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DDPD EML and Web site
Are you part of the DDPD EML?
DDPD started an EML (electronic mailing list, or listserve) for members only. Don’t miss out on this opportunity to network, ask questions, and keep in touch with your peers. To join: send an email message to imailsrv@ddpd.org with the following in the body of the message (remove the <> brackets): subscribe ddpdlist <Your Full Name>

If you’re a member of the electronic mailing list and want to send a message, address your message to ddpdlist@ddpd.org

DDPD Web site member log-in reminder: To log into the DDPD member-only areas of our Web site, type “ddpd” in the first prompt box and “ddpd_visitor” in the second box. Leave out the quotation marks, and make sure the letters are all lower case. If you have questions, contact DDPD Web Chair Lynn Grieger at lgrieger@adelphia.net

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Future Deadlines
Spring . . . . . . . . . . . . . . . . . . . . . . February 15, 2005
Please Forward Information To: Melissa Altman-Traub, MS, RD, LDN
1997 Turkey Trot Road
Jamison, PA 18929
martinjenkins@aol.com

Subscription cost for non-members is $25.00. A check or money order should be made payable to ADA/DDPD #12 and sent in care of the newsletter editor.

In this publication and on the web site...
From the Chair  
Mary Emerson, RD  

I live in New England where fall is really a very special season of the brilliant reds and oranges. It is a great time of focusing our energies into specific projects. We are also in the full swing of the national presidential campaign.

Book Reviews  
Anne S. Hatchen, EdD, RD, CACH, NCACH  
Dietetics professionals will find this book a valuable resource from a number of viewpoints. The author is a professional chef who wrote the book to assist recovering alcoholics who, like herself, wanted to eat well while maintaining sobriety. In addition to providing some excellent recipes, she discusses nutritional values, choosing, storing and preparing foods. She cites references including a Journal of the American Dietetic Association article about use of alcohol in cooked foods. Information about alcoholism, the stages of recovery and stages of recovery are included along with recommended dietary changes for each stage are included in this valuable reference. Even a person not in recovery might want to add this cookbook to their personal library.

The use of nutrients to treat various health conditions including substance abuse is proliferating. Often the amounts recommended exceed the amount that might be deemed safe by dietitians and physicians. Dietetic professionals who are concerned about this trend will find this publication a valuable resource. The author's goal was "to provide clinicians and consumers with a practical evidence-based reference to the rapidly expanding field of micronutrient nutrition." Jane Higdon, who holds a PhD in nutrition and biochemistry, is well qualified to evaluate this book. She discusses the importance of different nutrients, and the amounts required. The book summarizes its contents rather well: "How to Sharpen your mind, improve your physical performance and achieve your goals - the healthy way." The author describes the appropriate and inappropriate use of coffee to help users focus attention and accomplish their goals. Coffee is a universal stimulant and comparisons are made with prohibited substances. The authors describe the impact of caffeine on sleep, jet lag, weight loss and even on meditation. In the chapter on health effects, they describe the impact on various conditions including hypertension, osteoporosis, asthma, alcoholism, diabetes and pregnancy. Professionals and substance abuse counselors will find this book to be an interesting read and a guide when counseling clients.

