Welcome to the first edition of CONNECTED

CEED's Vision: Victorians will have access to a world-class system of care for the treatment of eating disorders

CEED’s role is strengthening the system of care to provide excellence in eating disorder treatment. To achieve our vision CEED supports the establishment of a clear and accessible system of care for clients and carers with eating disorders; that facilitates early identification and a responsive service system. CEED works on assisting the mental health and broader health system in the provision of and continued development of treatment and care for eating disorders clients and their families.

Latest News from CEED

♦ CEED conducted ‘Cognitive Behavioural Guided Self-Help’ training’ presented by senior clinicians Dr Beth Shelton & Dr Rachel Gold at headspace Collingwood on the 4th of May. headspace clinicians who attended the session believe the training improved their commitment to eating disorder care through offering implementation of practical treatment plans and service ideas.

♦ Associate Professor Genevieve Pepin & Dr Rachel Gold have joined the CEED team. Rachel is a clinical psychologist with a broad range of experience in the treatment of eating disorders and Genevieve is a researcher and lecturer based at Deakin University.

♦ The ‘Medical Management of Eating Disorders in the Community’ seminar videos are now live on the CEED website. Watch Dr Catherine Lynch’s presentation and Maja Havrilova, Dr Priscilla Yardley, Dr Debra Wilson, Michelle Roberton & Belinda Caldwell in conversation about ED management. Check out the videos on the CEED website homepage. http://www.ceed.org.au/

♦ Would you like to join our vibrant, committed team, and contribute to the development of high quality services for people with eating disorders across Victoria? CEED is seeking two dynamic and highly motivated clinicians in a fixed term capacity until June 2019. For more information and to apply go to

An Introduction to Schema therapy and Eating Disorders—August 4th 2017

This seminar will provide an introduction to Schema Therapy (ST) for eating disorders. ST combines cognitive, behavioural, psychodynamic and experiential strategies into one unified, systematic approach to treatment. ST is designed to target enduring and self-defeating patterns characteristic of personality disorders, chronic depression and other long-standing pervasive psychosocial difficulties.

The ST eating disorder (ED) model was developed to address a treatment gap given a proportion of people with eating disorders not respond to cognitive behavioural therapy (CBT; CBT-E; Fairburn et al., 1995; Fairburn and Harrison, 2003). ST specifically addresses the schema-level beliefs that underpin chronic and persistent pathology in treatment-resistant eating disorders, and attends to the high level of co-morbidity in the eating disorder population (Hudson et al., 2007; Blinder, 2006). On Friday the 4th of August, 9–10:45am. Registrations: see CEED website

Maudsley Model of Anorexia Nervosa Treatment for Adults (MANTRA): Where are we now & where are we going?

Professor Treasure’s workshop provided a comprehensive overview of the MANTRA treatment of Adults with anorexia. Professor Treasure describes her model as a cognitive-interpersonal maintenance model for anorexia nervosa. The model comprises and intervenes in four main domains including:

- A thinking style characterised by rigidity, detail focus and fear of making mistakes;
- An avoidant emotion processing and relational style;
- Positive beliefs about the use of anorexia for the person, and;
- The response of close others which can unintentionally contribute to the illnesses maintenance.

Professor Treasure utilised case examples and videos, research evidence and a range of practical examples of in-therapy tasks to bring to life the treatment model. Given the restricted range of successful treatment for anorexia available for adults, her workshop and the findings of her latest research imbued the audience with a sense of optimism regarding the possibility of recovery for adults with Anorexia.

Eating Disorders Across levels of care: Incorporating “Evidence based treatment” & “Practice Based Evidence”

The focus of Dr Rockwell’s workshop was the gap between research and clinical practice of family based treatment (FBT) for adolescent eating disorders. Dr Rockwell workshop explained how FBT has been effectively tailored in her Adolescent eating disorder service to maximise its impact and to support more complex presentations. Dr Rockwell provided detailed information regarding how to incorporate adjunct treatments into FBT these included:

- A one-week intensive Multi-Family Therapy to catalyse the process of change;
- Consideration of the adolescents’ temperament and tailoring treatment to consider whether the individual has more of an ‘over’ or ‘under’ control of their emotions and behaviours;
- How to utilise other individual therapies such as Dialectical Behaviour Therapy as an adjunct to boost treatment, and;
- The utility of providing additional Parent Management Training and contracting as part of the overall FBT treatment.

