

# Center for Eating Disorders Care

at University Medical Center of Princeton

Stop by and see us at the 2016 National Eating Disorders Association (NEDA) Conference.

**The Sky's the Limit:  
Advances and Insights in  
Eating Disorders Treatment  
and Prevention**

**September 29 to October 1  
Chicago**

Staff members attending:

**Cathy Lane**

Clinical Outreach Coordinator

**Mindy Parisi Cummings,**

**PhD** Administrative Director of  
Hospital Psychiatry and Program  
Director of the Center for Eating  
Disorders Care



**Join us for a lecture  
and networking event  
celebrating our 20th  
anniversary!**

See inside for details.



Center for  
**Eating Disorders Care**


University Medical Center of Princeton  
at Plainsboro

**Center for Eating Disorders Care**

University Medical Center of Princeton  
1 Plainsboro Road, Plainsboro, NJ 08536

877.932.8935

[princetonhcs.org/eatingdisorders](http://princetonhcs.org/eatingdisorders)

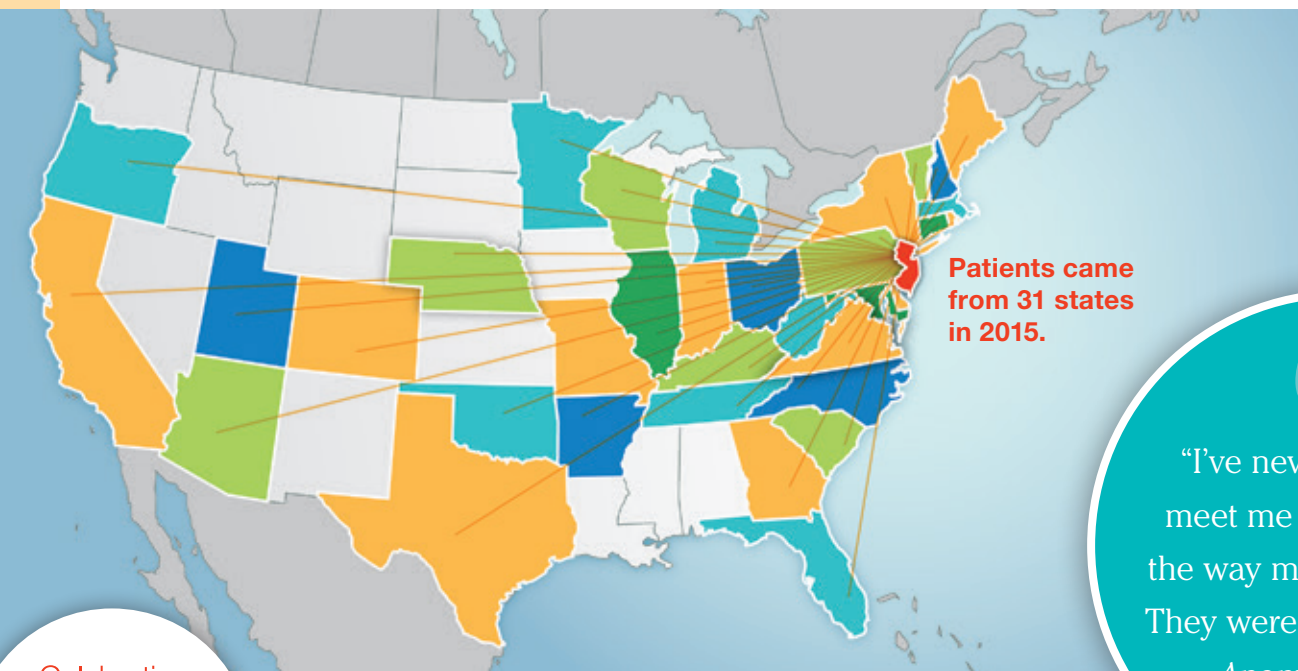


**T**wenty years ago, the Center for Eating Disorders Care began its work as part of a small inpatient unit with 12 beds at The Medical Center at Princeton. Today, it has expanded into a nationally known treatment center located on its own wing in the modern, acute-care setting of University Medical Center of Princeton in Plainsboro, New Jersey.

