Outpatient Identification and Medical Management of Eating Disorders

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Learning Objectives

- Identify Common Presentations of Eating Disorders in Adolescents
- Recognize need for hospitalization in patients with an Eating Disorder
- Develop a strategy for medically monitoring and treating common Eating Disorders
- Develop strategy for coordinating care in multi-disciplinary team in Eating Disorder management

Identifying Eating Disorders

Scope, DSM-5, Clinical Scenarios
The Scope of the Problem

7 million women, 1 million men
86% Diagnosed before and during Adolescence
Groups we miss: males, younger kids, prior/current overweight, minorities, athletes

9 Truths about Eating Disorders

Nine Truths about Eating Disorders

Truth #1: Many people with eating disorders look healthy, yet may be extremely ill.
Truth #2: Families are not to blame, and can be the patients’ and providers’ best allies in treatment.
Truth #3: An eating disorder diagnosis is a health crisis that disrupts personal and family functioning.
Truth #4: Eating disorders are not choices, but serious biologically influenced illnesses.
Truth #5: Eating disorders affect people of all genders, ages, races, ethnicities, body shapes and weights, sexual orientations, and socioeconomic statuses.
Truth #6: Eating disorders carry an increased risk for both suicide and medical complications.
Truth #7: Genes and environment play important roles in the development of eating disorders.
Truth #8: Genes alone do not predict who will develop eating disorders.
Truth #9: Full recovery from an eating disorder is possible. Early detection and intervention are important.
ANOREXIA NERVOSA DSM 5

- Restricting type x 3 months
- Binge Eating -Purging type x 3 months
- Refusal to maintain healthy weight >85% of IBW
- Distorted body image or refusal to see seriousness of current low weight
- Intense fear of gaining weight or behaviors that sabotage weight gain

BULIMIA NERVOSA

- Recurrent episodes of binge eating (eating in a discrete time large amounts of food with a sense of lack of control during the episodes)
- Recurrent inappropriate compensatory behavior to prevent wt gain (self-induced vomiting, laxatives, diuretics, enemas, fasting or excessive exercise)
**BULIMIA NERVOSA**

- The binge eating and compensatory behaviors occur **at least once a week for 3 months**
- Self-evaluation is unduly influenced by body shape and weight
- The disturbance **does not** occur exclusively during episodes of **anorexia nervosa**

**BINGE EATING DISORDER**

- Recurrent episodes of binge eating
- Marked **distress** regarding binge eating
- The binge eating occurs, **at least once a week for three months**
- The binge eating is **not** associated with the recurrent use of inappropriate compensatory behavior
Avoidant Restrictive Food Intake Disorder (ARFID)

- Eating or feeding disturbance
  - Lack of interest in eating/food
  - Sensory avoidance
  - Concerns about adverse consequences of eating
- Resulting in
  - Significant weight loss or failure to grow appropriately
  - Nutritional deficiency
  - Dependence on enteral feeds or supplements
  - Interference with psychosocial functioning

Other Specified Feeding or Eating Disorder (OSFED)

- Atypical Anorexia
  - Significant weight loss
  - Normal weight
- BN or BED of low frequency or limited duration
- Purging Disorder
- Night Eating Syndrome
AN criteria except for weight; often prior overweight
Just as serious as full-threshold AN
- Physiologically
  - Equally low heart rates
- Hormonally
  - Equal incidence amenorrhea
- Psychiatrically
  - Equally impaired to AN

‘Atypical’ AN

- 16 year old female presents to General Pediatrics for annual exam
- 40lb weight loss since you saw her last 1 year ago
- HR 47, BP 81/45, RR12, T 97.5F, BMI 15
- Hx: strong desire to lose weight, training for sports 4-5 hours per day, restricting to 300-400kcal per day, no purging, all started about 9-10 months ago.

How do you respond?

- 15 year old male presents to GI due to recurrent hematemasis for 3-4 months
- Overweight with BMI 28
- Reports losing control around food and eating so much he has to make himself throw-up 2-3x every day
- He describes subjective palpitations as well
- You check electrolytes and he has a K of 3.1.
Anorexia Nervosa
- HR <50BPM daytime
- <45BPM nighttime
- SBP <90mmHg
- Orthostatic change in HR >20 (increase), BP >10 (decrease)
- Arrhythmia
- T <96F
- <75% GBW
- Body Fat < 10%
- Refusal to eat
- Failure to respond to outpatient treatment

Bulemia Nervosa
- Syncope
- Serum K <3.2
- Serum Chloride <88
- Esophageal tears
- Arrhythmia
- Hypothermia
- Suicidal ideations
- Intractable vomiting
- Hematemasis
- Failure to respond to outpatient treatment

Admission Criteria

17 year old female with restricting, excessive exercise, and malnutrition. Concern for AN...
- VS are normal
- Physical exam shows lanugo, hair loss, cool extremities, and slightly enlarged parotids, and decreased bowel sounds

How do you proceed?

