

SIXTH IRISH NATIONAL EATING DISORDERS CONFERENCE 2024

HOPE

#INEDCONF2024

The GAS Building, TCD School of Nursing and Midwifery,
D'Olier Street, Dublin 2.

Friday March 1st, 2024

Programme and Abstracts

In association with Conference Networking Ireland

(www.conferencenetworking.ie)

and

BODYWHYS (www.bodywhys.ie)



BODYWHYS is the Irish national voluntary organisation supporting people affected by eating disorders. Our mission is to ensure support, awareness and understanding of eating disorders amongst the wider community as well as advocating for the rights and healthcare needs of people affected by eating disorders.

Thank you to the following organisations and individuals without whom today would not have been possible: Trinity College Dublin; Jeni Ryan (Administrative Officer – Events) and the staff at the School of Nursing & Midwifery, Trinity College Dublin; Jacinta Hastings (CEO), Ellen Jennings (Communications), Harriet Parsons (Training and Development) and all the volunteer staff of BODYWHYS; Sweet Cicely, Rathcoole, Co. Dublin, for the wonderful food; Print Bureau, Inchicore, Dublin.

Irish National Eating Disorders Conference 2024

Welcome to the Sixth Irish National Eating Disorders Conference. Having to traverse the Covid epidemic that impacted so many lives in recent years, we had to take an enforced break from conferencing, and it's good to be back! Conscious of the varying challenges faced by all who have chosen to attend the conference today, I want to say a heartfelt 'Thank You' to everyone for making the effort to be here. We all acknowledge there are so many battles to be fought in the eating disorders field in its many manifest forms. The numbers of those who experience eating disorders is sadly growing, **BUT** so is our knowledge base. We know too that it's not enough. We know there is much more to be achieved – and this is why we are here today. We recognise the importance of continually updating our knowledge base in the area of eating disorders. The theme for the conference this year is in the word '**HOPE**' – It is vital that we never give up hope even when all our efforts may appear not to be succeeding. Recovery - full recovery is always possible!

I am delighted to especially welcome our speakers from different personal and clinical backgrounds who have travelled to be here from different parts of the UK and who are generously giving their time and sharing their unique expertise. Please make them feel welcome!

My wish is that you will come away from the day with new and positive learning experiences and with increased hope. Your feedback is welcome, and my final word is to thank all of you again for taking the time to attend and make this conference a success.

Enjoy your day, maybe talk with some people you haven't met before, and make new connections!

Gerard Butcher
(Conference Organiser)

Irish National Eating Disorders Conference 2024

“HOPE”

PROGRAMME

09:00 – Registration

09:15 – Welcome and Opening Remarks: Gerard Butcher;
Conference Organiser

09:30 – **Keynote Address 1:** Prof Paul Robinson, Consultant Psychiatrist; Director of Research and Development, Orri-UK, London, and Professor (Teaching) University College London

Topic: *‘Online treatment may be as effective as in-person day care for eating disorders.’*

10:30 – Break

11:00 – **Keynote Address 2:** James Downs, mental health campaigner, peer researcher and expert by experience in eating disorders

Topic: *‘Lived experiences of eating disorders treatment: What the professionals need to know.’*

12:00 – **Keynote Address 3:** Prof Paul Robinson

Topic: *‘The role of MEED (Medical Emergencies in Eating Disorders) in the management of severe eating disorders.’*

13:00 – Lunch - Registration area

14:00 - Kate Brown (Advanced Specialist Physiotherapist) and Anna Paterson (Clinical Lead Physiotherapist) NHS, UK.

Topic: *‘The role of physiotherapy in the management of exercise and body image in eating disorders treatment’*

16:00-16:15 Feedback Session and End

Prof Paul Robinson



Paul Robinson is a highly experienced clinician and researcher in the field of eating disorders with over 90 peer-reviewed articles. His publications, including 4 books and 9 book chapters, are on control of food intake, provision of services for and treatment of eating disorders, Severe and Enduring Eating Disorders, Medical Management of Severe Eating Disorders, and mentalization based therapies in eating disorders. He has chaired groups which have produced three Royal College of Psychiatrists Council Reports, 1992, 2001, 2010 (revised 2014, 2022) and contributed to two others in 2005 & 2012. He is senior author and originator of a widely accepted guidance called MARSIPAN (Management of Really Sick Patients with Anorexia Nervosa) published in 2010 and revised in 2014. After a major revision in 2022, this is now called MEED (Medical Emergencies in Eating Disorders). Paul is editor-in-chief of a forthcoming Springer book “Eating Disorders: A comprehensive international view” which will have 90 chapters and over 150 authors.

