Letter from the Directors

Dear Friends,

2018 has been an exciting year for the Eating Disorders Clinical and Research Program (EDCRP) and we are delighted to share some highlights with you.

We have been grateful to receive continued support from the National Institute of Mental Health as well as private foundations to further our neurobiological studies of eating disorders in children and adolescents. Our study of the brain bases of low-weight eating disorders has completed enrollment and we are mid-way through recruitment for our adolescent and young adult study of avoidant/restrictive food intake disorder (ARFID). We are also thrilled to share preliminary findings from our clinical trial of our new cognitive-behavioral treatment for ARFID and to introduce our new book for health professionals, Cognitive-Behavioral Therapy for Avoidant/Restrictive Food Intake Disorder: Children, Adolescents, and Adults, published in December 2018 by Cambridge University Press.

At the EDCRP, our research and clinical practice complement one another, and it is a privilege for us to work with such a strong team. In addition to growing our research footprint, we endeavor to offer the strongest evidence-based care to the community; this year, we evaluated or treated more than 200 patients and families. Finally, both our Teen Mentor and Summer Fellowship programs continue to thrive and we have welcomed a new cohort of students who are passionate about eating disorders work and represent the next generation of clinicians, researchers, and advocates. We are grateful to the Lawrence J. and Anne Rubenstein Foundation for their ongoing support of this important work.

Thank you all for your partnership and enthusiasm for our mission.

Warmly,

Kamryn T. Eddy, PhD
Jennifer J. Thomas, PhD

Drs. Thomas and Becker Deliver Trainings in Cognitive-Behavioral Therapy for Avoidant/Restrictive Food Intake Disorder (CBT-AR) to Five Cities Across Australia and New Zealand

In October 2018, Drs. Thomas and Becker traveled to Hamilton, New Zealand and four cities in Australia (Gold Coast, Melbourne, Perth, and Sydney) to disseminate the EDCRP’s new treatment for ARFID to over 200 eating disorders professionals. Sponsored by the Australia and New Zealand Academy for Eating Disorders (ANZAED), they provided all-day interactive workshops to ANZAED members and other interested professionals.

Attendees shared that the CBT model for treating ARFID was relevant to the patients they were seeing in Australia and New Zealand, with the only suggestion for improvement being to add kangaroo and vegemite to the list of foods to learn about in CBT-AR! Drs. Thomas and Becker gained deeper appreciation of the prevalence of ARFID around the world and returned to Boston with even greater enthusiasm for the EDCRP’s clinical and research mission.
Eating Disorders Clinical and Research Program

**Presentations**

**2018 ICED conference**

The 2018 International Conference on Eating Disorders (ICED) was held in April in Chicago, Illinois. Dr. Thomas served on the planning committee, and many members of the EDCRP presented original research to other clinicians and researchers. Here are two highlights:

**How full is eating disorder recovery?** To answer this question, clinical research coordinator Ani Keshishian examined the common comorbidities of major depressive and substance use disorders in individuals who have recovered from their eating disorders using data from the MGH Longitudinal Study of Anorexia Nervosa (AN) and Bulimia Nervosa (BN). Previous research from this longitudinal data demonstrated that nearly two thirds of the sample recovered from their eating disorder at a 22-year follow-up. Ani’s research found that those who recovered from their eating disorders were also significantly more likely to be free of major depression and substance use disorders at long-term follow-up. This provides hopeful news suggesting that long-term recovery is truly full. Ani is grateful to the Ophelia Fund for supporting this project.

**Food restriction looks different in anorexia nervosa versus ARFID.** To understand differences in restriction between these diagnostic groups, clinical research coordinator Alyssa Izquierdo analyzed standardized breakfast meal and daily food log data collected from low-weight females through both the Adolescent Brain and CARE (A Study of Children and Adolescents with Avoidant/Restrictive Eating) studies. Alyssa found that female adolescents with low-weight ARFID ate fewer kilocalories (kcal) and macronutrients (i.e., fat, protein, and carbohydrates) on the breakfast meal compared to those with AN. Based on their daily food logs, individuals with ARFID ate less percent kcal from protein and greater percent kcal from carbohydrates compared to those with AN. Despite comparably low weights, nutritional intake differed significantly between groups, which may be useful in differential diagnosis and in guiding treatment targets.