Welcome New DDPI Members!  
Cynthia D. Linneman  
Kern L. Randell  
Kathy M. Russell  
Barbara A. Ryan  
Audy M. Ryes  
Rosemarie Salerno  
Helen A. Sandler  
Krista M. Scharer  
Amy L. Schuster  
Stu J. Scott  
Cathryn E. Scott  
Mary Kay Slidmore  
Melcor M. Smith  
Sandra S. Whittaker  
Jennifer L. Snyder  
Kacy L. Snyder  
Elizabeth A. Stokel  
Karen D. Spaulding  
Debra M. Spence  
Frances A. Spikle  
Manisha Srivastava  
Susan S. Stix  
Linda Stephens  
Debra K. Sullivan  
Anne K. Takey  
Patricia A. Tales  
Carolyne Tepper-Sirol  
Venant V. Thonson  
Alyce M. Thomas  
Sarah A. Thompson  
Donna L. Trousdale  
Julie A. Truax  
Catherine T. Tuttle  
Ms. Carolina A. Van Stone  
Linda L. Vennin  
April Rock, Vanichko  
Monique Vanghe  
Elizabeth S. Wade  
Tarri L. Walsch  
Linda L. Walker  
Kathryn C. Wall  
Lindsey R. Watson  
Allysa W. Weitzen  
Meghan M. Weisheit  
Sandra S. Whittaker  
Laurice Wong  
Toni L. Wood  
Stacie J. Westhus  
Sandra S. Whittington  
Laurice Wong  
Toni L. Wood  
Stacie J. Westhus  
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Sandra S. Whittington  
Laurice Wong  
Toni L. Wood  
Stacie J. Westhus  
Sandra S. Whittington.
The staff and the residents are supporting local farmers and are learning more about how to prepare fresh local vegetables throughout the growing season. It's been a great opportunity for everyone involved!

This year at Jefferson Rehabilitation Center in Watertown, New York we did something new. Twenty of our group homes bought * shares in our local Community Supported Agriculture (CSA) program. I have been in touch with the CSA coordinator to know ahead of time what produce will be included each week and have sent appropriate suggestions and recipes to the participating houses weekly.

### Questions and Answers from the Resource Professional: Eating Disorders and Addictions

Panel of experts: Lena Sheffield, MSEd, CAP, Clinical Outreach Coordinator for The Renfrew Center; and Kaylene Warner, LMSW, Eating Disorders Program Coordinator, and Howard Miller, MD, attending psychiatrist, both with Santé Center for Healing in Argyle, Texas.

**Q:** Who do patients so often struggle with both eating disorders and addictions?

**A:** According to Miller, the same developmental issues that lead to eating disorders make our patients susceptible to "addiction problems in more than one sphere... to bind anxiety, to escape from the world... They make our patients susceptible to addiction problems in more than one sphere... to bind anxiety, to escape from the world..."

**Q:** How can dietetics professionals help patients who don't want to address their eating disorder?

**A:** The experts agree that the response should be individualized to each patient. Miller suggests a treatment team approach. "Emphasize [to the patient] that while the eating disorder is always present, and it's more challenging to teach self-regulation rather than abstinence." The tendency for eating disorders to start earlier than other addictions may also be part of the reason they last longer; food is usually the first substance to be abused because it is the only mood-altering chemical available to most children.

### RESOURCES PROFESSIONAL

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• indicates voting Executive Panel member
Lee S. Wallace MS, RD, LDN, FADA - Chair-Elect

1. Coordinator (and RD) for the Physical Nutritional Management Team at Orange Grove Center
2. I work in the same office with peers in other professions (PT, OT, SLP, RN, & Behavior Specialist) and we have fun, fun fun, while getting phenomenal amounts of work done!
3. Hmmm. How to take multiple choice tests? Nope... How to make a grilled cheese sandwich with an iron? Still no... How to make $100 buy two weeks food? Nope... That you don't have to finish first to still be good? Maybe... That being prepared and doing your best can get you through a lot? Maybe... That nothing is ever simple? Nothing! Ever!... Hmmm... well, one of the above, anyway.
4. Pure luck - I needed a full-time job and came to apply for a position as a clinical diettian. And loved it! I've been doing this over 16 years now.
5. I have met and learned from other RD's practicing in related areas - being able to go to meetings and actually meet and network with them has been wonderful!
6. I have just been to Alaska and have been way off the grid!!

