Greetings!

Thank you for being a part of the Academy for Eating Disorders community. We hope that you will find this edition of the AED Forum newsletter informative.

Your input and reactions are always welcome!

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Welcome to ICED and San Francisco! A busy year has passed since we last came together in Boston. As you can see from the program, the scientific program committee has been particularly hardworking during the past 12 months. So I would like to start by thanking all of them for their contributions. This includes co-chairs Jenny Lundgren and Marisol Perez as well as the other members of the committee: Rachel Bachner-Melmen, Ovidio Bermudez, Phillipa Diedrichs, Angela Celio Doyle, Terry Fassihi, Juanita Gempler, Phillipa Hay, Laurel Mayer, Mika Omori, Chevese Turner, and Kristin Von Ranson. Additional thanks to their board liaison Jenny Thomas as well as Eva Trujillo and Bryn Austin, who also played key roles in making this program come to fruition.

I won't describe the entire program, but I do want to note a couple of highlights. To start, as you likely already know, this year we will have our first ever plenary conducted entirely in Spanish with simultaneous translation into English. This new initiative, which also includes translating the keynote and other plenaries into Spanish, has increased the workload on both the program committee and our headquarters staff - so extra thanks are warranted here. I consider this one of the most exciting new developments for ICED and especially timely as we transition to Eva Trujillo's presidency. I also am thrilled to extend a special welcome to our Spanish speaking delegates. Estoy emocionada de dar una bienvenida especial a nuestros delegados de habla hispana.

A second highlight will be our keynote. Meaghan Ramsey, Global Director of the Dove Self-Esteem Project, will speak about the role of business in advancing health agendas. If you have read my previous columns, you will know that I have used the theme of diversity and passion to provide some coherence to my ramblings. Returning to this theme, we have already received a wide range of, often passionate, reactions to Meaghan's keynote, which will use the specific example of Dove's work in the area of body image to demonstrate ways in which businesses can be allies in promoting evidence-based programs. I fully expect to see a diversity of reactions after her talk, which should set the stage for the kind of lively discussion and debate we embrace at the AED. My challenge to all - please consider looking beyond the specific example in Meaghan's talk to consider how the broader lessons she offers can be applied to advance other domains of interest to our field.

ICED will also include the unveiling of a new tool to promote the 9 Truths about eating disorders. The 9 Truths have received a surprising degree of endorsement given the diversity of perspectives in our field. Less surprising, however, has been a substantially lower level of questioning regarding the level of empirical support for each truth. As such, I wanted to clarify that the AED endorses these as "evidence-based" using the three legged stool concept of evidence-based practice. As most of you undoubtedly know, the three legged stool of evidence-based practice consists of research support, clinical judgement, and patient/carer values and perspectives. In other words, evidence-based in this instance does not mean...
absolute "truth" or scientific fact never to be changed by future research, but rather an incorporation of the imperfect research base in eating disorders combined with expert opinions from members of our field. I for one, imagine these may have to be modified down the road as new research yields new findings.

As this is my last column, I would be remiss if I did not thank all of our wonderful board members. Particular thanks go to Eva Trujillo and Glenn Waller, who form 2/3rd of what we informally refer to as the presidential trio. I am so grateful for their never ending willingness to help keep things running smoothly as well as their friendship and support during the past year. I also want to thank the other board members: Bryn Austin, Steffi Bauer, Kyle DeYoung, Donna Friedman, Sloane Madden, Lauren Muhlheim, Marian Tanofsky-Kraff, Kathy Pike, and Jenny Thomas. Your board members work incredibly hard responding to a seemingly endless flood of email and tasks, and for this I am very thankful. But I'd also like to thank each of them for their sense of humor and grace under pressure. Working closely with this group of individuals has been a real pleasure. I also need to acknowledge all of the hard work and time contributed by our fabulous community of volunteers who keep our extensive network of committees functioning. I do not have enough space to do justice to everything all of you do for the AED - so I will simply offer a sincere but insufficient thank you. I also want to express my appreciation for everyone at DMG who help to keep the AED running, with special thanks to Lisa Myers, Katie Adair, Lorna Valle, Etta Carter, and Margaret Jamborwsky.

Lastly, I want to thank everyone in the AED for making this such a wonderful organization. It has been a true honor to serve as your president. I look forward to seeing where we go next, and hope to connect with many of you not only in San Francisco but also Prague.