James Downs



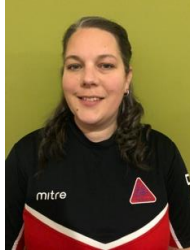
James is a mental health campaigner, peer researcher and expert by experience in eating disorders. He has a Masters degree in Counselling Psychology and is an accredited member of the British Association for Counselling and Psychotherapy (BACP). He holds various roles at the Royal College of Psychiatrists, NHS England, and a number of universities and charities - all of which focus on developing collaboration across a range of professional and personal perspectives to improve mental health for all. James has written extensively about his own experiences, from textbook chapters and peer-reviewed research to blog posts and mainstream media features. He is also a yoga, dance, and mindfulness teacher.

Kate Brown



After qualifying as a Chartered Physiotherapist in 2000, Kate worked in acute and community rehabilitation settings. She then went on to complete a Masters degree in Sports Medicine which sparked an interest in the role of therapeutic exercise in mental health, and lead to her taking up a post as a Physiotherapist within the specialism of mental health, where she has worked for the last 18 years. Kate's current post is as a Lead Mental Health Physiotherapist and oversees physiotherapy service delivery across a range of mental health inpatient settings, as well as working clinically on an adult eating disorder inpatient unit in Cambridge, England. Kate is also the Chair of the Physiotherapy Eating Disorder Professional Network in the UK and is very passionate about the inclusion of physiotherapy as part of eating disorder treatment and has particular interest in exercise and eating disorders. Kate was significantly involved in the UK publication for Physiotherapists of a comprehensive guidance document – Physiotherapy in Eating Disorders (October 2023), available for download online.

Anna Paterson



Anna qualified as a chartered physiotherapist in 2000 from Southampton University and went on to work as a rotational physiotherapist in Aneurin Bevan University Health Board, Wales. In 2003 she specialised in children's physiotherapy and worked in a variety of settings including special schools and in the community. As part of this role Anna worked in the children and adolescent mental health service which included both a day unit and community work. She was involved in the treatment of many young people with a wide range of mental health difficulties which included eating disorders. Following 19 years of experience in treating young people with eating disorders Anna's role evolved to include working with the adult specialist eating disorder team. Anna is passionate about exercise and sport in eating disorders and is also an athletics coach. Anna was significantly involved in the UK publication for Physiotherapists of a comprehensive guidance document – Physiotherapy in Eating Disorders (October 2023), available for download online.

Keynote Address 1; 09:30-10:30

Prof Paul Robinson, Consultant Psychiatrist; Director of Research and Development, Orri-UK, London, and Professor (Teaching) University College London

Topic Abstract: 'Online treatment may be as effective as in-person day care for eating disorders.'

Introduction:

In the eating disorders field increased referral rates and lock-down have stimulated the development of online programs. At Orri, a clinic in London delivering day care for eating disorders. lock-down was accompanied by the development of intensive online day care.

Methods and Materials:

Components of the online program were: 1. Online assessment, 2. Physical assessment and monitoring, 3. Individual dietetic advice and monitoring, 4. Individual therapy, 5. Individual occupational therapy, 6. Family therapy and support, 7. Psychiatry and nursing reviews, 8. A variety of online groups, eg body image, 9. Online lunch, The full Day Programme ran from 9.30am to 4.20pm 5 days per week.

At the beginning and at intervals throughout treatment, clients filled in the EDE-Q, the DASS and a satisfaction questionnaire. Weight and BMI were monitored as required. Bloods were measured by community pathology services. Online (OL) results were compared with a group of clients receiving only On-site (OS) (face to face) treatment, and a third group receiving a blend of the two approaches (BL).

Statistics were calculated using SPSS (v29). Repeated measures ANOVA was used to compare the three programmes (OL, OS, BL) for questionnaire ratings for the whole group. The same analysis was used to compare the effects of the programmes on BMI for the clients underweight at assessment ($BMI < 18.5$). Data from previous clients

was used in a Power analysis which gave a minimum number of 6 participants in each group to have an 80% chance of detecting a significant difference at $p < .05$.

Results:

Preliminary results showed the following:

Diagnosis: AN 69% BN 14% BED 7%, ARFID 1.5% and 7% OSFED or UFED.

The numbers of clients with baseline BMI < 18.5 in each group were: Online (OL) 42, On site (OS) 104, Blended (BL) 40.