"It all started in the early 1990s in conversations with Dr. Jay Kuris, who was then Medical Director of Princeton House and is now a Senior Attending Psychiatrist at Princeton HealthCare System," recalls Richard Wohl, MSW, MBA, President, Princeton House Behavioral Health, and Senior Vice President, Princeton HealthCare System. "We discussed the need for this type of specialized care, and laid the groundwork by recruiting eating disorders expert Dr. Kenneth Willis to help launch the program."

Over time, the program's staffing levels and patient population grew. As leadership began early planning for a move to University Medical Center of Princeton's new home in Plainsboro, a needs assessment and strategic plan recommended that the Center should be licensed for 22 inpatient beds — a prediction that now meets today's patient needs.

*(continues inside)*



Celebrating  
**20** years  
 of Caring

“It’s very gratifying that as we celebrate 20 years, we’ve succeeded in reaching that full potential and in providing a level of care that’s so clearly necessary,” adds Mr. Wohl.

The actual move to University Medical Center of Princeton in 2012 was a significant point on the 20-year timeline. As a part of this newly built medical center, the Center for Eating Disorders Care is now better equipped to treat the growing number of medically complex patients requiring on-site, specialized care for co-morbidities. The new setting is also a peaceful, welcoming environment with abundant natural light, dedicated space for consultations and therapy, a spacious dining room, and a large classroom with several computers.

“The move was an incredible experience, from planning to the physical relocation,” says Melinda Parisi Cummings, PhD, who started with the Center for Eating Disorders Care as a therapist in 1997 and has been the Program Director since 2002. “We can now do even more in treating very medically ill patients, while also addressing the full array of physical, emotional, social, psychological, and spiritual needs.”

Today, the Center for Eating Disorders Care has a national presence, with patients coming from 31 states across the country in 2015.

“Much of the credit goes to our staff, both past and present, whose commitment is unparalleled,” notes Mr. Wohl. “They have an incredible passion for helping others and the patience for working in an often challenging field. They bring that motivation and dedication to the table every day.”

As the Center for Eating Disorders Care and its staff have grown over the years, likewise have its patients.

“When you look at the complexity of an eating disorder and the journey a patient takes during the course of treatment, what happens here is really almost miraculous,” adds Dr. Parisi Cummings. “It’s a special thing to see these transformations occur, and I’m proud to be a part of this team.”

“  
 “I’ve never had a team meet me where I’m at in the way my team did here. They were all exceptional.”  
 ~ Anonymous patient

“  
 “Just coming to this program saved my life... I’m thankful every day that I was here.”  
 ~ Anonymous patient

join us

# 20th Anniversary Celebration

**Thursday, October 6**  
**5:30 to 8:30 p.m.**

**Conference Center**  
**at University Medical Center of Princeton**  
1 Plainsboro Road, Plainsboro, NJ 08536

Networking: 5:30 p.m.  
Lecture: 6:30 p.m.  
Reception: 7:30 p.m.

**Featured speaker:**

**Daniel Le Grange, PhD**

Emeritus Professor of Psychiatry and Behavioral Neuroscience at The University of Chicago, Benioff UCSF Professor in Children's Health, and Eating Disorders Director, Department of Psychiatry, University of California, San Francisco

Dr. Le Grange will discuss "What have we learned in the 30 years since the first randomized clinical trial in adolescent eating disorders?" This presentation will provide an overview of randomized clinical trials that have been conducted for adolescents with anorexia nervosa and bulimia nervosa, and summarize how this information should inform our evidence-based practice.

**Join colleagues and program staff for networking**

before and after the presentation. Light refreshments will be served.

**Please RSVP by Friday, September 30.**

To RSVP or for information about continuing education credits, contact Cathy Lane at 609-853-7578 or [clane@princetonhcs.org](mailto:clane@princetonhcs.org).

# Treating Men and Boys Can Present Unique Challenges



**Eating disorders impact both genders, yet they have been historically perceived in our society as conditions affecting women. While prevalence statistics on men and boys with eating disorders have been somewhat elusive, studies have shown an increase in incidence in recent years.**

It is estimated that 5 percent to 10 percent of all eating disorders occur in males<sup>1</sup>, and that 20 million women and 10 million men in the U.S. will suffer from a clinically significant eating disorder at some point in their lifetime.<sup>2</sup>

Recent qualitative research on parent caregivers of boys with anorexia has shed light on some of the unique gender-specific challenges boys and their families face throughout diagnosis and treatment, and the findings will be discussed at the 2016 NEDA Conference.<sup>3</sup>

## In this study, mothers of sons with anorexia identified these concerns:

- The **gender-atypical nature** of a son's illness can cause family and marital stress and mother-son conflict, which may be evident at the onset of treatment.
- Parents of boys with anorexia may feel **stigmatized** by their son's illness.
- Parents may feel that their **concerns were minimized** or even dismissed by prior healthcare providers they consulted, including pediatricians.