Message from The Editor

Jessica Baker

It is my pleasure to welcome you to San Francisco and the 2016 International Conference on Eating Disorders (ICED)! This is the electronic version of your annual ICED edition of the Forum and, as always, it is full of outstanding updates and information from AED committees, members, and partner organizations. Your Executive Director, Lisa Myers, discusses the AED’s collaboration with research examining volunteering in associations such as the AED. Please participate in the survey if you are selected, as this will also provide important information for the AED (see the Executive Director column for more details). The Patient-Carer Committee provided a piece on the importance of including non-professionals as members of the AED and what we can learn from patients and carers alike. Additional highlights of this issue include a member’s perspective on the potential for couple’s therapy as a family based treatment for adult eating disorders; a review of the book The Wiley Handbook of Eating Disorders, written by AED Forum Book Reviewer, Sherrie Delinsky; and the 10 Things You Need to Know About San Francisco, compiled by the ICED planning committee.

As always, I would like to thank all of the individuals who submitted articles for this issue of the Forum. I encourage interested readers to submit articles, letters, and announcements for the next issue of the Forum. Our next issue will feature post conference highlights so feel free to send your articles and photos of this year’s ICED events. Please submit your contributions
Greetings from The Executive Director

Elissa Myers

In a massive and groundbreaking study done by the United Nations in 2011, and entitled State of the World's Volunteerism Report, the author's note that "An ethic of volunteerism exists in every society in the world, albeit in different forms... Wide-ranging research has added greatly to our understanding of the phenomenon. Nevertheless, fundamental misperceptions remain widespread in the Western world and beyond as to its nature and contributions. There is no agreed methodology for measuring the extent of voluntary engagement. However, most studies attest to the universality of volunteerism, its universal spread, massive scale, and impact."

According to the US Corporation for National and Community Service, about 62.6 million Americans, or 25.4 percent of the adult population, gave 7.7 billion hours of volunteer service worth $173 billion in 2013. The Independent Sector, an organization that studies and supports nonprofit organizations of all kinds, set an average value of an hour of volunteer time at $23.07.

Nowhere is the power of the volunteer spirit more evident than in the Academy for Eating Disorders. Leading the way is AED's exceptionally engaged Executive Committee and Board of Directors. The twelve members of the AED Board come from around the world - Germany, Mexico, the United Kingdom, Australia, and all over the United States. I have the privilege of working closely with them day in and day out, and at a conservative estimate they represent a combined gift to the field of close to a thousand volunteer hours a year.

Working with them are the AED Committees - currently numbering 25, and representing the engagement of 226 talented and committed members. Committee members meet frequently (some monthly) and are engaged in a myriad of constructive helpful activities, from building our network of partners, chapters, and affiliates around the world to pulling together the quarterly newsletter; from editing the International Journal of Eating Disorders to planning our acclaimed International Conferences; from setting up webinars to crafting membership strategy, defining the voice of patients and patient carers in the AED, overseeing financial affairs, providing web and social media leadership, exploring best practice in the field, and so much more.

In some associations, the board and committees are de facto window dressing. They surely are not in the AED. It is the members of the AED that are sustaining and building this great organization.

This coming month AED will have the opportunity to study attitudes toward volunteering within our
own society. The American Society of Association Executives has commissioned a study on why people volunteer, why they don't, and how they feel about the experience of volunteering. AED has been invited as an outstanding example of volunteer initiative to participate in the study. Sometime in the near future, all AED current leaders, and about half of our members, randomly selected, worldwide, will receive a questionnaire asking about their personal experiences relative to volunteering in AED. If you receive the survey, I hope you will participate.

Your insights will be combined with those from dozens of other associations to improve the professional understanding of what's working and what isn't in associations. But a side benefit is that the AED will receive a comparison of our performance in providing meaningful engagement to members to the experience in other organizations. The volunteer investment our members are making deserves every effort to understand and seek to improve how we use that investment.

And by the way - if you are one of AED’s precious volunteers, thank you. And if you run into one of the many AED volunteers, it would be great if you will add your personal thanks to them. And finally, if you aren't yet actively volunteering, contact me and let's talk about how we might get you involved!

Update from The Advocacy and Communications Committee

Emily Pisetsky

The Advocacy and Communications Committee (ACC) of the AED is pleased to inform the membership of several initiatives we have been working on these past few months. Through leadership on the Steering Committee, the AED is actively involved in planning the first World Eating Disorders Action Day, which will take place on June 2nd, 2016. Through Internet and regional activities, World Eating Disorders Action Day will advance the understanding of eating disorders as treatable, genetically-linked illnesses that affect a large cross-section of the world's population, embrace diversity, and raise awareness amongst policy makers to allocate resources and establish coherent national systems. In addition to creating awareness, the day offers new connections and global partnerships, grows the advocacy base, and creates opportunities for additional actions for change at an international level. For more information and to join the efforts for World Eating Disorder Action Day 2016 please see http://WorldEatingDisorderDay.instapage.com, LIKE WorldEatingDisorderDay on Facebook, and follow @WorldEDday and #WeDoAct on Twitter.