**2018 EDRS conference:**

The 2018 Eating Disorders Research Society (EDRS) Conference was held in October in Sydney, Australia. Drs. Thomas and Kendra Becker represented the team, sharing the latest findings on ARFID. Congratulations to Dr. Thomas who earned an award for being among the top-rated abstract for the findings from the trial of cognitive-behavioral therapy for ARFID (CBT-AR).

Dr. Thomas shared data from the first 20 child and adolescent cases to complete the open trial of CBT-AR. Fourteen patients received family-supported treatment and six received individual treatment. On average, patients did well: at the end of treatment, 70% no longer had ARFID; patients incorporated an average of 17.5 new foods into their diets; and those who started at low weights gained an average of 11.5 lbs over 20-30 weeks of treatment. Furthermore, these data support the feasibility and acceptability to patients and families interested in ARFID care.

Dr. Becker presented data collected as part of routine clinical care at the EDCRP to examine an attentional bias towards detail in those with anorexia nervosa compared to those with ARFID. Whereas attention to detail bias has been implicated in the pathogenesis of anorexia nervosa, this has not been studied in ARFID, an eating disorder that is also characterized by food restriction. She found that attention to detail bias was also present in ARFID and was, in fact, even more pronounced in those with ARFID compared to those with anorexia nervosa. These preliminary data are the first to examine cognitive style in ARFID and may help to explain clinical features of the illness (e.g., individuals with ARFID characterized by sensory sensitivity are likely to reject foods based on small changes in presentation) and even suggest treatment targets.
The Teen Mentor Program, directed by EDCRP psychiatrist Dr. Lazaro Zayas, offers adolescent girls in the community the opportunity to build their individual leadership skills by fostering positive self-image in themselves and their peers. In 2017-2018, the teens worked to develop a body-positive Instagram account geared toward adolescents. Check it out!

We are pleased to announce that the program is continuing and is currently accepting nominations for both female and male students for the 2019-2020 school year.

To nominate a teen for the 2019-2020 mentorship program, please email Dr. Zayas at lazaro.zayas@mgh.harvard.edu

Teen Mentors create @bodyimageboston Instagram account.

Letter from the Director of the Teen Mentor Program

Dr. Lazaro Zayas shares his thoughts and reflections on leading the Teen Mentor Program:

Dear Friends and Supporters of the EDCRP: For the past five years, I have had the honor of working with eager and inspiring teenagers as the Director of the Teen Mentor Program based at Buckingham Browne & Nichols (BB&N) in Cambridge, MA. Our goal is to dispel the myth that an ultra-slender figure, or the “thin ideal”, leads to happiness, health and greater control over one’s life. During our monthly mentoring workshops, I help guide the teens in developing and implementing body positive projects that they can then, in turn, bring to their own communities. For example, after learning that 89 percent of the student body at BB&N experienced negative thoughts about their physical appearance and felt that they could benefit from more emotional support, the 2016-2017 Teen Mentors created a website as a resource for all students to learn how to help themselves and others when struggling with negative body image. Subsequently, the Teen Mentors launched an Instagram account, @bodyimageboston, during the 2017-2018 academic year. We encourage you to follow this impressive group of young leaders.

While we still have ways to go in eradicating the stigma that surrounds body image and eating disorders, the teens have reaffirmed my conviction that it is possible. My goal continues to be to grow and expand our Teen Mentor program to include a diversity of representation, including additional schools and youth programs in Greater Boston, as promoting positive body image and eating disorder awareness requires the motivation and vitality of our youth.

