



CARE

Center for the
Advancement of
Research on
Eating Behaviors

CARE Lab Updates

FALL 2015

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- Learn about our interesting research findings!
- See how our research is improving our understanding of disordered eating!

New Research on Key “Triggers”

Many times people with disordered eating issues experience things in their environment as “triggering.” Triggers may lead a person to feel the need to engage in various eating behaviors, such as overeating or purging.

Using data from an ongoing study on disordered eating behaviors (the “eatstudy”), we used a new method to try to understand what symptoms promoted the activation of other disordered eating symptoms. We used data from the first 143 participants in the “eatstudy” using a technique called Network Analysis. Network Analysis was originally used to understand how information spreads through friendship groups on social media. We used this statistical approach to see which symptoms

promoted the spread of other disordered eating symptoms through the network. We found that the most “important” symptom related to something



called “body checking.” Body checking is when individuals engage in repeated checking of their body shape or weight (e.g., weighing oneself frequently, pinching oneself, looking frequently in mirrors or storefront reflections, or trying on outfits numerous times because one is unhappy with

one’s body weight or shape). Body checking was a key symptom that “triggered” numerous other symptoms in the network. Other symptoms that were important were related to restrictive eating, exercising until the point of exhaustion, and limiting one’s intake to “diet foods.”

We think these results suggest a need for treatments to start incorporating methods for helping individuals decrease their body checking behaviors. It may be an important tool for those suffering from eating issues! Want more info? Send your request to eatstudy@ku.edu. We’ll be happy to send you the full article once it is published!

Reaching our Recruitment Goals

The “eatstudy” is almost near the 200 participant mark! We sincerely appreciate the time, effort, and cooperation of our study participants. We aim to recruit 250 individuals and then follow participants for a three year period.

One of the main reasons we are so excited with our study progress is because we have a lot

of new results to report. In fact, this newsletter is full of exciting updates that come directly from participants in the “eatstudy!” For individuals who maintain participation in the study, they are contributing to crucial ongoing research that will help us understand what predicts improvement and relapses in disordered eating behaviors

over time. Each and every one of our participants is contributing to work that we hope will eventually lead to improved treatment programs for eating disorders.

Healthful vs. harmful diets?

The link between dieting and disordered eating is unclear; some studies have found that dieting increases over-eating while others have found the opposite.

Some researchers have proposed that these inconsistencies may be due to different types of dieting and we wanted to shed light on these types.

Using a large sample of participants and several common measures that assess dietary restraint (dieting), Kelsey Hagan, CARE Lab graduate student, found evidence for three types of dieting:

1) Strict Dietary Restraint (i.e., strictly adhering to daily caloric limits; not exceeding calorie limits);

2) Weight-Focused Restraint (i.e., efforts to change shape and weight with diet); and

3) Food and Weight Preoccupation (i.e., negative emotions and worries about food, weight, and shape).

Food and Weight Preoccupation increased eating disorder risk but not BMI. Weight-Focused Restraint and Strict Dietary Restraint also increased eating disorder risk and BMI decreased with increased levels of Weight-Focused Restraint and Strict

Dietary Restraint.

We also found that over-eating increased with Weight-Focused Restraint and Food and Weight Preoccupation, but not Strict Dietary Restraint.

It is important to note that all three types of dieting were associated with increased eating disorder risk. Thus, our results suggest that dieting should be avoided. Instead, focus should be placed on maintaining a balanced diet of carbohydrates, fats, and proteins and eating meals and snacks at regular time intervals throughout the day.



How do we define “severity?”

Tyler Hunt, CARE Lab graduate student, decided to tackle an important issue for her Master’s thesis. Ms. Hunt was interested in how we can provide doctors, therapists, and nutritionists with better information about “severity.” This is important because the current ways that “severity” have been defined for eating disorders have not been scientifically tested. Providing more information on what constitutes a “mild,” “moderate,” or “severe” eating

disorder can be used to refer clients to the best level of care, and may prevent people from being under- or over-treated. Although this study has clear and important implications for future ways we make treatment referrals, we noticed that the invitation to participate in this new study ended up being a bit confusing! We sincerely apologize for any confusion, and we have taken steps to clarify how we invite participants for future studies.

We are also taking steps to ensure that we don’t send reminders to individuals who have already participated in this study.

An important piece of this study is to identify which sets of behaviors predict mental health impairment and physical health impairment over time. This is why the study involves three separate online surveys. Ms. Hunt aims to complete her thesis this year, and is excited to share her findings in the next newsletter!



Research on “Weight Suppression”

“Weight suppression” is a term used in research to describe the difference between a person’s highest and current body weight.