Susan S. Zabriskie RD, MS (Past Chair) - Nominating Committee Chair

1. I'm a consultant to a private non-profit agency serving developmentally disabled children and adults — group homes, sheltered workshop and day treatment
2. It offers a lot of variety of nutrition and food activity, and it's fun!
3. In college -- the ability to research an issue until you find
4. Practical job opportunities.
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5. There is only one FTE for my position and I feel DDPD has allowed me to access peers to ponder questions and gain information I need to care for my patients.
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- Encourage members to use the mentoring toolkit.
- Increase the visibility of the committee and highlight the mentoring toolkit by obtaining a booth at the DPPD and Networking Group Showcase at FNCE.
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- The Diversity Committee has awarded the Diversity Action Award of $1,000 to the National Organization of Blacks in Dietetics & Nutrition in care of Sarah M. Wilder, PhD, RD, LD for the intern mentoring program by the Texas Chapter of AODIB.

For more information, please contact the Diversity Committee Staff Partner, Genny Trinko at 800/877-1600 x4734 or gtrinko@eatright.org

Diversity Committee Members:
- Chair: Paul A. Cotton, PhD, RD
- Chair-elect: Suzanne M. Leson, MS, RD, LD
- Geetha Krishnan, MS, MA, RD
- Claudia Gonzalez, MS, RD, LDN
- Kyle Shady, CCC, MS, RD
- Younghee Kim, PhD, RD

Diversity Committee Chair: Paul A. Cotton, PhD, RD
Diversity Committee Secretary/Treasurer: Cherry Chanley MS, RD, LDN
DDPD Newsletter Editor: Melissa Alfman-Tea RB, MS, RD, LDN
Diversity Committee Newsletter Chair: Lillian L. Reyes-Gates MS, RD, LDN
Diversity Committee Newsletter Staff Partner, Genny Trinko at 800/877-1600 x4734 or gtrinko@eatright.org

ForMyDiet.com: helping people with metabolic disorder success in their diets better.

ForMyDiet.com is a new website designed to make living with and managing a metabolic disorder diet a whole lot easier!

ForMyDiet currently features many informative and useful tools, such as an informative center with medical information about specific disorders, message boards with a range of forums that fit different interests, and online food and nutrient calculations that allows for searching, sorting, and retrieval of disorder-specific nutritional values.

ForMyDiet is currently working on a metabolic disorders diet management application that will be available through its website, and will provide patients with tools to secure, track dietary intake, medication, medical formula, blood levels, and more. The application will allow for added accuracy, and will eliminate many of the tedious management tasks that individuals with chronic disorders need to complete each and every day.

To assist to patient tools, the ForMyDiet diet management application will include healthcare professional tools that will give healthcare professionals the ability to monitor their patient’s diet more closely, and allow for increased patient—professional communication. In addition, healthcare professionals will have visual representation of their patient’s data and will be able to aggregate data by professional or clinic.

The ForMyDiet online diet management application will be available in the fall of 2004, and will be presented during the ADA Food and Nutrition Conference and Exposition at the Districts in Developmental and Psychiatric Disorders practice group member breakfast meeting in Anaheim on October 5, 2004.

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2. I enjoy review of literature searches and reading credible research articles. I get to share findings with providers in the state of Texas.
3. I am quite lucky that my mother and oldest sister were librari-
s and personal struggles with eating issues, although I didn't realize it at the time.
4. The desire to make a difference in someone's quality of life, and personal struggles with eating issues, although I didn't realize it at the time.
5. I am new to the group but have enjoyed interacting with like-
"minded dietitians from all over the country, and looking for-
w ard to meeting even more!
6. We moved last year and are really loving exploring this area. There are still a few farms on our street and we had a warren of baby bunnies on our lawn this spring. (And yes, I did see turkeys trotting nearby too.)
Call For Nominations
Nominations are being accepted for the DDPD Dietetic Practice Group positions for Chair Elect and for Nominating Committee.

The Chair Elect-activity member of the DDPD Dietetic Practice Group. Demonstrates leadership in district, state, and/or national organizational units of the American Dietetic Association.