"Understanding and validating these gender-related issues can be an important part of developing a collaborative

relationship with parents of boys with eating disorders, especially because the family is such an integral part of the recovery process," says Melinda Parisi Cummings, PhD, Program Director for the Center for Eating Disorders Care.

Clinicians should consider how the illness may contribute to parental distress and family conflict. In addition, the treatment team can create an environment that encourages the patient and his family to explore their experiences of a gender-atypical illness, including any perceived stigma.

"Parents of children with eating disorders are usually distressed to begin with, but adding gender to the equation can make treatment even more challenging," adds Dr. Parisi Cummings. "When the treatment team considers the road the family has traveled to arrive in treatment and engages them in that context, they can create more targeted and effective interventions."

1. Rosen DS. Identification and Management of Eating Disorders in Children and Adolescents. *Pediatrics* 2010; 126(6).
2. Wade TD, Keski-Rahkonen A, Hudson J. Epidemiology of Eating Disorders. In Tsuang M and Tohen M (Eds.), *Textbook in Psychiatric Epidemiology* (3rd ed.), 2011.
3. Whitney J. (2015) *Caring for a Son with Anorexia: The Psychosocial Impact on Mothers* (Doctoral dissertation). Fordham University, New York, NY.

## Partial Hospital Program Fits Many Needs

**Our Partial Hospital Program offers highly structured day treatment in a hospital setting together with the opportunity to apply recovery skills after program hours.** "It's one of the most intensive day programs available in the region," says Cathy Lane, Clinical Outreach Coordinator at the Center for Eating Disorders Care.

"With a ten-hour program day that supports patients from breakfast through dinner, we're able to help a multitude of clients — including those transitioning home from inpatient or residential treatment, and those being recommended to step up their treatment by their outpatient providers."

# Making the Family a Primary Focus

**The roles and perceptions of family involvement in eating disorders treatment have evolved significantly over the years. Not long ago, the family was often perceived as a contributing factor to developing an eating disorder. But today, we embrace the family as an integral part of the solution.**

The Center for Eating Disorders Care has recently taken family involvement a step further. All of our patients participate in family therapy sessions, and we offer multifamily group sessions on weekends to give loved ones the opportunity to interact with other families and better understand the recovery process. Yet now we also have adapted family-based treatment to the inpatient setting through an intensive family-centered care (IFCC) approach. In addition to actively including parents as members of the team from admission through discharge, it includes:

- **Family therapy** provided by clinical staff members who have been intensively trained in family-based treatment
- **Family meals** facilitated by nutrition and therapy staff, moving toward family-guided, independent eating
- **Plans for an expanded weekend family program**, including multiple parent groups focusing on skills building, nutrition education, and medical issues



“The [treatment] experience opened our eyes to the importance of a total family involvement to reach the goals.”  
~ *Anonymous parent*

“Treatment decisions are most effective when they are made with the transition home in mind,” says Tamer Wassef, MD, Attending Psychiatrist at the Center for Eating Disorders Care. “For example, when we involve the family in inpatient meals, it’s a more natural process to apply the therapeutic tools they’re using to the home setting.”

Designed primarily for children and adolescents, the IFCC model provides parents with additional education and tools to assist in supporting their child throughout hospitalization and upon returning home.

“The IFCC philosophy helps patients recognize that what they do at home should be no different from what they’re doing in the treatment setting,” says Samantha Wakefield, RD,

Nutrition Therapist at the Center for Eating Disorders Care. “The approach fosters a supportive environment for them to continue and maintain their progress.”



## Meet the Team

### **Kathleen Haughey-Eannone, RN, BSN, Nurse Manager**

Kathleen recently joined our team to manage the nursing staff, which is comprised of 34 nurses and nursing assistants providing around-the-clock care for patients. “Our nurses have the expertise to provide care in what is truly a dual medical and psychiatric setting,” she says. “Many of them have worked here for a decade or more, which says a lot about the program and their level of commitment. It’s great to have such a supportive environment.”