Warmly,
Lazaro Zayas, MD

Left to right, Alyssa Izquierdo, this year’s Teen Mentor Program co-leader, Dr. Laz Zayas with four of the Teen Mentors, Laila Shadid, Mahika Pandey, Alice O’Neill, Alexandra Schmalz (Teen Mentors not pictured include Lucy Lyman, India Cabot, Camilla Camargo Cortes).
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EDCRP Warm Welcomes

Lauren Breithaupt Langston, MA
Lauren recently joined the EDCRP as a predoctoral clinical psychology fellow in the Cognitive-Behavioral Scientist Track. She completed her graduate training in Clinical Psychology at George Mason University, where she was funded by two National Science Foundation Fellowships. Lauren’s research uses basic science paradigms to inform applied efforts towards eating disorder prevention. She specializes in evidence-based treatments, such as Cognitive Behavioral Therapy (CBT) and Dialectical Behavioral Therapy (DBT).

Stephanie Harshman, PhD, RD
Dr. Harshman joined the EDCRP and the Neuroendocrine Unit at Massachusetts General Hospital in July 2018 as a postdoctoral research fellow. Her research interests include the gut microbiome and neuroendocrine signaling in eating disorders and she was recently awarded a National Institute of Mental Health (NIMH)-funded National Research Service Award postdoctoral fellowship to support this work. Additionally, she is the clinical dietitian in the Preventive Cardiology and Metabolic Clinic and the Center for Feeding and Nutrition at MassGeneral Hospital for Children.

2018 Summer Fellowship Program

Since 1997, the EDCRP has hosted 60 undergraduate and graduate students through the Matina Horner, PhD, Fellowship Program. This is an opportunity for young investigators to foster interest in eating disorders research and to receive training in the field. This year, the EDCRP hosted two summer fellows, Audrey Landheim and Helen B. Murray, both of whom completed independent research projects under the guidance and mentorship of Drs. Eddy, Thomas, and Franko. At the end of the summer, Audrey and Helen presented their research to EDCRP staff, clinical and research collaborators, friends of the program, and Dr. Horner.

Audrey Landheim
Project Title: Fudo: A Mobile Application to Reduce Picky Eating

This summer, I spearheaded the development of a mobile app (Fudo) that could be used in the secondary prevention of Avoidant/Restrictive Food Intake Disorder, specifically targeting picky eating. Together, through collaboration with the EDCRP team and the help of Novosi, a digital therapeutics company, we created a powerful tool that can make a difference in the lives of those who are struggling with picky eating. It has been an incredible journey for me. Fudo is now available for download through the Apple app store or Google play.

Helen Burton Murray, MA
Project Title: Is it ARFID, a Gastrointestinal Disorder, or Both? Prevalence and Characteristics of Avoidant/Restrictive Food Intake Disorder in Adult Gastrointestinal Motility Patients

My project aimed to document the prevalence of avoidant/restrictive food intake disorder (ARFID) in patients presenting to gastroenterology motility specialists. Patients with gastrointestinal symptoms that are of non-organic cause will sometimes avoid or restrict in attempt to prevent their symptoms. Unfortunately, little is known about how often such food avoidance/restriction occurs and becomes problematic in adults, warranting a diagnosis of ARFID. Identifying ARFID in these patients is important because avoidant/restrictive eating could perpetuate (rather than ease) continued gastrointestinal distress. My hope is that the findings will increase awareness of ARFID in adult patients presenting with gastrointestinal symptoms so that they can receive accurate diagnosis and treatment faster.
New Innovations in ARFID

Drs. Thomas’ and Eddy’s book, entitled *Cognitive Behavioral Therapy for Avoidant/Restrictive Food Intake Disorder: Children, Adolescents, and Adults*, will be available in December 2018, published by Cambridge University Press. For more information, please go to: www.cambridge.org

In September 2018, Drs. Thomas and Eddy hosted a Radcliffe Institute Exploratory Seminar, bringing together 20 international experts from the eating and feeding disorders fields to discuss issues in diagnosis, assessment, and treatment of ARFID. The multi-disciplinary team represented five countries, and spanned the fields of psychiatry, psychology, adolescent medicine, gastroenterology, nutrition, endocrinology, speech and language pathology, occupational therapy, as well as all levels of care. This exciting meeting gave us an opportunity to identify key advancements that have been made as well as to outline a path forward to continue to move our understanding of ARFID ahead in the coming years.