Another case...
Determining Goal Body Weight

- 50th Percentile BMI
- Prior growth curves
- BMI = kg/m²
- GBW = (goal BMI)(M²)
- MOVING TARGET!

Endocrine Disorders
- Thyroid, DM, Adrenal Insufficiency…

Psychiatric Disorders
- Depression, OCD, anxiety…

Gastrointestinal Disorders
- Celiac, IBD…

Other…
- Malignancy, SMA, MALs, Prolactinomas, substance abuse, HIV…

Medical Evaluation
CBC, ESR
CMP, phosphorus, magnesium
Prealbumin, Zinc, Vitamin D, Thiamine
TFTs, Prolactin, FSH, LH, Estradiol/Testosterone
Celiac screen
ECG if bradycardia, hypokalemia
DXA if amenorrhea >6 months

LABORATORY EVALUATION

Care Coordination/Referrals

- Family Based Treatment
- Nutrition
- Psychiatry
Basics of Family Based Treatment

- Basic Principles
  - Agnostic
  - Family Central
  - Providers as advisors/consultants
- 3 Phases each ~6 mo
  - Phase 1
  - Phase 2
  - Phase 3

Predicting Caloric Needs

- Total Energy Expenditure (TEE) = Resting Energy Expenditure (REE) x Activity Factor
- WHO Equation for REE

<table>
<thead>
<tr>
<th>Boys:</th>
<th>Girls:</th>
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<tbody>
<tr>
<td>3-10 yo: 22.7(kg) + 495</td>
<td>5-9 yo: 22.5(kg) + 499</td>
</tr>
<tr>
<td>10-18 yo: 17.5(kg) + 581</td>
<td>10-18 yo: 12.2(kg) + 746</td>
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- Activity Factor
  - Healthy child: 1.3-1.5
  - Catch-up growth: 1.6-1.8
  - FBT: 12 yo: 2.5+ |
  - FBT: 12+ yo: 2.5+ | kcal/day range:
What do I do as a medical provider?

IDENTIFICATION!!!
- Start the conversation
  - Say the words “eating disorder”
- Identify need for admission
- Medical evaluation for possible medical etiologies
- Partnership with mental health and nutrition

Monitoring
- Set weight goals
- Help with caloric goals
- Monitor medical recovery
- Vital signs
- Monitor electrolytes, UA, etc.
- Weekly early on, space to monthly once improving
- Provide medical clearance regarding activities, school, camp, etc.

Resources for Providers

- The Role of the Pediatrician in Family-Based Treatment for Adolescent Eating Disorders: Opportunities and Challenges by Debra Katzman, MD, Rebecka Peebles MD, Susan Sawyer, MBBS, MD, James Lock MD, PhD, and Daniel LeGrange, PhD, J Adol Health, 2013
- Treatment Manual for Anorexia Nervosa, Second Edition: A Family-Based Approach by James Lock MD PhD, Daniel Le Grange PhD and Gerald Russell MD
- Treating Bulimia in Adolescents: A Family-Based Approach by Daniel Le Grange PhD and James Lock MD PhD
- Eating Disorders in Children and Adolescents: A Clinical Handbook by Daniel Le Grange PhD and James Lock MD PhD
Books for Parents & Providers

- Help Your Teenager Beat an Eating Disorder (James Lock & Daniel Le Grange)
- Anorexia and other eating disorders: Help Your Child Eat Well and Be Well (Eva Musby)
- Give Food a Chance (Julie O'Toole)
- Brave Girl Eating (Harriet Brown)
- Throwing Starfish Across the Sea (Laura Collins & Charlotte Bevan)
- Feeding Your Anorexic Adolescent (Clare Norton)
- My Kid is Back (June Alexander)
- Decoding Anorexia (Carrie Arnold)

Helpful Websites and Forums:

- [www.maudsleyparents.org](http://www.maudsleyparents.org)
- [www.feast-ed.org](http://www.feast-ed.org)
- [www.aroundthedinnertable.org](http://www.aroundthedinnertable.org)
- Facebook – Eating Disorder Parent Support

Videos for Families and Providers:

- [http://www.youtube.com/watch?v=JhA_CShr7tU&lr=1](http://www.youtube.com/watch?v=JhA_CShr7tU&lr=1)
- [http://vimeo.com/user543367](http://vimeo.com/user543367)
- [http://www.youtube.com/watch?v=pPsl8UUtWE&list=PLmy40N4PX61Yb46HMETFEC5Vc8vZ3V69u&index=34&feature=plpp_video](http://www.youtube.com/watch?v=pPsl8UUtWE&list=PLmy40N4PX61Yb46HMETFEC5Vc8vZ3V69u&index=34&feature=plpp_video)

Websites/Videos
THANK YOU!

{Questions??}