RMANOVA: EDEQ and DASS, BMI in underweight clients: There were significant falls in all questionnaire scores, and significant increases in BMI, ($p < .001$) with no significant difference between programmes ($p > .1$). 57.3% of underweight clients had BMI > 18.5 by discharge. Satisfaction was high. The same results were obtained comparing just OL with OS programmes.

Discussion:

In this study, with adequate numbers in each group, BMI for underweight clients, (Anorexia Nervosa) and general and eating disorder symptoms for the whole group changed in a favourable direction. ANOVA was unable to distinguish between treatment programmes. This is surprising but may be explained partly by the intensity of the online day programme offered.

Conclusions:

Conclusions: At Orri, online intensive day care for eating disorders appeared as effective as on-site day care in improving BMI in underweight clients and in reducing psychological symptoms in the whole group. Key characteristics of the programme were intensity and duration of day treatment, enthusiastic and experienced staff and high staff-client ratio.

Keynote Address 2; 11:00-12:00

James Downs, mental health campaigner, peer researcher and expert by experience in eating disorders

Topic Abstract: *'Lived experiences of eating disorders treatment: What the professionals need to know.'*

James's presentation uses the lens of lived experience to consider some of the key issues facing those providing and receiving care for eating disorders within general and specialist services. He will address some of the contentious issues facing service delivery today and specific challenges in providing care for those with long-standing and severe illness, and diverse groups. Alongside this, James hopes to draw out more universal principles that can underpin good care for all those experiencing eating disorders, and their carers - irrespective of illness duration, severity of illness, or background. Finally, there will be a focus on how we can move forward together in improving services via collaboration and coproduction with lived experience, with a chance to ask questions and engage in the subject as a group.

Keynote Address 3; 12:00-13:00

Prof Paul Robinson

Topic Abstract: The role of MEED in the management of severe eating disorders

Introduction:

Eating disorders are potentially fatal conditions and anorexia nervosa has a Standardized Mortality Ratio of 5.86. Anecdotal evidence and reports from coroners and the UK Ombudsman suggest that patients with eating disorders can be poorly managed in medical settings with difficulty in diagnosis, failure to treat severe malnutrition, pursuing abnormal blood results which are caused by the eating disorder, and failure to provide follow up after initial emergency treatment. There was a need for an informative and useful guide for all physicians in the management of the complex medical, psychological and social issues presented by patients with severe eating disorders.

Process followed:

A series of online meetings of interested professionals from both eating disorders psychiatry and medicine led in 2010 to the publication of MARSIPAN (Management of Really Sick Patients with Anorexia Nervosa). This was followed, using a similar process of online consultation, by the publication of Junior MARSIPAN for under 18s. In 2020 a revision group was set up with psychiatrists, physicians, psychologists, GPs, service users and carers with the help of the National Collaborating Centre for Mental Health (NCCMH) and this led to the publication in May 2022 of MEED, Medical Emergencies in Eating Disorders (updated October 2023). This was written by a Project Group and consultation and review were provided by an Expert Reference Group and a further group of contributors. The document covers all ages and all eating disorders.

Key aspects of MEED:

The document is quite long at 185 pages. However, attempts have been made to render it accessible as follows:

1. A Risk Assessment Framework. This is a RAG (Red Amber Green) rating system covering medical and psychiatric risk which can be used independently from the main document.
2. A MEED Checklist: This postcard-sized checklist is intended for use by front line staff eg in the Emergency Department, to establish whether key aspects of care have been thought about in someone presenting with a severe eating disorder.
3. Annexe 1 gives summary sheets for each relevant group (including physicians, GPs, service users and carers).
4. Annexe 3 gives detailed advice on the management of diabetes mellitus Type 1 in eating disorders (T1DE).
5. Figure 4 gives a decision tree for managing refeeding in severe anorexia nervosa.

Uptake

The aim is for the guidance to be used by all health professionals working with patients whose health is severely compromised by an eating disorder. Up to 2022 uptake of MARSIPAN was better in mental health and paediatrics and less so in adult medicine. This seems to be improving although a formal survey has not been done. We hope that a smartphone app will be developed to accompany MEED.