The ACC provides regular Forum updates concerning initiatives related to public awareness and advocacy. For more information, feel free to email Kristine Vazzano (kvazzano@mindfullness.com) or Alli Spotts-De Lazzer (alli@therapyhelps.us), ACC co-
Update from the Membership Recruitment and Retention Committee (MRRC)

Kortney Parman

The MRRC is pleased to share a few updates:

* **ICED 2016 activities.** This is a reminder that we will again host the Mentorship Program as in years past. It will be held on Friday, May 6th from 7:30-9am. If you indicated on your registration you wish to participate as either a mentor or mentee, we encourage you to attend. This event is a wonderful way to network and connect the leaders of our field with upcoming professionals.

* **New Membership Category.** The AED Board recently approved a Patient-Carer membership category for non-professionals. This category is created to diversify the AED’s membership, to decrease the financial barrier for non-professionals to join, and help facilitate their efforts to contribute to the eating disorders field. Non-professionals applying for membership will have to verify they have no professional affiliation with eating disorder research or treatment. They also have the opportunity to opt out of receiving the journal for a reduced fee. Stay tuned as this category will be available on the website soon!

Additionally, the committee continues to work on several initiatives, including an eating disorder training site document, the translation of membership brochures and medical practice guidelines into other languages, and streamlining the membership renewal process.

MRCC Member Spotlight

Cristin Runfola

My name is Carlos A. Almenara, a behavioral health psychologist working as a postdoctoral research fellow for Masaryk University (Czech Republic). However, I am currently living in Lima (Peru) to support my wife’s entrepreneurial venture.

My interest for eating disorders started when I was an undergraduate student 15 years ago, and I felt puzzled and challenged by the complexity of extreme cases of anorexia nervosa. Since that time, I started to read and research for information that could help me to further understand human eating behavior.

Currently, my major focus of interest is in the area of public health, specifically in the link between...
eating behavior and health. Thus, my research interests are wide in terms of topics (e.g., diets, body image, consumer behavior, prevention, etc.).

As an anecdote, I left Peru in 2006 and spent almost 10 years in Europe, living in Italy (almost 2 years), in Spain (5 years studying at the Universitat Autonoma de Barcelona and getting a MSc and PhD, summa cum laude), and finally in the Czech Republic (almost 3 years). Thus, I have lived in different cultures, which I feel has broadened my perspectives.

I am joining the AED because I have experience working with colleagues abroad, and in our institution we are constantly motivated to expand our professional networks and collaborate in scientific research. For these reasons, I think I can contribute to the AED’s mission and vision, and particularly the AED’s strategic goals, by collaborating in generating and sharing new knowledge and expertise.

Update from the Partnership, Chapter, and Affiliate Committee (PCAC)

*Ursula Bailer and Annemarie van Elburg*

This column welcomes our three new Partner Organizations and highlights some conferences of our Partners, Affiliates, and Chapters! The AED family has grown rapidly in the last few years; we are thrilled to share the current list of 30 Partners, Chapters, and Affiliates represented in the PCAC and we are eager to grow further!

**Partners:** Transdisciplinary Obesity Society (Argentina); Australian and New Zealand Academy for Eating Disorders; Austrian Society on Eating Disorders; Eating Disorder Association of Canada; Chilean Society for the Study of Eating Disorders; Czech Eating Disorder Association; Danish Eating Disorder Society; Dutch Academy for Eating Disorders; Finnish Eating Disorder Society; Flemish Academy of Eating Disorders; French Association for the Development of Specialized Approaches in Eating Disorders; German Eating Disorder Society; Icelandic Eating Disorder Association; Israel Association for Eating Disorders; Italian Society of Eating Behavior Psychopathology; Italian Society for the Study of Eating Disorders; Anorexia, Bulimia, and Obesity; Japan Society for Eating Disorders; Mexican Association of Eating Disorders Professionals; Polish National Center for Eating Disorders; Spanish Association for the Study of eating disorders; Swedish Eating Disorder Society; Expert Network Eating Disorders Switzerland.

**Affiliates:** Eating Disorders Faculty of the Royal College of Psychiatrists; Society for Adolescent Health and Medicine; Sports, Cardiovascular, and Wellness Nutrition; National Association for Males with Eating Disorders; World Psychiatric Association Section for Eating Disorders.