Serves a one year term of office which begins June 1, 2005, following election, and then assumes position of Chair at the end of that year, serving until May 31, 2007.

Nominating Committee - composed of three active members of the DDPD Dietetic Practice Group and the Past Chair as an ex-officio, non-voting member. The member receiving the highest number of votes shall serve as Chair of the Committee. Serve a one-year term of office following the election beginning June 1, 2005, and ending May 31, 2006.

For more information and to receive a detailed job description of the positions, please contact Rosalind M. Wilkins, Chair, DDPD Nominating Committee.

E-mail: wromywil@aol.com
Telephone: 573-636-5028

Legislative Article
FTC encourages use of truthful, non-misleading health claims
A Federal Trade Commission (FTC) staff report to the Food and Drug Administration (FDA) claims that additional truthful, non-misleading health claims on more foods would help consumers make informed dietary choices. FTC called on FDA to develop a nutrient content standard for the terms “low carb” and “net carb”, which are already appearing on hundreds of food package labels and, according to FDA, are leading to consumer confusion.

The recommendation to issue a proposed rule on carbohydrate content claims on food package labels came from the FDA Obesity Working Group (OWG), which released the report, “Calories Count”, in March. Carbohydrate content is just one of several areas of the food label the OWG believes needs revision and further consideration.

CMS Proposes 2005 Medicare Fee Schedule Increase
The Centers for Medicare and Medicaid Services (CMS) has proposed an across-the-board 1.5% percent increase in payment rates for physician's services provided to Medicare beneficiaries, as mandated by last year's congressional action on the prescription drug bill. Because registered dietitian rates are based on the physician fee schedule, they will see their hourly rate for Medicare MNT climb about $2 for an hour's service. Medicare RDs are paid 85 percent of the amount listed in the physician fee schedule for MNT services. Medicare RD providers can expect payment of approximately $64 for 60 minutes of MNT. For a 60-minute group MNT session, the 2005 adjusted national average rate is $12.66 per beneficiary who attends the group.

USDA Awards $4 Million in a Nutrition Training Grant
Agriculture Secretary Ann M. Veneman announced a Healthier US Schools Initiative along with the recipients of TeamNutrition training grants totaling $4. million. The grants are intended to help state agencies improve children's lifelong eating and physical activity habits. The Healthier US schools Initiative challenges schools to continue to improve the school nutrition environment. Team Nutrition provides schools with nutrition education materials for children and families, technical assistance materials for school food service directors, managers and staff, and materials to build school and community support for healthy eating and physical activity.

Child Nutrition Act Reauthorization
The Child Nutrition Act reauthorization was passed by the Congress. The most important provision of this bill was a local wellness policy that requires every school district to develop its own wellness policy.

ADA Submits Comments to USDA on Food Stamp Nutrition Education Framework
The United States Department of Agriculture (USDA) is considering a new framework for the Food Stamp Nutrition Education (FSNE) program that identifies mothers with children as the primary target audience for education and requires agencies and providers to focus education efforts on food stamp recipients and applications.

The current framework allows for education efforts to target a broader population including the 50 percent of recipients who are children or elderly and ill people at up to 185 percent of the poverty level regardless of the food stamp application status. Many nutrition educators are concerned that the new framework will leave vulnerable populations without access to nutrition education. ADA submitted comments to USDA encouraging them to:

- Allow localities to identify their target audiences based on the needs of their communities.
- Allow localities to tailor education courses and techniques to what is effective among their identified target populations.
- Support local FSNE programs in evaluating the effectiveness of FSNE, growing the body of nutrition education research and replicating best practices among programs.

USDA Calls for Comments on Food Guide Pyramid
The USDA is seeking to revise their Food Guidance System - best known for its Food Guide Pyramid - in conjunction with the Dietary Guidelines for Americans revisions due out in 2005. Although most people are familiar with the Food Guide Pyramid, few follow its recommendations in their entirety. The purpose for developing new consumer presentations and materials is to help motivate consumers to put the food intake patterns into practice in order to improve their food choices.

