I absolutely support Mats Olin's 28 August 2024 article on the poor media reporting of Region Stockholm's astonishing decision - to eliminate treatment support for Mando Clinic - and thereby to embrace the discredited psychiatric practices that have failed eating disorder patients for decades.

I understand the difference involved. I have helped extremely-ill Australian women for over 20 years to access Mando's life-saving treatment. Stockholm eating disorder sufferers will now (effectively) be forced to endure failed conventional psychiatric treatment without choice, and have no effective alternative if their condition is life-threatening.

While the psychiatric clinics have not published the outcomes of their treatment in Sweden, the Mando Clinics have published their outcomes, and comparison of the data reported in the Swedish National Quality Registry for Eating Disorders Treatment shows that outcomes are better at the Mando Clinics [1]. And better results if compared with international publications of the outcomes of psychiatric care [2]. Because of the better outcomes, 3.5 million SEK are saved for each patients successfully treated at the Mando Clinics [3]. These are significant points for public health decision-making. [4]

Moreover, Mando's treatment approach is founded on Karolinska research and is based on a realistic neuroscience framework, typically absent from standard psychiatric approaches [5].

Sweden's media must act, and many questions still must be addressed.

- Why is it in a humane and careful society such as Sweden that the country's media is unable to see that a terrible decision has been made? Why haven't they explored the absence of an evidential basis for the Region's decision (see above)?
- Other than just 'taking as gospel truths' from the people representing professional groups who would benefit professionally and financially from Mando's elimination – where is the solid objective decision base - the demonstrated superiority of psychiatric treatment effectiveness over Mando that would justify – given that lives are at stake – this significant change after Mando's 30 years of beneficial treatment?
- The Swedish media must have adverted to something being wrong here. But they haven't. So why haven't they done anything? Or why have their investigations been so shallow when the media surely must be humane and caring? We know that eating disorders are at epidemic levels so why is historic psychiatric treatment immune from investigation when conventional treatment has been the devoted but ineffective handmaiden of the eating disorders epidemic for decades?
- To what extent has 'media backgrounding' intervened to influence journalists to quietly protect those who benefit from this hijacking of public policy?
- Why haven't journalists turned the spotlight on to Region Stockholm's withholding of payments and their aggressive employment of court "lawfare" to undermine Mando financially? Is the regime's aggressive approach actually legitimate – or downright nasty?
- Why can't journalists think and act based on an honest answer this question: if their own daughters were diabolically ill, would they be content to be forced to endure conventional failed treatment, or would they want to choose the alternative proven route of Mando for their daughter?

These are real and serious questions.

I believe that Mando represents the very best of what modern Sweden offers - in terms of science, humanity, advancement and innovation. It is youth-focussed and it addresses a key health issue. The Mando clinic's achievements - based on years of Karolinska research, hard work, brilliant insights, dedication, integrity, kindness and fortitude - are an amazing reflection on Sweden.

Region Stockholm's regime and its insurgent health administrators should be held to strict account. It is diabolical that they are undermining the health of Swedish girls and young women, and their prospects for a better life.

Journalists of Stockholm - and Region Stockholm - wake up!

- 1 Södersten P, Brodin U, Sjöberg J, et al. Treatment outcomes for eating disorders in Sweden: data from the national quality registry. *BMJ Open*. 2019;9:e024179. doi: 10.1136/bmjopen-2018-024179
- 2 Södersten P, Bergh C, Leon M, *et al.* Cognitive behavior therapy for eating disorders versus normalization of eating behavior. *Physiol Behav.* 2017;174:178–90. doi: 10.1016/j.physbeh.2017.03.016
- 3 Södersten P, Brodin U, Bergh C. Economic Evaluation of State Control, Low Price, and Research-Based Policy for Eating Disorders Treatment in Sweden. 2023;2023.05.30.23290679.
- 4 The results of the treatment of very ill Australian patients were published in the Medical Journal of Australia. Court J, Bergh CEK, Södersten P. Mandometer treatment of Australian patients with eating disorders. *Medical Journal of Australia*. 2008;188:120–1. doi: 10.5694/j.1326-5377.2008.tb01539.x
- 5 Södersten P, Brodin U, Zandian M, et al. Verifying Feighner's Hypothesis; Anorexia Nervosa Is Not a Psychiatric Disorder. *Front Psychol*. 2019;10:2110. doi: 10.3389/fpsyg.2019.02110

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The Effective Treatment of Eating Disorders Foundation is based in Australia and looks to assist the (many) people from this country – typically girls and young women and their families – to identify effective treatment for eating disorders. Like in Sweden, the traditional Australian approach to treatment of eating disorders is psychiatric-based. That is also subsidised by the Australian medical system and despite this, like Sweden, eating disorders remain extremely widespread. Evidently the system does not work. The people we assist and their families are typically in great distress as they keep being sent back into conventional treatment – year after year - into a system that does not provide an outcome. It is like a macabre revolving door. It is a huge problem. People and their families live their lives in complete misery, or the sufferer dies. Marriages and families collapse.

Our Foundation is open to assist sufferers find and obtain effective treatment. We look at the real-world outcomes as well as published material, and we don't hesitate to ask why many opinions or research don't seem to reflect what's been happening in the real-world for decades. We have supported a number of severely-ill girls and young women to obtain treatment by Mando and live full, independent, happy and productive lives afterwards. We don't just support Mando: if we found another treatment that worked, we'd support it. However, we've found that Mando is the only alternative that is effective.