**Chapters:** Hispano Latino American Chapter; Nordic Eating Disorder Society.

Please join the multiple PCAC activities at the ICED 2016 to get to know the exciting work of our members and to network internationally:

- Our Business Meeting Breakfast on Thursday May 5th, 7-8am; open to all PCAC members and members of Partner, Affiliate Organizations, and Chapters.
- Our Building Bridges Breakfast on Thursday May 5th, 8-9am; open to all ICED 2016 participants who are interested in the activities of the PCAC and a great way to network with people from around the globe!
- Our workshop on Saturday May 7th, 1:15pm - 2:15pm; Cultural Differences that Influence Care: The Partnership, Chapter, and Affiliate Committee's view on compulsory treatment.

Patient-Carer Committee (PCC) Update

Joan Riederer

The AED Patient-Carer Committee (PCC) has made great strides over the past year. Our efforts to collaborate with other committees have been well-received and have led to several projects including two tweet chats, input on the new Joint Commission standards, and discussions with the Medical Care Standards committee on future initiatives. We are additionally excited to see more non-professional stakeholders joining and contributing to the AED.

Our committee believes that the inclusion of patients and carers as AED members and volunteers is beneficial in many ways. To start, it allows the integration of a patient-carer perspective into discussions regarding the services, programs, and products that the AED offers. We believe that when professional and non-professional stakeholders in the eating disorder field work as equal collaborators, the AED Vision of "Global access to knowledge, research, and best treatment practice for eating disorders," is enhanced and will ultimately improve clinical practice and inform new research directions.

In addition, we believe that those with lived eating disorder experience provide a window for professionals through which they can get a glimpse of the experiences and challenges of living day-to-day and side-by-side with eating disorders. Whereas professionals know eating disorders from the outside in, patients and carers know them from the inside out. Only together, can we see the whole picture.

We are proud that eating disorder professionals are seeking out the knowledge, perspectives, and experiences of patients and carers as a guide for their research and clinical work. Engaging non-professionals as valuable resources and team players helps clinicians and researchers figure out what works, what doesn't, and why, thereby improving treatment outcomes and guiding the course of future research.

We hope that by continuing to work together, we can close the gap between research and practice, break down barriers to treatment, and strengthen the AED's global mission

Research-Practice Committee Initiatives

Terry Fassihi and Kristin von Ranson

The Research-Practice Committee plays a crucial role in achieving the overall vision of the AED to promote global access to knowledge, research, and best treatment practice for eating disorders. Our mission is: "...to improve the quality of research, clinical practice, and prevention in the field of eating disorders by facilitating an on-going transfer of knowledge from research into practice and
from practice into research, while working to eliminate the factors that result in polarization of these two critical aspects of our field." Our committee consists of a blend of clinicians, researchers, and researcher-practitioners.

The annual Research-Practice Think Tank is our signature contribution. Traditionally, the Think Tank is the concluding session of the ICED, and offers an opportunity to reflect on the meeting as well as other issues of importance to participants, with an emphasis on research-practice integration. At the 2016 conference, we will return to the original format that was introduced in 2007. Two AED fellows, Tracey Wade and Stephen Wonderlich, will reflect briefly on the proceedings, followed by a highly interactive dialogue with the audience. The overarching vision is to look at how the conference can help promote useful two-way transfer of knowledge between researchers and practitioners. Please join us there!

In addition, a workshop developed by the Research-Practice Committee will be held at ICED 2016. We identified a highly successful team (Anthea Fursland and Susan Byrne; Perth, Australia) who will discuss how they formed their research-practice collaboration, including successes and challenges. The workshop will include an interactive portion where attendees will be encouraged to formulate ideas for their own research-practice collaborations.

Stay tuned for a webinar we are developing, entitled "Evidence-Based Level of Care Decisions." Led by Doug Bunnell and Michael Strober, this webinar will cover the critical issue of identifying the proper level of intervention for eating disorder patients at various stages of their recovery process.

We have recently updated our content on the AED website and plan to add more information in the future. For more information, click on Research-Practice Integration under "Research" on AED's home page, www.aedweb.org.

Update from the Special Interest Groups

Alan Duffy

Get involved with a Special Interest Group (SIG) at ICED in San Francisco this year! All 29 SIGs will host annual meetings and a new record 12 SIG sponsored panels during ICED.