**EDCRP Fond Farewells**

**Rachel Liebman, PhD**
We congratulate Dr. Liebman on her new position as Clinical Research Psychologist and Adjunct Professor at Ryerson University in Toronto, Canada. Dr. Liebman was a staff psychologist at the EDCRP for the past 2 years, and previously completed her predoctoral internship at Mass General and we will miss her here.

Dr. Liebman will continue working clinically with patients struggling with comorbid eating disorders and trauma, and her research will focus on developing and disseminating integrated treatments for this population.

Dr. Liebman is excited about her new position and is looking forward to collaborating with the EDCRP on future projects.

**News Highlights**

- Dr. Kendra Becker was quoted in an article in *US News and World Report* entitled “Do body image pressures lead to mental health issues in girls?” commenting on how loved ones can support their teens: “Be honest with your concern,” she explains. “Use ‘I’ statements: ‘I am worried about you – how can I help?’ Don’t offer overly simplistic solutions, like ‘Just eat.’ If they could, they would.” She continued, “The most important thing to communicate is that you care about them and want to help. [An eating disorder] is a very serious condition, associated with suicide, anxiety and depression. If you are worried about it, say something.”

- Dr. Thomas was quoted in several Mexican publications including *El Norte, La Noticias,* and *El Horizonte,* highlighting our team’s research and treatment for ARFID.

**Achievements**

Congratulations to Dr. Kendra Becker, for her promotion to Instructor of Psychiatry (Psychology) at Harvard Medical School in 2018.
Dr. Kendra Becker: Individuals with avoidant/restrictive food intake disorder (ARFID) present at all ages with different symptoms including intense fears of eating, very selective eating, and disinterest in eating. Sam’s ARFID symptoms developed after contracting strep throat. He became worried that he would choke while eating and soon he was sure that he would choke on all different types of foods. When he and his family came in for treatment, they were feeling desperate because he was eating only smoothies, soups, and some soft breads like muffins. He already had lost approximately 10 pounds and was eating less and less. He could only tolerate soups and smoothies if his family made sure there were no “bits” that might get stuck in his throat. Sam said it was too much work to eat because it took too long to carefully chew each bite and convince himself that all food particles were small enough to swallow. In fact, it was such a chore to eat with this fear; he sometimes did not want to eat at all. Sam was motivated to be able to eat his favorite foods again (e.g., steak, apples, lobster) and the family wanted him to be well enough for a family vacation. We met twice a week for the first two months of treatment, and Sam worked so hard that he was able to go vacation with his family and to camp for a month! We spent 20 sessions together and it was a pleasure to work with Sam. He had good insight and was eager to challenge his fears of choking with facts about swallowing, and found it rewarding to simply be able to eat again. Despite his young age, he was driven to improve and did not let a single week go by without adding new foods and staying on track with his weight regain goals. It was inspiring to watch him face his fears each week – he never gave up. Instead, he kept practicing with help from his parents who happily turned all exposure practices into games, timed challenges, and the chance to earn more YouTube time!

Patient Spotlight: Sam*, a 12-year old boy with ARFID.

*Name changed to protect patient’s confidentiality.

Dr. Becker asks Sam about his experience with coming to the EDCRP for treatment of his ARFID.

Can you share a little bit about what brought you in for treatment? I couldn’t eat solids. I was afraid I wouldn’t be able to swallow anything I ate, and that I would choke. I was really feeling scared and just tired and not well all the time. My parents talked to Dr. Becker and confirmed the ARFID diagnosis and thought the treatment program would help me overcome the fear of choking and get me back to eating solids.

What parts of your treatment are most helpful to you? The exposure therapies were most helpful and also just having Dr. Becker reinforcing how my body worked, and that I could trust it and that the likelihood of choking on foods I was eating was low.

What are you doing to practice outside of session? Now I am just eating normally, but we did a lot of time challenges with some difficult foods, like apples.

What tools do you use to keep yourself healthy? Mostly just eating. I know I need to get enough calories to live and feel good, so I make sure to eat a lot of snacks.