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# Pet Therapy Brings Joy to Patients

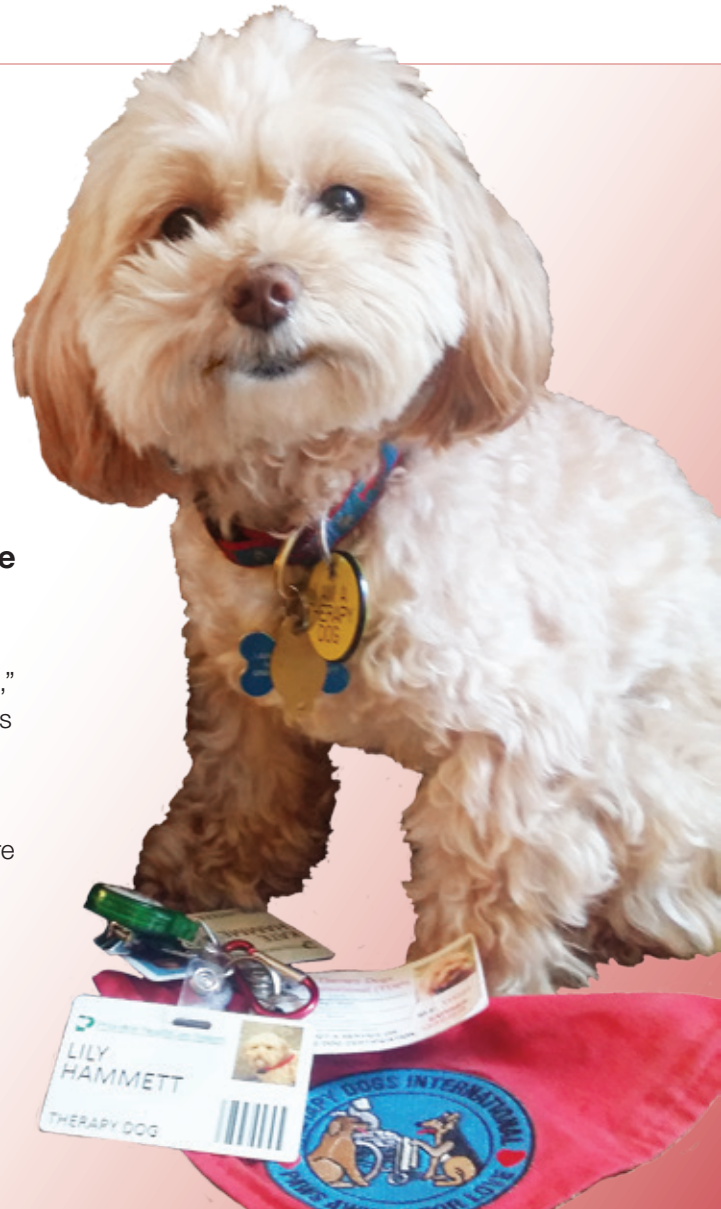
**Nearly every Friday for the past three years, Lily has been a welcome visitor at the Center for Eating Disorders Care. Together with her owner, Kate Hammett, they volunteer each week as part of the pet therapy program at Princeton HealthCare System.**

“Lily is just a tiny part of the healing process, but not an insignificant one,” says Ms. Hammett. “Over our visits, seeing the effect she has on patients is like watching a flower unfold.”

At only six pounds, this Maltipoo (Maltese and poodle mix) is adept at helping patients smile and relax, and the Center for Eating Disorders Care is one of her favorite places to visit.

“It’s amazing to sense the shift in atmosphere when Lily comes in,” says Sarah Holland, BA, Mental Health Associate at the Center for Eating Disorders Care. “Any tension seems to dissipate, and she enables patients to really be present in the moment. That feeling of lightness tends to last throughout the day.”

“Pet therapy is so uplifting for patients,” says Jennifer Paone, Director of Volunteer Services at Princeton HealthCare System. “It can even help generate positive conversation that’s important to the healing process. It’s a simple, wonderful way to bring joy to those who may need it.”



**Lily** is one of 12 dogs in the pet therapy program, which began in 2012 to help enhance the healing process.