

*PHYSICIAN TRAINING  
SERIES*

# ADDRESSING EATING DISORDERS IN YOUR PRACTICE

# AMY'S GIFT: QC EATING DISORDERS CONSORTIUM

In April 2007, the Amy Helpenstell Foundation sponsored a community survey on eating disorders in conjunction with the Robert Young Center for Community Mental Health. This one-of-a-kind survey included interviews with 800 residents throughout the Quad-City area and covered residents' knowledge of eating disorders, perceptions of eating disorders, and suggestions for recommended treatment of eating disorders.

The survey showed our community was surprisingly accurate in their knowledge of eating disorders as they are clinically defined. However, whereas the perception of eating disorders was as a predominantly mental rather than physical disorder, over half of the respondents identified their preferred treatment site as a family doctor's office or hospital.

One of the central initiatives of Amy's Gift (formerly known as the QC Eating Disorders Consortium) then became to gauge and raise awareness at the primary reference source for treatment: the family practitioner.



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**AT LEAST EVERY 62 MINUTES  
SOMEONE DIES AS A DIRECT  
RESULT FROM SUFFERING AN  
EATING DISORDER.**

**STATISTIC: CROW, 2014**

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could you tell who has an eating disorder?





The background of the slide is a photograph of a person's feet standing on a large, circular weight scale. The scale has numbers ranging from 100 to 300. The image is dimmed and serves as a backdrop for the text.

## WHAT ARE EATING DISORDERS?

- Eating disorders – such as anorexia, bulimia, ARFID and binge eating disorder – include extreme emotions, attitudes, and behaviors surrounding weight and food issues.
- Eating disorders are brain-based, biological illnesses with a strong genetic component and psychosocial influences. They are not life-style choices.
- They often have serious consequences for health, productivity, and relationships.
- Eating disorders impact millions of people every year in the United States. Those who suffer span a wide variety of types, from elementary school aged girls to middle-aged wo/men to competitive athletes.
- Up to 10% of the population experiences eating disorders in some form.



# CONTRIBUTING FACTORS

- Genetics - 50-80% indicated
- Puberty - 40 pounds in 4 years
- Environment - weight stigmas/“thin privilege” presented in media, peers, throughout cultural exchanges
- Traumatic Experiences/PTSD
- Relationships - family, friends, authority figures
- Onset of Mental Illness - co-morbidity
- Activities where weight regulation is demanded
- Physical illness that causes weight loss
- Vegetarianism, or specific dietary restrictions due to personal choice or diagnoses





# HOW DO WE TREAT THEM?

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- Eating disorders are complicated diseases that can easily go undiscovered and often require a family practitioner to identify via screening. Your patient may need you to bring up this conversation.
- Screening tools exist for physicians to identify if their clients may be suffering from an eating disorder.
- Resistance is normal. A multidisciplinary team can help with this. Have at least one ED specific professional on the team.
- Involve family and friends for support.
- More than 1/2 of all adults eating disorders are first diagnosed by a primary care provider. (Simental, 2010)



## SCOFF SCREENING TOOL

The SCOFF Questionnaire is a five-question screening tool designed to clarify suspicion that an eating disorder might exist rather than to make a diagnosis. The questions can be delivered either verbally or in written form.

**S** – Do you make yourself Sick because you feel uncomfortably full?

**C** – Do you worry you have lost Control over how much you eat?

**O** – Have you recently lost more than One stone (6.35 kg) in a three-month period?

**F** – Do you believe yourself to be Fat when others say you are too thin?

**F** – Would you say Food dominates your life?

Answering “yes” to two or more of the following questions indicates a possible case of anorexia nervosa or bulimia nervosa.



## ESP SCREENING TOOL

- Are you satisfied with your eating patterns?  
(A “no” to this question was classified as an abnormal response).
- Do you ever eat in secret?  
(A “yes” to this and all other questions was classified as an abnormal response).
- Does your weight affect the way you feel about yourself?
- Have any members of your family suffered with an eating disorder?
- Do you currently suffer with or have you ever suffered in the past with an eating disorder?

### **Scoring:**

One or no abnormal responses to the ESP ruled out an eating disorder whereas 3 or more abnormal responses ruled one in.

# ADDITIONAL QUESTIONS & SIGNS OF EATING DISORDERS

- Have you gained a lot of weight (not due to a medical condition)?
- Do you eat large amounts of food in short periods of time when emotional?
- Body weight < 85% Ideal Body Weight?
- Amenorrhea for 3 consecutive months?
- Any bingeing and purging?
- Use of laxatives, diuretics, or diet pills?
- Abnormal vital signs (heart rate <35-40 beats/min)?
- Rapid and severe weight loss unresponsive to outpatient treatment?
- Teeth decay or xerostomia?





## WHAT ARE THE NEXT STEPS?

- The first line of defense will be a local psychologist or psychiatrist trained in Eating Disorders, who will help identify the next level of care needed for your patient.
- Wait to outline a detailed treatment plan with the family until your patient has been assessed.
- Know the local resources and become acquainted with your local consortiums and national sites which contain directories and direct access to ED treatment information.
- Require attendance with a local support group to create a strong healing community for the patient.

# LEVELS OF CARE

**Medical Stabilization - Hospital**

**Inpatient**

**Residential**

**Partial Hospitalization Program (PHP)**

**Intensive Outpatient Program (IOP)**

**Outpatient**

Access to certain levels of care comes with inherent barriers: geography, insurance, finances, personal responsibilities, client willingness/motivation





# INTERDISCIPLINARY TREATMENT TEAM

- **Therapist**
- **Dietitian**
- **Physician**
- **Psychiatrist**
- **Supervisor**

## **Support System:**

Family, friends, groups, recovery coach



# LOCAL ORGANIZATIONS



Stephanie Burrough  
Project Coordinator  
(309) 779-3077  
[www.amysgift.com](http://www.amysgift.com)



[www.edciowa.org](http://www.edciowa.org)



## NATIONAL ORGANIZATIONS

- **National Eating Disorders Association\***  
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)  
Helpline: (800) 931-2237/Office: (212) 575-6200
- **National Association for Anorexia Nervosa and Associated Disorders\***  
[www.anad.org](http://www.anad.org)  
Helpline: (630) 577-1330/Office: (630) 577-1333
- **Academy of Eating Disorders\***  
[www.aedweb.org](http://www.aedweb.org)  
Office: (847) 498-4247
- **Alliance for Eating Disorders Awareness\***  
[www.allianceforeatingdisorders.com](http://www.allianceforeatingdisorders.com)  
Office: (866) 662-1235 (toll free)
- \*provides directory of in-patient and out-patient facilities throughout U.S

## NATIONAL ORGANIZATIONS

- **Acadia Health Care Treatment Placement Specialists®**  
[www.treatmentplacementspecialists.com](http://www.treatmentplacementspecialists.com)  
QC/IA Rep: Alissa Gunderson  
QC/IL Regional Rep. Rachael Soliman
- **Project Heal**  
[www.theprojectheal.org](http://www.theprojectheal.org)  
Email: [contact@theprojectheal.org](mailto:contact@theprojectheal.org)
- **FEDUP Collective: Fighting Eating Disorders in Underrepresented Populations**  
Email: [hello@fedupcollective.org](mailto:hello@fedupcollective.org)  
[www.fedupcollective.org](http://www.fedupcollective.org)