For example, the Psychodynamic and Integrative Psychotherapies SIG is pleased to be sponsoring both a SIG panel presentation entitled *Not All Therapy Relationships are Created Equal: Applying Research Data to Promote Therapeutic Alliance and Best Outcomes in the Treatment of Eating Disorders* that will feature leading clinicians and researchers in FBT (Kara Fitzpatrick), CBT (Glenn Waller), Psychodynamic Psychotherapy (Stig Poulsen and colleagues), and new research by Jennifer Thomas highlighting the unique role of the treatment alliance in different psychotherapies and its impact on treatment outcome. The SIG will also be hosting a workshop on Saturday afternoon entitled *Reflective Functioning in Psychotherapy for Eating Disorders: A Key Treatment Target for Lasting Personality Change.*

Additional SIG panels will represent collaborations from the majority of SIGs and feature experts...
from around the world in critical, detailed discussions about area-specific advances in eating disorders. Topics will range from Treatment of Trauma in Patients with Comorbid Eating Disorders and Self-harm/suicidality: An Evidence-based Primer to Next Steps to Addressing Male Eating Disorders in Different Cultural Contexts: Epidemiology, Public Health, and Clinical Practice to Mindful Approaches to Nutrition Intervention. For full details of all SIG sponsored panels please see your conference schedule!

Existing members, new members, and first time conference attendees are encouraged to attend the SIG annual meetings at ICED. The annual meetings provide an excellent opportunity to connect with colleagues working in specialized areas of the field.

The SIG Oversight Committee looks forward to welcoming all to be involved in the variety of SIG activities in San Francisco.

Social Media Committee Update

Carrie Arnold

Last May, 12 eating disorder organizations from around the world partnered with the AED to publish the 9 Truths about Eating Disorders, which has since been translated into 29 different languages. The project was based on Cynthia Bulik's 2014 "9 Eating Disorders Myths Busted" talk at the National Institute of Mental Health Alliance for Research Progress meeting.

At the second annual Eating Disorder Leadership Council Meeting, held the day before the 2015 International Conference on Eating Disorders in Boston, representatives of various eating disorder organizations wanted to create common messaging around eating disorders. Dr. Muhlheim, who was representing the AED, suggested the idea of using Dr. Bulik's nine myths about eating disorders. The idea was enthusiastically accepted, while reframing the message as truths, rather than myths. Working with Lauren Muhlheim, Kristine Vazzano, Alli Spotts-De Lazzer, Glenn Waller, and Carolyn Becker, Dr. Bulik began the process of rewriting the myths as truths. After sending the draft around to the other participants at the meeting for review, the team achieved a consensus document less than one month later, in time for Lobby Day. Shortly thereafter, with Dr. Bulik's lead, the AED began to get the truths translated into many different languages, along with endorsements from other eating disorder organizations.

"The 9 Truths About Eating Disorders" represent a momentous achievement in creating consensus for the field," Dr. Muhlheim said. The Social Media Committee has been sharing the 9 Truths in many different languages on both Facebook and Twitter, to an enthusiastic international response.

Member Viewpoint: Should We Unite Couples in The Treatment of
Ask someone who has recovered from an eating disorder what the key driving force in their recovery was and the answer may surprise you: Although important, it was not the treatment nor medication, it was having a close, supportive relationship.\(^1,2\) Yet, not everyone in recovery has an effective support person. Eating disorders are often difficult to understand and take an emotional and financial toll on families. Guidance from professionals on how to support someone effectively is often requested. With the development of family-based treatment (FBT) for adolescents, we learned how to leverage the power of the family in improving outcomes for adolescent eating disorders. However, adult treatment has remained an individual affair, with families typically excluded from treatment.

Arguably the most significant adult relationship is the romantic relationship. Most adults with eating disorders are in committed relationships, with up to 77% married or cohabitating with a partner. Partners often struggle to understand the eating disorder, find the secrecy around eating disorder behaviors difficult to live with, and feel pressured to monitor their loved one's eating disorder behavior.\(^3\) They also describe feeling powerless in their quest to effect change. Caregiving burden is high—higher than in schizophrenia and depression\(^4\) and partners also need education and support. Couples affected by eating disorders report lower levels of marital satisfaction, higher levels of negative interactions, lower intimacy, and poorer communication skills than unaffected couples.\(^5,6\)

In eating disorders, interpersonal problems observed pre-treatment significantly predict dropout from treatment or poorer treatment response, which may be related to a carer’s unmet needs, lack of effective coping skills, and ineffective support strategies.\(^7\) Thus, couple-based treatments, which target these detrimental interpersonal dynamics and coping methods may significantly improve outcome. In fact, pilot trials of couple-based interventions for eating disorders (as an adjunct to individual therapy)\(^8-11\) demonstrate high efficacy, very low dropout, and high patient and partner satisfaction. Taken together, as FBT significantly improved outcome for adolescent eating disorders, bringing the partner into treatment for adult eating disorders may show similar beneficial outcomes and will be a fruitful direction for both clinical care and research.