Afternoon Seminar – 14:00-16:00

**Kate Brown (Advanced Specialist Physiotherapist) and
Anna Paterson (Clinical Lead Physiotherapist) NHS, UK.**

Topic Abstract: The role of physiotherapy in the management of exercise and body image in eating disorders treatment

Dysfunctional exercise and energy mismanagement and the role it plays is a rarely addressed topic in working with eating disorders. It can be an extremely difficult issue to deal with and without expert guidance can leave individuals, families, and health care professionals at a loss regarding appropriate advice in this area. Kate and Anna have extensive experience in this area and have been significantly involved in the recent UK publication for Physiotherapists of a comprehensive guideline that can help to navigate the pitfalls of exercise management in eating disorders. They will present a range of strategies, tips, guidance, and advice on managing exercise that will hopefully be helpful for the whole audience today, and not just health professionals. This will include:

1. The unique role physiotherapy can play as part of a multi-disciplinary approach, in the treatment of eating disorders using biopsychosocial assessment and interventions.
2. How physiotherapy can help individuals overcome symptoms of their eating disorder, such as distorted body image and dysfunctional exercising behaviour, and to accept the changing body shape during weight restoration and developing a healthier relationship with physical activity and exercise.
3. The key role physiotherapy plays in the management of osteoporosis, and in supporting individuals with functional and musculoskeletal conditions associated with low body weight.
4. The work of the UK Physiotherapy in Eating Disorder Professional Network group in developing a guidance document to support clinical practise and professional development.

WORLD EATING DISORDER HEALTHCARE RIGHTS

(www.aedweb.org)

ACCESS TO QUALITY CARE: All patients have the right to immediate care for medical and/or psychiatric instability, followed by timely and non-discriminatory access to appropriate specialty care.

RESPECT: All patients, caregivers, and family members have the right to be treated with respect throughout the assessment, planning and treatment process. Patients and carers should never be judged or stigmatized based on symptoms, behaviours or past treatment history.

INFORMED CONSENT: When making healthcare decisions, patients and caregivers have the right to full disclosure by healthcare professionals about treatment best-practices, risks, costs, expected service outcomes, other treatment options, and the training and expertise of their clinicians.

PARTICIPATION: Families and other designated carers have a right to participate in treatment as advocates for the best interests of their loved-ones. Caregiving responsibilities and degrees of participation will necessarily vary depending on the age, mental state and diagnosis of the patient, as well as the caregiver's skills, availability, personal health, resources and other circumstances.

COMMUNICATION: All patients and carers have the right to establish regular and ongoing communications through clearly defined channels. Caregivers and family members have the right to communicate their observations and concerns to professionals and to receive information when the patient's medical stability and/or psychiatric safety is threatened or at risk.

PRIVACY: All patients and carers have a right to expect their health professionals to understand, communicate, and respect the applicable privacy or age-of-consent regulations that govern the communication of health and treatment information, as well as the circumstances and conditions that may override privacy concerns or transfer authority regarding treatment decisions.

SUPPORT: All caregivers have a right to receive information, resources and support services to help them understand and carry out the expectations and responsibilities of their roles as partners in treatment.

TEAM-CBT ANXIETY MASTERCLASS AND WORKSHOP DUBLIN

Friday May 17th and Saturday May 18th, 2024 (All-day)

Venue: The Ashling Hotel, Parkgate Street, Dublin 8.

You are invited to join us for this two-day intensive **TEAM-CBT** masterclass and workshop which will enhance your professional practice. You will learn an exciting new approach to Cognitive Behaviour Therapy (CBT), developed by a pioneer in the field, Dr David Burns. With a focus on working with anxiety, highly experienced trainers from the USA (Dr Leigh Harrington & Elizabeth Dandenell) will lead the masterclass and workshop and will be joined by trainers from the UK to teach the full **TEAM-CBT** framework in the context of working with anxiety. CBT techniques have had tremendous impact around the world since the 1970s. Numerous research studies have demonstrated its efficacy. However, you may have noticed that, although it can be very effective, it often falls short.

TEAM-CBT is not a new “school” of therapy, but rather is a framework for conducting measurement-based therapy that is proven to be more effective than traditional therapy. **T.E.A.M.** is an acronym for the four crucial ingredients of **effective therapy** known to improve treatment outcomes: Testing, Empathy, Agenda-Setting, and Methods. **TEAM-CBT** is thus an evolution of CBT that can lead to extremely rapid recovery. If you’d like to learn about this new approach and boost your therapist skills, then please do join us where you will also earn **14 CPD points** as well as automatic qualification for Level 1 **TEAM-CBT** certification.

**Due to the nature of this TEAM-CBT masterclass, places are limited
– so please book early.**

**‘Early-bird’ Cost (until Friday April 5th): €210 – to include coffee
breaks & lunch on both days. Cost after April 5th is €240.**

Further information available at www.conferencenetworking.ie