Carbohydrates Content Guide Expected Later This Year
A proposed rule to provide guidance to manufacturers regarding nutrient content claims related to the carbohydrate content of foods will be published later this fall, according to the FDA Acting Commissioner Lester Crawford. This rule is to develop definitions for the terms “low carb” and “net carb”, which are already appearing on hundreds of food package labels and, according to FDA, are leading to consumer confusion.

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Plan now for future Food & Nutrition Conferences!

2005 - St. Louis, Mo., October 22-25
2006 - Honolulu, Hawaii, September 16-19
2007 - Philadelphia, Pa., September 29 - October 2

Enroll now at www.netcon.org
Deadline for early bird registration is August 15, 2004.
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**DevelopMental Issues**

4. The desire to make a difference in someone’s quality of life, and personal struggles with eating issues, although I didn’t realize it at the time.

5. I am new to the group but have enjoyed interacting with like-minded dietitians from all over the country, and looking forward to meeting even more!

6. I was my college’s first female mascot, the Penn Quaker!

Cherry Chanley MS, RD, CD, DDPD Secretary/Treasurer

1. My favorite thing about my DDPD position is networking with other professionals in this area of dietetics.

2. The thing I learned in college that I feel is most valuable today is good counseling skills.

3. The thing that brought me to practice in this area of dietetics was other Dietitians that I know who practice in this area.

4. I feel the greatest benefits of belonging to this practice group is the chance to network with other professionals in this area, great newsletters which help you gain knowledge and keep you up to date, and the friendships that you make through the practice group.

5. I also am active in my state (Indiana) dietetic association serving as Historian. I am a Consulting Dietitian consulting to GroupHomes for MR/DD clients, Long-Term Care facilities, Assisted Living Facilities, and small hospitals.

6. I was my college’s first female mascot, the Penn Quaker!

Lillian L. Reyes-Gates MS, RD, LD - Membership Chair

1. Nutrition Quality Monitor -- I promote nutrition best practices in long term care facilities. I work for a state agency, but I don’t do regulatory work.

2. I enjoy review of literature searches and reading credible research articles. I get to share findings with providers in the state of Texas.

3. I am quite lucky that my mother and oldest sister were librarians. I was quite shocked in college when I found out that I had superior lit review and research skills more than my other classmates.

4. One of my first part-time jobs as a college sophomore was working with developmentally delayed children. I became a Qualified Mental Retardation Professional as a result of that experience. I initiated food preparation activities for the school aged children.

5. From my vocation assessment in high school, I had strength in math and in science, and the area of dietetics flagged. Since my mother was a Civil Service hospital librarian, I was introduced to a hospital dietitian when I was in high school.

6. I have many smart colleagues in the field, and I learned from them. As Membership Chair for DDPD, I am making more new friends.
Executive Committee Introduction
Welcome to returning and new members of our executive committee for 2004 - 2005!

Introductory questions:
1. What is your current job?
2. What is your favorite thing about your position?
3. What did you learn in college that you find is the most valuable today?
4. What brought you to practice in this area of dietetics?
5. How have you benefited from being active in this dietetics group?
6. Tell us something we didn’t know about you.

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5. I have met and learned from other RD's practicing in related areas - being able to go to meetings and actually meet and network with them has been wonderful!
6. I have just been to Alaska and have been way off the grid!

Member Welcome Booklet on an annual basis
For additional information on MVC activities please contact Mary Jawgiel, Membership, at 312-899-4863 or mjawgiel@eatright.org

MNT
ADA is working to draft a bill to implement the recommendations of the Centers for Medicare and Medicaid Services to expand the benefit to include hypertension and dyslipidemia. The new ADA bill will be introduced in January 2009. In the meantime, ADA is monitoring the regulatory process as CMS implements the MVC provisions contained in the new Medicare law passed last December.