Profile of President-Elect Eva Maria Trujillo

Elissa Myers

If you haven't met her yet, it's probably because you are new to AED. It's almost certain that you will go home from this year's International Conference on Eating Disorders (ICED) feeling like you've reconnected with or met a great friend. She has a way of lighting up a room, a way of making you feel instantly at ease, a way of making you feel that she is genuinely interested in everything you have to say - and she is.

Dr. Eva Trujillo, Medical Director of the Comenzar de Nuevo International Outpatient and Residential Treatment Center and SIME Medical Group, Clinical Professor of Pediatrics and Adolescent Medicine at the Instituto Tecnológico y de Estudios Superiores de Monterrey, and Supervisor of new professionals of the Junior Professional Development Program from Comenzar de Nuevo, will step up to become the next AED President at the 2016 ICED in San Francisco. Her election marks a historic milestone in the global growth of the AED. Dr. Trujillo is the first Latin American to ascend to the AED Presidency.

AED was formed with a vision of uniting the world of professionals working in the field of eating disorders, but at the outset the community was virtually entirely based in the United States. Formed in Tulsa, Oklahoma in 1993 under the leadership of Craig Johnson, and thirty-three clinicians and researchers, the AED was focused on addressing the deleterious effects of managed care and other insurance practices on providing quality treatment for patients with eating disorders. It wasn't until two years later, under AED President Ruth Striegel-Moore, that the AED began to push the US domestic boundaries and reach out to address eating disorders on a global
In 1998, Dr. Trujillo discovered and became a member of AED. Almost immediately she stepped forward to provide leadership in the formation of the AED Special Interest Group on Hispano LatinoAmerican issues; and is widely recognized as the moving force behind the formation and AED recognition of the Hispano LatinoAmerican Chapter - one of the first five Chapters (now numbering 30) to affiliate with the AED. She is the current President and also a board member and founder of the Mexican Association of Eating Disorders Professionals.

The list of the many ways she has contributed to the AED is long:

- Named an AED Fellow in 2006.
- Served for three years on the AED Communications Committee.
- Co-chaired the AED Sisterhood Committee for three years.
- Served on the AED Member Recruitment and Retention Committee for two years, and then continued as the Membership Portfolio Holder on the AED Board of Directors.
- Became the Membership and Global Capacity Portfolio Holder for the AED Board of Directors.
- Chair and Reviewer of the first Translation Committee of AED for the IJED.
- And this past year was elected AED President-Elect.

Impressive credentials and volunteer service to AED, but that has been just part of Dr. Trujillo's active volunteer life in the profession.

Dr. Trujillo graduated Summa Cum Laude from the Instituto Tecnológico y de Estudios Superiores de Monterrey where she was Chief Resident of Pediatrics. She also earned her Medical Degree, Magna Cum Laude, from that University.

Among many other outstanding credentials, she served on the Board of the International Association of Eating Disorder Professionals (IADEP), and served as the Chair of their International Chapter and in 2013 was named an IADEP Fellow; and in 2014 received a Special Recognition Award for Dedicated Service to the field.

Dr. Trujillo has served as Board Member and Founder of Comenzar de Nuevo Foundation; an Executive Board Member of the Cuerpo Médico del Hospital San José de Monterrey; a member of and founder of the College of Medical Professionals in Nutrition and Obesity in Nuevo León; an International Fellow of the American Academy of Pediatrics; a member of the Colegio de Médicos Cirujanos de Nuevo León and of the Colegio de Pediatría de Nuevo Leon.

Fluent in Spanish, French, and English, Dr. Trujillo participates fluidly as a participant, leader, and speaker in either Spanish or English, but she recognized that for some potential clinicians and researchers, language might be a barrier to participation. To address that barrier, she has worked tirelessly to see that the AED educational and promotional materials are translated into Spanish and other languages. Thanks to her efforts, for the first time the 2016 ICED will include
English/Spanish simultaneous translation of the Keynote and Plenary presentations, and of a workshop in each time slot.

She has spoken and presented papers around the world, and published more than 20 articles and book chapters in the field. Her professional accomplishments are so extensive, her presence and leadership so ubiquitous, that her good friend and colleague, Marisa Fernández said, "I often think she must have clones. No one could be in so many places and accomplish so many things at the same time! Her knowledge of eating disorders was a watershed in Mexico. She diagnosed my daughter with anorexia, and through her treatment she saved her life," says Fernández.