Using data from our ongoing study, we recently ran statistical analyses to see if weight suppression is an indicator of illness severity for bulimia nervosa. We compared weight suppression to other indices that are used to predict clinical impairment. Results showed that weight suppression does not

significantly predict clinical impairment. However, the frequency of compensatory behaviors (e.g., self-induced vomiting, fasting, excessive exercise) was the strongest predictor of impairment. The more frequently a person compensates for eating, the more problems a person tends to have with their day-to-day functioning.

These findings provide some of the very first empirical support for

current clinical recommendations for defining bulimia severity.

Our results support the current medical definitions of severity for bulimia nervosa.

Kelsey Clark and Kelsey Hagan recently submitted this study for presentation at the International Conference on Eating Disorders, which will take place in San Francisco, CA in May.

Partnership with Recovery Record phone app!

We are beyond thrilled to announce an exciting partnership. Dr. Kelsie Forbush, Director of CARE, received a grant from Recovery Record, Inc. to develop a way to help individuals with eating disorders and their therapists track their progress over time. This is important work because therapists and doctors are sometimes so busy that they forgo spending time assessing to see whether their clients are doing better or getting worse. Other research has shown that the more therapists and

doctors do assessments with their clients, the faster and better they are able to help their patients.

We are hoping to help therapists and doctors help their patients by providing them with the easy-to-use tools they need to do their job well. In addition, a lot of clients report that they like to be as involved in their treatment as possible, and find it rewarding and motivating to see how they are progressing in therapy each week.

You can find more information about the Recovery Record Phone App online at recoveryrecord.com.



“Without our wonderful participants, we would not be able to discover new, helpful information about eating disorders!

Everyone who contributes to the “eatstudy” is helping to improve the future of quality care for people suffering from eating disorders.”

**- Dr. Kelsie Forbush,
Director of CARE**

Should we change the diagnosis of bulimia?

Two of our lab’s overarching research goals are to improve the way eating disorders are diagnosed.

Under the current diagnostic system, individuals who experience symptoms of bulimia nervosa at (or above) a certain frequency are diagnosed with “full-threshold” bulimia nervosa.

It is more common, however, for individuals to experience symptoms of bulimia for shorter periods of

time (for example, less than once per week on average). These individuals are said to have “sub-threshold” bulimia nervosa.

In our lab, we are interested in how sub- and full-threshold bulimia nervosa differ from one another.

For example, one of our research questions is whether people who experience more frequent symptoms of bulimia nervosa are more distressed than individuals

who experience these symptoms less frequently.

Preliminary results from our study suggest that sub- and full-threshold bulimia nervosa are equally distressing, impairing, and serious. This means that even “infrequent” bulimic behaviors are worthy of treatment.

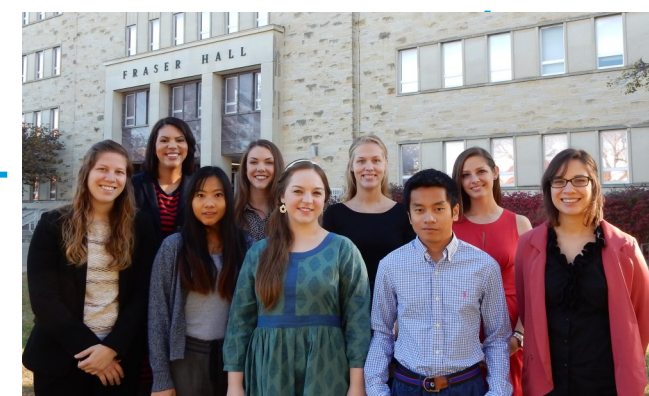
CARE Lab welcomes new members

The CARE Lab is excited to welcome two new members of our clinical-research center.

Danielle Chapa is a first-year graduate student in the University of Kansas Clinical Psychology program. Ms. Chapa received a prestigious Diversity Fellowship for the 2015-2016 academic year. She has also done some really great

work as an undergraduate where she studied issues of culture and how they influence body image in Mexican-American and European-American men and women.

Kelsey Clark is our new laboratory coordinator (and yes, this means the lab now has two “Kelseys” and one “Kelsie”)! Ms. Clark recently graduated from the University of



Missouri—Columbia and is passionate about helping those with eating issues. In addition to her work at CARE, Ms. Clark is a online support group moderator for the National Eating Disorders Association.

We are so happy that Ms. Chapa and Ms. Clark have joined CARE!



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Additional Lab Space and Free Parking!

We are excited to announce that we will soon have another interview room available for in-person appointments. This will allow us to see more participants for our ongoing studies, and will provide a new, welcoming space for everyone to feel more at home while participating in our research.

We also will soon be able to schedule appointments in the Kansas City area! We will have the ability to schedule appointments at the Clinical and Translational Science Unit (CTSU) at the University of Kansas Clinical Research Center in Fairway, KS. Keep an eye out for more details in the near future!

Finally, we are now able to offer free parking for in-person appointments. Participants will be able to park right outside our building, making participation in our research more convenient. Our participants can simply email us (eatstudy@ku.edu) to ask for more details.