Other Legislation
There are a number of bills pending in Congress that deal with obesity.
However, it does not appear that any of these measures will pass the Congress this year.
There has been some discussion in Congress about passing a reauthorization bill for the Nutrition Monitoring Act. However, that seems unlikely to occur until at least next year.

Medicare Redefines Obesity so Coverage May Expand
In a major turnaround of public policy, the Centers for Medicare and Medicaid Services (CMS) are removing barriers that have impeded coverage of anti-obesity treatments. By simply striking a 40-year-old reference that said obesity was not an illness, the decision opens the door for treatments where scientific and medical evidence demonstrates their effectiveness in improving health outcomes.

The change, announced by Secretary of Health and Human Services Tommy Thompson, could open Medicare to cover surgery, as well as diet and exercise management programs, but not weight loss drugs. Actual coverage determinations will be based on medical science showing whether treatment modes reduce complications and improve quality of life.

Medicare officials said the action doesn't actually open the door for any specific treatment, but where the scientific evidence shows effectiveness, interventions may be available for Medicare beneficiaries. Because private insurance companies often follow Medicare's lead, the decision is expected to put new pressures on health plans to expand coverage for weight loss treatments. ADA has long called for designating obesity as a disease, so that coverage for services could be available.
Questions and Answers from the Resource Professional: Eating Disorders and Addictions

Panel of experts: Lena Sheffield, MSEd, CAP, Clinical Outreach Coordinator for the Renfrew Center; and Kaylene Warner, LMSW, Eating Disorders Program Coordinator, and Howard Miller, MD, attending psychiatrist, both with Santé Center for Healing in Argyle, Texas.

Q: Why do patients so often struggle with both eating disorders and addictions?

A: According to Miller, the same developmental issues that lead to eating disorders make our patients susceptible to “addiction problems in more than one sphere... to bind anxiety, to cope with increasing stress levels; to relieve pain, to control, and to substitute for relation- ships.” Sheffield observes that when eating disorders stop “working,” they become additional stressors, rather than the coping mechanisms they once were. This may prompt the use of external chemicals or behaviors to cope with increased stress levels; to relieve pain, provide false sense of energy, or bolster a body that is no longer physically well; and to help substitute for eating disordered behaviors that have become difficult to maintain. And Warner reminds us that “eating disorders are addictions.”

Q: How can dietetics professionals help patients who don’t want to address their eating disorder?

A: The experts agree that the response should be individualized to each patient. Miller suggests a treatment team approach. “Emphasize [to the patient] that while the eating disorder is usually made to each patient. Miller suggests a treatment team approach. “Emphasize [to the patient] that while the eating disorder is usually made to improve self-regulation rather than abstinence.” The tendency for eating disorders to start earlier than other addictions may also be part of the reason they last longer; food is usually the first substance to be abused because it is the only mood-altering chemical available to most children.
I live in New England where fall is really a very special season of the brilliant reds and oranges. It is a great time of focusing our energies into specific projects. We are also in the full swing of the national presidential campaign.

Book Reviews
Anne S. Hatchen, EdD, RD, CACIII, NCACII

Dietetics professionals will find this book a valuable resource from a number of viewpoints. The author is a professional chef who wrote the book to assist recovering alcoholics who, like herself, wanted to eat well while maintaining sobriety. In addition to providing some excellent recipes, she discusses nutritional values, choosing, storing and preparing foods. She cites references including a Journal of the American Dietetic Association article about retention of alcohol in cooked foods. Information about alcoholism, the stages of recovery and the stages of recovery are included along with recommended dietary changes for each stage are included in this valuable reference.