Seventeen years ago, working together, Fernández and Trujillo founded Comenzar de Nuevo (To Begin Again), a foundation and a center specialized in the residential and outpatient treatment of eating disorders - the first of its kind in Mexico - and they have treated hundreds of girls, teens and adult women from 27 states in México and 11 different countries. She has provided medical advice to thousands. She created and directs the low cost ambulatory services from the Comenzar de Nuevo foundation and recently, with other colleagues, started a new project to advance research in the eating disorder field in Mexico thru the Comenzar de Nuevo Research Centre.

"Without the support that my husband Alfredo and my three sons give me, and without the support from Marisa and all the professionals that work with me in Comenzar de Nuevo, what we have done and are doing would not be possible," says Trujillo.

Speaking about the contributions she hopes to make as President of AED, Trujillo says "my main goal is to reach the poorest countries in Latin America, where there is not a single eating disorder specialist. Unfortunately, not only here, but also in the United States, in Europe, and around the world there are many treatments in use that have no scientific evidentiary basis, and that only delays patient improvement. I hope to see the research production in Latin America and other low income countries get increased and that we can translate that research into our clinical practice."

"I also hope to see AED grow around the world and to strengthen its ability to be a positive influence in scientifically-based diagnosis and treatment of eating disorders. The more I study and the more patients I have, the more passionate I become," says Trujillo. "I love what I do."

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Book Review Corner

**Sherrie Delinsky, AED Book Reviewer**


My local sporting goods store bears a slogan, "If we don't have it, you don't..."
need it." With its extraordinary combination of depth and breadth, *The Wiley Handbook of Eating Disorders*, could boast a similar claim. Every question about eating disorders that you might need answered—or hadn’t yet thought of—is apt to be contained in the Handbook’s hefty two volumes. Each chapter is written by leading scholars in the content area, and the author list reads like a Who’s Who of distinguished experts in the eating disorder field. The result is seamlessly woven summaries of evidence-based theories and their applications with pertinent questions about knowledge gaps and future directions.

Encyclopedia-like in its range of topics, Volume I (basic concepts and foundational research) includes history and definitions of eating disorders, epidemiology, diagnosis, theories, risk and protective factors, and special groups. The section on epidemiology is culturally attuned, with special attention to prevalence and incidence of eating disorders in Western societies, Asian societies, and underrepresented countries. Other highlights include a chapter on diagnosis of other specified and unspecified feeding and eating disorders (formerly EDNOS in DSM-IV), as well as a chapter on diagnosis, features, and a promising new treatment approach to "severe and enduring Anorexia Nervosa." The section on theories runs the gamut across biopsychiatric, cognitive-behavioral, feminist, psychodynamic, and sociocultural. The risk and protective factors section is similarly comprehensive, with attention to gender, ethnicity, culture, familial, genetic, personality, neurochemical, dieting, media, peer, stress, trauma, and adversity factors. Finally, athletes, boys and men, and eating disorders across the lifespan are highlighted.

Volume II on assessment, prevention, treatment, policy, and future directions, covers a range of interesting topics. For example, the assessment section provides helpful guidance for selecting assessment measures for clinical or research purposes. The prevention section covers upstream strategies, school-based approaches, cognitive behavioral approaches, feminist perspectives, media-literacy approaches, ecological approaches, social policy, and the integration of obesity and eating disorder prevention. The section on treatment includes useful, detailed guidance about optimizing treatment teams, the continuum of care, management of medical complications, and treating comorbidity, among other topics. The therapeutic approaches and their evidence base are similarly comprehensive in scope, and include cognitive behavioral, dialectical behavioral, feminist, psychopharmacologic, family-based, medical nutrition, interpersonal, and motivational interviewing.

The Handbook provides helpful context to students across disciplines with its histories of each eating disorder and discussion of how the field is grappling with classification more generally. For example, the nosological, symptom-based approach of the DSM-5 has been challenged by advocates of the Research Domain Criteria, a system that emphasizes biologically based nosology such as neural circuits, genetics, and cognitive patterns. There is also exploration of the importance of specific risk factors to the understanding and treatment of eating disorders, especially body image concerns and disordered eating.

Two additional highlights include a discussion by the Editors of an integrated biopsychosocial model of eating disorders, as well as their final chapter that poses 10 thought-provoking questions to plan for future research: for example, can we become more developmental in investigating the development of eating disorders? What are the crucial issues regarding the role of family in the development and treatment of eating disorders? Can people recover from eating disorders?

