EDITORIAL

Celebrating research contributions from Australia: Marking the XXIVth annual meeting of the Eating Disorder Research Society

Abstract

This Virtual Issue of the International Journal of Eating Disorders (IJED) is released to mark the XXIVth Eating Disorder Research Society (EDRS) meeting in Sydney, Australia. This is the second EDRS meeting in Australia, reflecting the strong contribution of Australian researchers to eating disorder research internationally. Attendees at the Sydney EDRS meeting will be able to access the top 10 cited papers from IJED by Australian authors in 2016–2017, cited an average of 10.2 times each. It is pleasing to note the strong representation of early career researchers and the range of topics addressed.

KEYWORDS
Australia, early career researchers, eating disorder research society

This Virtual Issue of the International Journal of Eating Disorders (IJED) marks the XXIVth Eating Disorder Research Society (EDRS) meeting in Sydney, Australia in October 2018. It consists of the top 10 cited papers from IJED by Australian authors in 2016–2017, with an average of 10.2 citations each. Six of these papers are reviews or meta-analyses, so we hope that this virtual issue will support EDRS members in accessing a large body of recent knowledge across a number of important issues, ranging from risk factors (Theory of Mind, depression), treatment efficacy including the role of rapid response, measures (exercise), and help-seeking. We also hope that being brought up to date on cutting edge research in eating disorders via both the conference and the Virtual Issue will encourage you to develop your own thoughts and experiences into research of your own, and that you will submit your research to IJED to add to that evidence base. As a field we continue to need a multitude of perspectives, new ideas, and a willingness to grow the field, and in this respect, it is particularly pleasing to note that the first authors on 9 of the 10 papers are early career researchers within 5 years of their PhD. Their role, and our mentoring of their participation, will be essential in making the important breakthroughs that we need in eating disorders.

1 | THE CONTENT OF THIS VIRTUAL ISSUE

The papers in this Virtual Issue cover a range of topics, and are divided into two categories to assist the reader in working through topics. We also highlight issues for future research, given that the EDRS membership has the capacity to address the questions in an innovative and informative manner using cutting edge research.

2 | TREATMENT FOR EATING DISORDERS

As we are aware, getting to treatment for an eating disorder, whether effective or not, is a problem for many people with eating disorders, for many reasons. Ali et al.’s (2017)1,2 review of the emerging body of research examining the barriers towards help-seeking identifies a number of barriers to treatment, ranging from stigma, lack of encouragement from others, and cost of treatment. Importantly, the authors also identify facilitators for help-seeking, including comorbidity and emotional distress. The optimistic conclusion is that many of the barriers are modified and can be changed, and with further research we can identify the best ways of facilitating rapid and early access to effective treatments.

Jake Linardon’s three meta-analyses focus on different important questions about the current state of our evidence-based therapies. It is particularly pleasing that one paper examines the impact of cognitive behavior therapy for eating disorders (CBT-ED) on quality of life, an important outcome variable in treatment studies (Linardon & Brennan, 2017)1,2. The good news is that the evidence suggests that CBT-ED produces modest improvements in quality of life over treatment, but on a more sobering note, this is an outcome variable often overlooked in treatment studies as indicated by the small numbers of RCTs included in the meta-analysis. The second paper (Linardon, Brennan, & de la Piedad Garcia, 2016)1,2 examines the role of rapid response in predicting better outcome at end of treatment and follow-up in eating disorder treatment. In a call to action, the conclusions note that this is a solid and established predictor of outcome, and that future research needs to identify the mechanisms of this action such that we can further improve the effectiveness of our treatments. Finally, Linardon, Wade, de la Piedad, and Brennan (2017)1,2 examine the role of psychotherapy for bulimia nervosa on symptoms of depression. This paper allows us to quantify the impact of our therapies on depression compared to control (g = 0.47) and to conclude that therapist-led CBT-ED was more effective in reducing depression than active comparisons over treatment (g = 0.25). It is very fitting that one of the calls for future research focused on designs and analyses that can answer whether reverse causality is apparent, as one of the papers appearing later (Puccio, Fuller-Tyszkiewicz, Ong, & Krug, 2016)1,2 starts to address this issue.

Noetel, Dawson, Hay, and Touyz (2017)1 offer a Delphi analysis of expert opinion as to the way to define and treat driven exercise in...
adolescents with anorexia nervosa. Unless we have common definitions across our research, we will continue to be unable to use meta-analyses to their maximum effect in making robust conclusions across studies. Interestingly consensus about definition was not achieved, indicating one future pathway of research. More encouragingly, there was agreement about a treatment approach, namely that initial exercise restriction be followed by graded reintroduction of healthy exercise, rather than attempting to impose cessation of exercise. While we may have trouble defining problematic exercise in eating disorders, Young et al. (2017) offer a comparison of different measures of exercise in a population receiving treatment for anorexia nervosa and are able to recommend the best measures to use with this group.

3 | RISK FACTORS FOR EATING DISORDERS

Mitchison et al. (2017) tackle the role of body image and disordered eating in adolescents. Using conditional process analysis to examine the associations between overvaluation, preoccupation and dissatisfaction on distress, dietary restraint, and objective binge episodes, they found the three body image variables to be closely related but distinct. Interestingly all three constructs were clinically significant in boys, with preoccupation the predictor of clinical significance in girls: a timely reminder to increase representation of boys in our risk factor research. Puccio et al. (2016) offer a very useful meta-analysis of the association of another important risk factor for eating disorders, namely depression. Both phenotypes are risk factors for each other, and the recommended future research focuses on identifying aetiological factors common to the development of both in the hope of delivering more efficient and effective treatments.

In their review of the role of theory of mind in the aetiology of eating disorders, Bora and Kose (2016) provide a meta-analysis of data on the association between both decoding (processing of complex affective stimuli) and cognitive perspective taking (ability to infer others’ thoughts, beliefs and emotions) and eating disorders. Deficits in both can play a significant role in interpersonal difficulties. They conclude that deficits in cognitive perspective had a significant association with acute anorexia nervosa ($d = 0.99$), but not bulimia nervosa, with only a small association recovered anorexia nervosa ($d = 0.22$). The causal role of theory of mind deficits in anorexia nervosa is still a question for future research.

Finally, Hart, Damiano, and Paxton (2016) examine an intervention for body image problems in 2- to 6-year-old children. The package (Confident Body, Confident Child), especially when accompanied by a parental workshop, showed superior effect on parenting variables shown to impact childhood risk for body dissatisfaction, unhealthy eating and weight, compared to control conditions. Australian researchers have always shown a commitment to rigorous evaluation of prevention approaches for eating disorders, and this study provides a nice example of that genre.

4 | SUMMARY

Please enjoy the papers here and use them to support your enjoyment and discovery at the EDRS meeting. We hope to see more papers from EDRS members and attendees over future editions.

END NOTES

1 The first author is an early career researcher, within 5 years full-time equivalent from the PhD.
2 This is a systematic review and/or meta-analysis.

REFERENCES