Dr Rockwell’s flexibility and innovative ideas in the treatment of anorexia in young people were enlightening and inspiring.
Eating Disorders Online Learning Program

The Eating Disorders Online Learning program, created by our partners CEDD in NSW, is designed for all professionals working with eating disorders, and includes 5 modules with introductory to advanced levels of theory, practice knowledge and resources to work in eating disorders. Each module contains core curriculum, a quiz, and in-practice session with more in-depth view of the topic, clinical tools and a resources section. Formats include interactive text, role play examples by specialist in the field and feedback from sufferers and their families.

For more information, visit the CEED website: http://bit.ly/2qiFj3x

Family-Based Treatment for Adolescents with Anorexia Nervosa
27th & 28th July 2017

Family-Based Treatment (FBT) is recognised as the first line, evidence-based, early intervention model of care for adolescents with anorexia nervosa (AN). FBT for AN was originally developed at the Maudsley Hospital UK in the 1990s. Prof Daniel le Grange & Prof James Lock are the international leaders in the development & application of this approach as an evidence-based practice and have published treatment manuals and parent guides. CEED has developed and delivered FBT training over several years to provide training in this model to suit Victorian Service conditions.

For more information, visit the CEED website training page: http://ceed.org.au/training-and-events

New: NICE Guidelines May 2017

The national institute for Health and Care Excellence has recently produced updated clinical guidelines: “Eating Disorders: Recommendations and Treatment”

The guidelines cover assessment, treatment, monitoring and inpatient care for children, young people and adults with eating disorders.

The guidelines now recommend for the psychological treatment for anorexia nervosa in adults to either be:

- Individual eating-disorder-focused cognitive behavioural therapy (CBT-ED)
- Maudsley Anorexia Nervosa Treatment for Adults (MANTRA)
- Specialist supportive clinical management (SSCM)

Also the following recommendations were made for Binge Eating Disorder (BED):

- Do not offer medication as the sole treatment for binge eating disorder;
- Offer a binge-eating-disorder-focused guided self-help programme to adults as a first line of treatment; and,
- Advise the person not to try to lose weight (for example by dieting) during treatment, because this is likely to trigger binge eating.

The guidelines are available from: https://www.nice.org.uk/guidance/ng69
Introducing Dr Emma Spiel  
Senior Eating Disorder Clinician

1. **What does your role at CEED entail?**  
I work across our consultation, training and service development areas. This means I’m either working with clinicians and services to support them with their clients and service development or developing materials.

2. **What are you working on at the moment?**  
My current major project is a collaboration with the Gippsland Centre Against Sexual Assault. They are developing a group program assisting people who have experienced sexual assault who have problems with food and eating. It has been great sharing and learning, especially the overlap with eating disorders. I am really excited that GCASA are developing their capacity to assist their clients in this way.

3. **What are you passionate about or aspire to do within the ED field?**  
I’m really passionate about accessibility of services. Currently the adult service system is to the fore in my mind, as it is for the CEED team. I’m really keen for CEED and adult mental health services to work out how we can do this better. I’m also very interested in the experience of body image in ED recovery and ways in which we may better understand this and support people to improve their body experience. I’m a long time student of yoga and recently trained to become a yoga teacher - I suspect that mindfulness-based contemplative and embodied practices such as yoga have a lot to offer in this area.

4. **Where do you see ED treatment in 10 years time?**  
In 10 years’ time I see ED treatment being mainstream; people with eating disorders having maximal choice and opportunity for treatment. I think there is a lot of work being done in the field to reduce stigma and increase treatment accessibility and options. I hope that the result of this in the next decade is that people get timely, appropriate, affordable treatment, and that people have a variety of treatment options from which to choose across both public and private settings, including online, group-based, and individual treatment.