

Cause and Cure for Anorexia and Bulimia
November 7, 2007, 8.00 am – 12.00
Clinical Education Centre at Auckland Hospital, Auckland



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A Novel Treatment for Eating Disorders

By using a biofeedback method, to normalize eating behaviour, and by supplying external heat, decreasing hyperactivity and restoring social activities the remission rate is 75% and the relapse rate is 10% during 5 years of follow-up. Preliminary results on normalizing eating and the perception of satiety in morbidly obese children and in adult patients with binge-eating disorder (BED) will be discussed.



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Most of the Responses of Patients with Anorexia Are Normal Responses to Starvation

Human biology has evolved to cope with the challenge of starvation. Many of the changes seen in anorexia are therefore adaptations to starvation, not signs of disease. There is nothing intrinsically wrong with eating disorder patients and their condition is reversible. The hormonal system, which includes the brain, allows us to adapt to changes in the availability of food rather than puts limits on how much we can eat. While humans have adapted to preserving energy, they have no protection against food abundance. The treatment of obesity rests on the assumption that humans need external support in order not to overeat. A bio-feed back method provides that support.

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A patient in remission will be interviewed



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Economic costs of Eating Disorders and Obesity

Despite the long-term nature of eating disorders, little research has been conducted to understand the financial burden placed on both families of sufferers and the community as a whole. The Swedish Government has recognised the cost-benefit of this new treatment method by funding the program for their citizens. By conducting a Health Economic Survey, it is hoped the Australian and New Zealand governments will recognise the need to fund evidence based treatments for eating disorders. The medical spending on obesity is 90 billion USD yearly in the US, however only surgical treatment has shown to be effective. The need of a cost effective and population based treatment will be discussed.



Anne O'Reilly, MD, FRNZCGP

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What can GPs do for patients with eating disorders?

Dr O'Reilly has worked in Psychiatry and General Practice in the UK and New Zealand for 22 years and will share her experience of young people and adults struggling with an eating disorder.



Mandy Beverley

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Eating Disorders from a Parent's Perspective

Challenges involved in navigating a system we feel should have more answers than it does- to researching and locating a treatment that is reclaiming our daughter's health and well being. What made our minds up to go against recommended treatment?