The Handbook is on the cutting edge of multiple disciplines, and will be a superlative reference for years to come—no small feat for a publication that surely took years from conceptualization to the bookshelf. There is broad inclusion of many different perspectives, with good attention to controversies and conflicts in the field. The intended audience is wide-ranging: etiological researchers, prevention program designers, therapists, social policy advocates, and caregivers of eating disorder sufferers, among others. The Handbook is truly an essential reference for anyone
National Association of Anorexia Nervosa and Associated Disorders (ANAD) Update

Molly McClure

For Eating Disorders Awareness Week 2016, ANAD created toolkits with the theme Building Blocks of Recovery. Each day had a different theme and corresponding recovery toolkit with a book, a song, a quote, an image, a coping skill, an article, and an affirmation. The toolkits were designed to encourage individuals to take recovery one step at a time and to keep moving forward even during difficult days.

ANAD is proud to join the global eating disorders community for the first World Eating Disorder Action Day, set for June 2nd. This international effort will draw attention to the reality that eating disorders are the deadliest mental illnesses, affecting an estimated 70 million people worldwide, yet many medical schools lack training in identifying these illnesses. The action day will highlight how much is still unknown about these disorders and call for more research to better understand them and develop effective treatment methods.

The call for proposals is now open for ANAD’s 2016 Wellness, Not Weight conference, which will be held September 9th in Naperville, IL. The Wellness, Not Weight conference is designed for treatment providers, health-care professionals, and individuals interested in expanding their knowledge base regarding all facets of eating disorders. Priority will be given to proposals that demonstrate an interactive presentation style and emphasize skill-building rather than purely theoretical lectures. ANAD seeks presenters for a professional track and a general interest track. Proposals are due by April 8th and can be submitted via e-mail to Deb Prinz at deb.prinz@anad.org. More information on submission is available at anad.org.

Have you heard about F.E.A.S.T. (Families Empowered and Supporting Treatment of Eating Disorders)?

Leah Dean

For those not familiar with F.E.A.S.T., we are a free, volunteer-run membership organization serving families and caregivers of eating disorder patients. F.E.A.S.T. operates worldwide through our international Board of Directors, and Local Task Forces in Australia, New Zealand, Canada, Israel, the United Kingdom, and the United States. We also maintain a moderated, online, 24/7 caregiver’s support forum and educational website.

F.E.A.S.T. collaborates with eating disorder treatment providers and researchers to provide educational materials, such as our Family Guide Series of booklets. We currently have four titles related to Neurobiology, Diagnosis, Treatment, and Nutrition. Printed versions of these booklets are...
available for order through our website at www.feast-ed.org/store.

F.E.A.S.T. was a founding partner of the Australian "At Home with Eating Disorders" bi-annual conference. We are a member of the USA Eating Disorder Coalition's Hope Circle, and have collaborated with other organizations to support and plan events in the UK and the USA. F.E.A.S.T. was integral in the formation of the Charlotte's Helix project, which hopes to collect and provide DNA samples in the UK to supplement the ANGI Initiative.

F.E.A.S.T. also serves on the consortium that created the "9 Truths About Eating Disorders," a consensus document that recognizes new scientific knowledge about a group of illnesses that has been poorly understood for a long time. "9 Truths" was produced by thirteen professional and advocacy groups in collaboration with Cynthia Bulik, at the University of North Carolina, Chapel Hill.

F.E.A.S.T. is growing steadily and now has over 6,000 members registered through our website and forum. Although many of our services are for caregivers, anyone who supports and respects F.E.A.S.T.'s Founding Principles is welcome to join us. Please visit us at our Exhibit Booth at ICED 2016, San Francisco to get to know some of our Board members and key volunteers who are active members of various AED Committees.

San Francisco: What You Need to Know

Welcome to ICED 2016! The planning committee wanted to share some important facts about San Francisco with you to make your visit even more enjoyable:

1. People love to walk and bike. If you do walk, wear comfortable shoes because the hills can be pretty steep. It is important to know that due to the sometimes large hills, the straightest distance between two points isn't always the fastest.

2. San Francisco has lots of modes of transportation including BART (subway), light rail, trolley cars, electric mini buses, richshaws, ferries, and Segways. There is a website, 511.org that can assist with navigating the various transport systems.

3. Renting a car and driving is easy in San Francisco, but keep in mind parking is hard to find. Outside of rush hour, the traffic is not too bad. After 6pm the metered parking is free.

4. Most people call for cabs rather than hailing a cab on the street.

5. In restaurants, a tip of 15 to 20% is expected, even when the service leaves something to be desired.

6. There is no free citywide WiFi, but there are many places that offer free WiFi.

7. Always bring a jacket or sweater with you everywhere you go. The weather in the city can vary dramatically by time of day and by neighborhood. It is not uncommon for it to be 70 degrees F one moment and 20 degrees cooler the next moment.
Upcoming Conferences, Meetings, and Seminars
Please visit the AED website for information about upcoming events!

Academy for Eating Disorders
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