The subtitle of this book summarizes its contents rather well: “How to sharpen your mind, improve your physical performance and achieve your goals – the healthy way.” The authors discuss the appropriate and inappropriate use of caffeine to help users focus attention and accomplish their goals. Use of caffeine by professional athletes is included and comparisons are made with prohibited substances. The authors describe the impact of caffeine on sleep, jet lag, weight loss and even on meditation. In the chapter on health effects, they describe the impact on various conditions including hypertension, osteoporosis, asthma, alcoholism, diabetes and pregnancy. Dietetics Professionals and substance abuse counselors will find this book to be interesting reading and a guide when counseling clients.


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The use of nutrients to treat various health conditions including substance abuse is proliferating. Often the amounts recommended exceed the amount that might be deemed more effective by nutrition professionals who are concerned about this trend will find this publication a valuable resource. The author’s goal is “to provide clinicians and consumers with a practical evidence-based reference to the rapidly expanding field of micronutrient nutrition.” Jane Higdon, who holds a PhD in nutrition and biochemistry, is well qualified to evaluate medical and nutritional literature. She discusses nutritional needs at various stages of life and focuses on optimal micronutrient intake. Each nutrient is discussed from the standpoint of function, recommended intake, deficiency symptoms, use in disease prevention and treatment, sources and safety (toxicity and medication interactions). The sections on toxicity are of particular value due to the possible benefits that nutrients can be used in unlimited amounts with no concern about side effects. This book is recommended as a reference for dietitians and dietetic students.

How to Defeat Alcoholism by Joseph D. Bragdon, MD. 1989

Available from www.addictionend.com

Dr. Bragdon has written a number of books about substance abuse in which he lives in New England where fall is really a very special season of the brilliant reds and oranges. It is a great time of focusing our energies into specific projects. We are also in the full swing of the national presidential campaign.

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Food, Brain Chemistry and Behavior by Jeffrey L. Fortuna, Dr. PH. Published by Pearson Custom Publishing, 1998.

In this book, Dr. Fortuna provides a basic description of nutrition, brain chemistry and the nutrients that impact brain function. His recommendations are familiar to dietetics professionals and reflect much of what we advocate as we work with clients. For the client who is interested in learning and is not looking for the magic seven step program that will reverse the damage done by substance abuse, this book is a good resource.

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DDPD EML and Web site

Are you part of the DDPD EML?

DDPD started an EML (electronic mailing list, or listserv) for members only. Don’t miss out on this opportunity to network, ask questions, and keep in touch with your peers. To join: send an email message to imailsrv@ddpd.org with the following in the body of the message (remove the <> brackets): subscribe ddpdlist <Your Full Name>

If you’re a member of the electronic mailing list and want to send a message, address your message to ddpdlist@ddpd.org

DDPD Web site member log-in reminder: To log into the DDPD member-only areas of our Web site, type “ddpd” in the first prompt box and “ddpd_visitor” in the second box. Leave out the quotation marks, and make sure the letters are all lower case. If you have questions, contact DDPD Web Chair Lynn Grieger at lgrieger@adelphia.net

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If you’re a member of the electronic mailing list and want to send a message, address your message to ddpdlist@ddpd.org

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Support Services
Resource professionals fielded inquiries from a number of members and our lending library continues to be a well-used source of audiovisual materials

Leadership Training
Chair Susan Zabriski and Chair-Elect Mary Emerson attended the ADA Leadership Institute in Tucson, Arizona.

Future Deadlines
Spring . . . . February 15, 2005

Please forward Information To:
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Subscription cost for non-members is $25.00. A check or money order should be made payable to ADA/DDPD and sent in care of the newsletter editor.

2003-2004 ANNUAL REPORT

This year we continued to update our member communications. We have provided members with the latest information in our field and have disseminated our knowledge to colleagues and the public.

Our efforts continue to improve the lives and health of individuals with developmental disabilities and psychiatric disorders.

Program of Work Outcomes

Publications
Our newsletter, DevelopMental Issues, is published quarterly (Winter, Spring, Summer, Fall) as a publication of Dietetics in Developmental and Psychiatric Disorders, a dietary practice group of the American Dietetic Association.

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