LAUREATE INSTITUTE FOR BRAIN RESEARCH (LIBR)

Established in 2009, The Laureate Institute for Brain Research (LIBR) currently houses a multidisciplinary team of scientists and clinical research staff who apply neuroimaging, genetic, pharmacological and neuropsychological tools to investigate the biology of neuropsychiatric disorders. The Institute was founded by The William K. Warren Foundation for the purpose of conducting studies for developing more effective treatments or prevention strategies for these disorders. The LIBR research team occupies the first two floors of the LIBR building and the Laureate Eating Disorders Program resides on the third and fourth floors of the same building. This allows for a symbiotic partnership between the research team led by Dr. Sahib Khalsa and the treatment program led by Dr. Scott Moseman.

Laureate strives to provide excellence in eating disorder treatment and care. The research conducted on eating disorders at LIBR aims to inform our best care practices. From neuroimaging, to variances in brain functionality of those with eating disorders, to body image and treatment evaluation, LIBR remains on the cutting edge of investigation into eating disorder neurobiology and intervention.
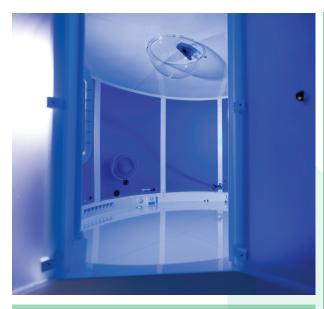
When an individual receiving treatment with Laureate qualifies for ongoing research studies, she may be offered the opportunity to participate. The clinical team assists in evaluating how participation will support her recovery and whether the individual might benefit from engaging in the study. Current areas of research include a treatment study examining the impact of Floatation-REST (reduced environmental stimulus therapy) on anxiety and body image concerns in anorexia nervosa, development of a mobile app for a new understanding of body image concerns in eating disorders, and a neurobiological investigation of the gut-brain connection in anorexia nervosa.
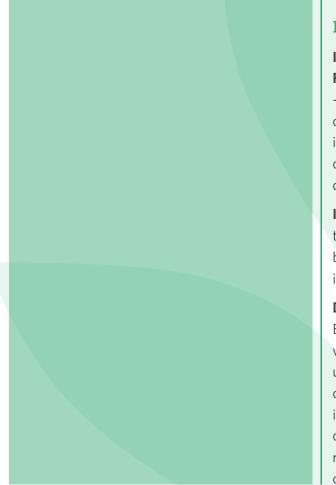
The Laureate Institute for Brain Research has made important findings relevant to individuals struggling with eating disorders as well as to those who love, support and provide treatment for these individuals. The following outlines several important research discoveries and areas of continued study.

Discoveries made by LIBR investigators with respect to eating disorders:

Physiological studies: using a physiological probe of the brain-body connection (interoception), investigators learned that there are potential interoceptive inaccuracies heading into mealtimes in individuals with anorexia nervosa (AN). These brain-body disconnections may contribute to what makes intake so challenging.

Neuroimaging studies: using functional magnetic resonance imaging investigators found that a specific region of the brain called the insula, which closely monitors the state of inner body signals coming from the stomach and heart, shows abnormal activity in individuals with AN.

Building on findings and investigating further impact:

Investigating the role of therapeutic interventions:
Floatation therapy: a clinical trial recently found that floatation -REST (or 'floatation therapy') was safe and well tolerated by outpatients with a history of AN, and early evidence that the intervention could alleviate stress and body image concerns. The ongoing study follows up on this finding through a randomized clinical trial of floatation therapy for inpatients with AN.

Interoceptive exposure therapy: a small study recently found that systematically retraining the brain-body connection right before mealtimes was associated with reduced anxiety and improved ability to manage meal-related discomfort

Development of tools for clinicians and patients:
Body image mobile app: through an ongoing collaboration with scientists at UCLA, researchers at LIBR are pursuing a new understanding of body image concerns through the development of Somatomap, a mobile app focusing on understanding how individuals with eating disorders see their bodies. Following up on earlier work to develop a standardized definition of relapse, remission, and recovery, they hope to learn whether this tool can usefully predict clinical outcomes after treatment.

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