

Clinical Manual of Eating Disorders
Joel Yager & Pauline S. Powers (Eds.).
American Psychiatric Publishing (www.appi.org)
2007. 462 pp. \$49.00 (paperback).

Two eating disorder diagnoses, anorexia nervosa and bulimia nervosa, are described in the fourth edition of the Diagnostic and Statistical Manual for Mental Disorders (DSM-IV-TR; American Psychiatric Association, 2000). All other patients with clinically significant eating pathology are classified in the residual category of “eating disorder not otherwise specified,” including binge eating disorder, a specific example of an eating disorder not otherwise specified listed in the appendix of DSM-IV-TR. Among women, the prevalence of eating disorders is approximately 1% and 3% for anorexia nervosa and bulimia nervosa, respectively (for review, see Hoek, 2002). However, although the number of individuals with an eating disorder is small, the clinical management of these patients can be complicated, as anorexia nervosa is associated with significant mortality and a chronic course (Fichter, Quadflieg, & Hedlund, 2006), and patients with bulimia nervosa are at risk for serious medical complications, including electrolyte abnormalities (Mitchell & Crow, 2006). As such, comprehensive resources describing an overview of the assessment and treatment of eating disorders are particularly helpful for mental health professionals, and *The Clinical Manual of Eating Disorders* provides such a resource.

The book was conceptualized as “an elaboration” of the American Psychiatric Association’s (APA) Practice Guideline for the Treatment of Patients with Eating Disorders (Yager et al., 2006), and includes sixteen chapters addressing a wide range of information about the etiology and treatment of eating disorders. The first few chapters address fundamental aspects of eating disorders, with chapter one describing the DSM-IV diagnostic criteria for anorexia nervosa, bulimia nervosa, and the provisional criteria for binge eating disorder. In addition, for each of the diagnoses, the clinical features, including physical characteristics, medical complications, and psychological presentation are listed, and the issues of differential diagnosis, epidemiology, etiology, and course and outcome of the eating disorders are discussed. Chapter two presents information about the determination of initial treatment approaches, while chapter three presents data on the prevalence of eating disorders and other psychiatric comorbidity and some treatment modifications necessary for dually diagnosed patients.

The clinical management of eating disorders is addressed in chapters four and five. Information regarding when hospitalization or partial hospitalization should be initiated for patients with anorexia nervosa, and the types of treatment provided by these programs are described in Chapter four. Chapter five illustrates the outpatient management of patients with anorexia nervosa in a number of ways, including: the use of a case vignette, specifying treatment goals for low-weight individuals seen as outpatients, describing psychosocial approaches to the treatment for adolescents, underweight adults, and weight-restored adults, reviewing novel treatments and pharmacological treatments, and detailing monitoring and follow-up procedure for individuals seen as outpatients.

Specific forms of therapy for eating disorders are described in chapters four through eight. Chapter six introduces family treatment for eating disorders, with a particular emphasis on the Maudsley form of family therapy for adolescents with anorexia and bulimia nervosa. Information is provided about the structure and content of treatment, the research to date on family therapy, and future directions for studies evaluating this particular form of family therapy.

Treatment of patients with bulimia nervosa is addressed in chapter seven, especially cognitive-behavior therapy (CBT), as CBT is the treatment of choice for this disorder (NICE, 2004). Chapter seven also uses a case vignette to illustrate the use of both psychological and pharmacological treatment approaches, and discusses the literature on medications for the treatment of bulimia nervosa, combination (psychotherapy-medication) studies, sequential studies, and maintenance studies. Treatment approaches for individuals with an eating disorder not otherwise specified, the most prevalent but least researched eating disorder group, are covered in chapter eight. A description of psychosocial and pharmacological treatments for individuals with binge eating disorder and night eating syndrome are also described in detail, along with other forms of an eating disorder not otherwise specified.

Chapters nine and ten address the topic of overweight, as related to bariatric surgery and the association between medication and weight change. Descriptions of different bariatric surgery procedures (with illustrations) are found in chapter nine, along with a review of psychiatric issues among bariatric surgery candidates or patients, and research on eating-specific psychopathology and psychosocial issues. In addition, chapter nine provides information about areas that should be assessed in pre-surgical evaluations of psychological and psychosocial functioning. Chapter ten reviews the influence of medications (e.g., antipsychotics, mood stabilizers, antidepressant medications, and non-psychotropic agents) on weight and eating disorder symptoms, and offers case illustrations of eating disorder patients experiencing medication-related weight changes with clinical recommendations.

