating Disorders," Conducted by G. Terence Wilson, Ph.D., Denise Wilfley, Ph.D., and Daniel le Grange, Ph.D. Contact AED@Degnon.org.



XVII World Congress

World Association for Social Psychiatry  
October 27-31, 2001

Hotel Jaypee Palace, Agra, India

Includes Eating Disorders Symposium. Contact Professor Shridhar Sharma at wasp\_congress@vsnl.com or visit www.17thwaspcongress.com for more.



Renfrew Center Foundation Annual Conference  
November 8-11, 2001, Philadelphia, PA  
"Feminist Perspectives on Adolescents and Families: Treating Eating Disorders and Trauma." Call 877-367-3383 for more information.

Eating Disorders Research Society 2001 Meeting  
November 29-December 2, 2001

Hyatt Tamaya Resort Hotel  
Albuquerque, New Mexico

Features rapid dissemination of new research findings in the field, discussion of research methodology, training of junior researchers, and facilitation of researchers' cooperation across the globe. To attend if non-EDRS member, contact Dr. Ruth Striegel-Moore, rstriegel@wesleyan.edu.



Eating Disorders Coalition for Research,  
Policy, and Action 1<sup>st</sup> Annual Reception  
February 27, 2002, 6:30-9:00pm

Doolittle Guest House, Washington, DC  
"Celebrating our Innovators"

Awards three individuals in the areas of Research, Policy and Action. Award recipients and presenters include Senator Hillary Clinton (D-NY), Senator Paul Wellstone (D-MN), Kitty Westin, NIMH Director Steve Hyman, and supermodel Kate Dillon (to be confirmed). RSVP required; minimum \$200 (\$50 student). Call (202) 543-3842 or edcoalition@aol.com.



**Academy for Eating Disorders  
International Conference on Eating Disorders  
April 25-28, 2002**

Boston Park Plaza Hotel & Towers, Boston, MA  
Visit www.aedweb.org for more information.

## Academy Newsletter

Please send all suggestions for articles, job opportunities, information regarding upcoming events or meetings, letters to the Editor, awards and honors received by Academy members, published books, and all other items of interest to:

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**Deadline submission:  
December 1, 2001**

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