What would you say to someone with an eating disorder who is unsure about whether to seek treatment? You probably should, it’s a smart idea and can probably help you. I don’t know how I would have gotten better without working with Dr. Becker.

“It was inspiring to watch him face his fears each week – he never gave up.”
Clinical and Research Collaborations: Disseminating Evidence-Based Treatments

In addition, 2018 marked a record number of opportunities to advance the EDCRP mission of promoting the dissemination of evidence-based treatments for eating disorders.

- In February 2018, Dr. Thomas spent one week as a visiting professor at the Universidad de Monterrey in Mexico, where she trained 20 masters students in cognitive-behavioral therapy for eating disorders. While there, she also visited the largest eating-disorder treatment program in Latin America, Comenzar de Nuevo (directed by Eva Trujillo, MD), to train the staff in CBT-AR, given their increasing number of ARFID referrals.

- In September 2018, Drs. Thomas and Eddy partnered with the Mass General Psychiatry Academy to produce a 5-session, web-based course on delivering family-based treatment and cognitive-behavioral therapy for eating disorders. The Mass General Psychiatry Academy courses are available here (https://mghcme.org) and serve as a teaching and education tool for clinicians and health care professionals across the globe.

- In October 2018, Drs. Eddy, Zayas, Elizabeth Lawson, and Franziska Plessow participated in teaching an international cohort of psychiatrists at a special half-day Eating Disorders conference in Boston, held as part of the Mass General Psychiatry Academy’s annual Psychopharmacology meeting.

- In October 2018, Drs. Thomas and Becker spent three weeks in Australia and New Zealand to train clinicians in the delivery of CBT-AR, to meet the growing demand for clinical care of this population.

Are you interested in participating in a research study?

CARE Study

Clinical investigators from Psychiatry, Pediatrics, and Endocrinology are teaming up to study avoidant/restrictive eating patterns (or difficulty eating) in young people. Drs. Jennifer Thomas, Elizabeth Lawson, and Nadia Micali (of Geneva University Hospital and University of Geneva in Switzerland) received NIMH funding to conduct a longitudinal study examining the ways in which avoidant and restrictive eating patterns can affect hormones and brain regions involved in emotion and fear processing, appetite regulation, and sensory perception. This study involves an initial screening visit, a main study visit, and two shorter follow-up study visits over the course of two years. The study uses brain imaging (MRI) to examine these types of feeding and eating disorders, as well as to predict symptoms associated with recovery speed. This is an observational study and involves no treatment interventions. We are currently recruiting participants ages 10–22 years old (both those with avoidant/restrictive eating and healthy volunteers). Study visits include history and physical examination, blood draws, MRI scans, interviews and questionnaires, a meal and snack, and cognitive tasks. Participants will be compensated up to $450 for this study. If interested, please contact Olivia Wons at CAREstudy@partners.org or 617-726-0047.
Eating Disorders Clinical and Research Program Update

Eating Disorders Clinical and Research Program Team

**Professional Staff**
- Kamryn T. Eddy, PhD
- Co-Director
- Jennifer J. Thomas, PhD
- Co-Director
- Kendra Becker, PhD
- Staff Psychologist
- Lazar Zayas, MD
- Staff Psychiatrist,
  Teen Mentor Program Director
- Ani C. Keshishian, BA
  Clinical Research Coordinator

**Clinical and Research Teaching Faculty**
- Anne E. Becker, MD, PhD, ScM
- Judith C. Craver, PhD

**Post-doctoral Clinical and Research Fellow**
- Debra L. Franko, PhD
- Cathryn M. Freid, PhD
- Audrey E. Tolman, PhD

**Psychiatry Resident**
- Stephanie Harshman, PhD

**Pre-doctoral Clinical Interns**
- Xi Chen, MD
- Lauren Breithaupt Langston, MA
- Colleen Bucci, MA
- Solara Calderon, MA

**Doctoral Student**
- Shirley Wang, BA

WAYS TO GIVE
For information about ways to support the clinical care, research, teaching and advocacy activities of the MGH Eating Disorders Clinical and Research Program, please contact Molly McCarthy at (617) 643-8827 or mmccarthy50@partners.org.