Treatment of patients with eating disorders is addressed once again in chapters eleven and twelve, specifically cognitive behavioral therapy (CBT) in chapter eleven, including the patients for whom this form of treatment is recommended, the application of CBT, including the main treatment elements and examples of manuals for CBT for bulimia nervosa, and possible strategies in the case that CBT is ineffective. Psychodynamic treatment for eating disorders is discussed in chapter twelve through the discussion of a book by Lucy Daniels, *With a Woman's Voice: A Writer's Struggle for Emotional Freedom*, who struggled with anorexia nervosa for 45 years, and the use of other case illustrations.

Special populations of individuals with eating disorders are discussed in the last four chapters of the book, including chapter thirteen addressing: patients with diabetes mellitus who are at risk for serious medical complications; women who are pregnant and have an increased risk for both medical problems and post-partum depression; older individuals; males; and individuals who have lost substantial amounts of weight but do not meet criteria for anorexia nervosa. Athletes and eating disorders are discussed in chapter fourteen, including a review of why athletes may be at a higher risk for developing problems with eating, the assessment of athletes to identify pathological eating behaviors, determining whether individuals with eating disorders can continue to participate in a sport, the treatment of athletes, and the prevention of eating disorders among this group. Cultural issues are covered in chapter fifteen, with a particular focus on problem eating and eating disorders in non-Caucasian populations within the United States. Examples of differing clinical presentations of those with diverse ethnic backgrounds are described, along with information about the culturally sensitive assessment and treatment of eating disorders. Finally, chapter sixteen addresses problems related to the chronic nature of eating disorders and treatment non-response, lists factors that signal a poor prognosis among these patients, and describes case examples of individuals who have failed to respond to treatment.

A particular strength of the book is the completeness of the reviews in each topic area, and as such, the book is accessible for individuals less familiar with the treatment of eating disorders. In addition, even those practitioners with more experience treating eating disorder patients can use this book as a resource for information about topics that are less common in the eating disorders field (e.g., special populations). From a practical standpoint, the book can also assist clinicians more directly, by providing a copy of the Eating Disorders Questionnaire (EDQ, version 9.0; Mitchell and colleagues, pp. 60-77), which assesses a range of eating disorder pathology and other areas that may also be relevant for the treatment (e.g., psychiatric history, history of abuse, medical history past treatment), and by presenting a guide for parents regarding student athletes and eating disorders (Powers & Thompson, pp. 383-385) suitable for distribution.

One limitation to the comprehensiveness of *The Clinical Manual of Eating Disorders* is due to the selection of topics for review based on the APA guidelines. A significant portion of the information related to the treatment of eating disorders is most applicable to physicians or psychiatrists. Medical monitoring and prescription of psychiatric medications are important aspects of treatment for this population, but sections devoted to these issues may be less clinically relevant for practitioners who are not medical doctors. In addition, some chapters cover interesting information about the treatment of eating disorders, including the chapter on psychodynamic treatment, where it must be noted that the evidence base is less secure than other treatments, like CBT.

The Clinical Manual of Eating Disorders includes helpful information about the assessment and treatment of individuals with eating disorders by condensing a number of areas of research into practical clinical recommendations. In sum, this book provides comprehensive and empirically-based overviews of a wide range of topics related to eating disorders written by leading experts in the field, and is therefore an informative and practical resource for practitioners.

References

- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision). Washington, DC: Author.
- Fichter, M. M., Quadflieg, N., & Hedlund, S. (2006). Twelve-year course and outcome predictors of anorexia nervosa. *International Journal of Eating Disorders, 39*, 87-100.
- Hoek, H. W. (2002). Distribution of eating disorders. In C. G. Fairburn & K. D. Brownell (Eds.), *Eating disorders and obesity: A comprehensive handbook* (pp. 233-237). New York: The Guilford Press.
- Mitchell, J. E., & Crow, S. (2006). Medical complications of anorexia nervosa and bulimia nervosa. *Current Opinions in Psychiatry, 19*, 438-443.
- National Institute for Clinical Excellence (NICE; 2004). *Eating disorders. Core Interventions in the treatment and management of eating disorders in primary and secondary care*. London: Author.
- Yager, J., Devlin, M. J., Halmi, K. A., Herzog, D. B., Mitchell, J. E., Powers, P., & Zerbe, K. J. (2006). *Practice guideline for the treatment of patients with eating disorders* (3rd Edition). Washington, DC: American Psychiatric Publishing.

*Robyn Sysko, Ph.D.
Research Fellow, Columbia University
Eating Disorders Research Unit*