

# Effect of brief intervention on eating disorder diagnosis at a large community hospital



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## Background

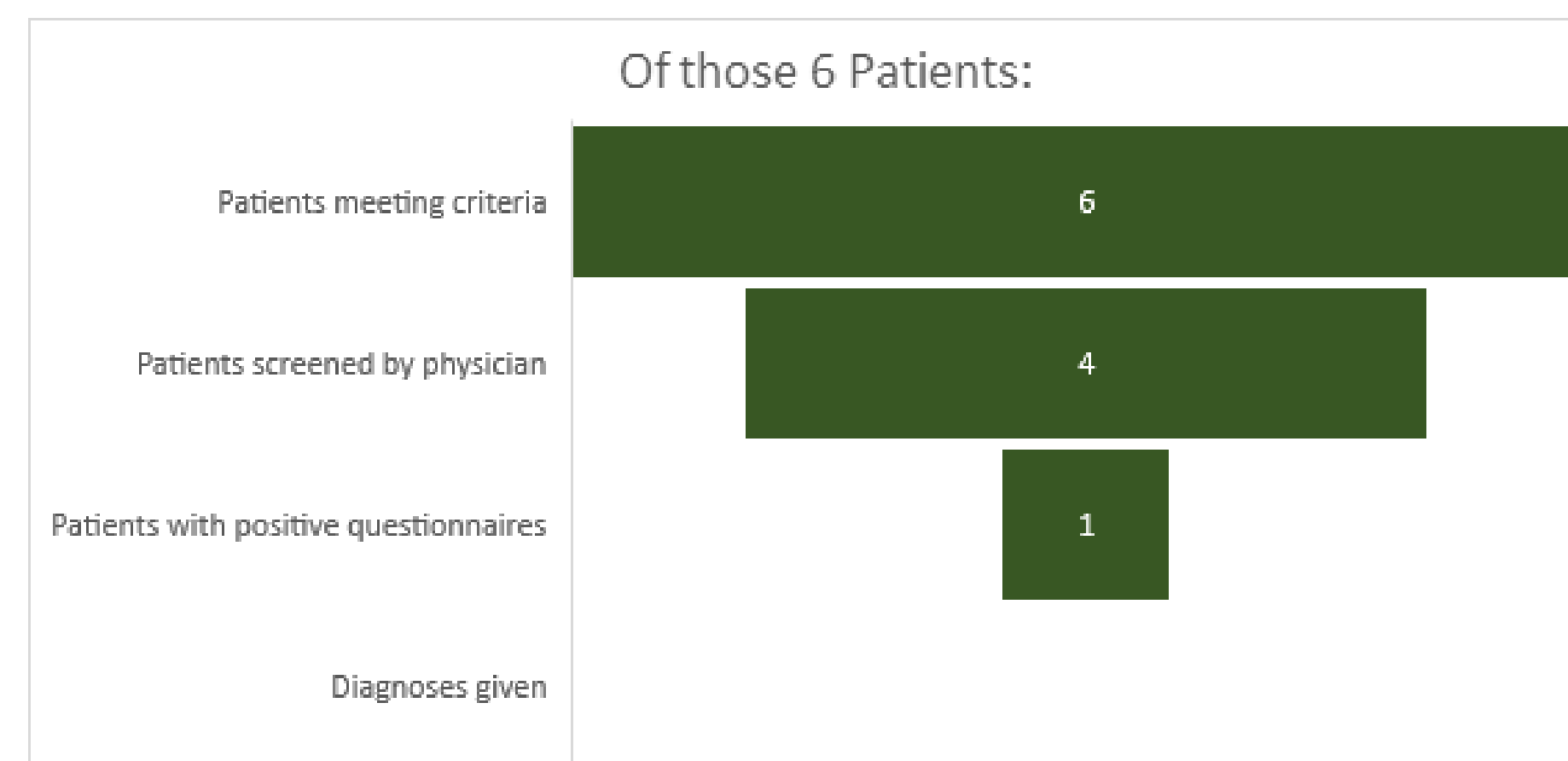
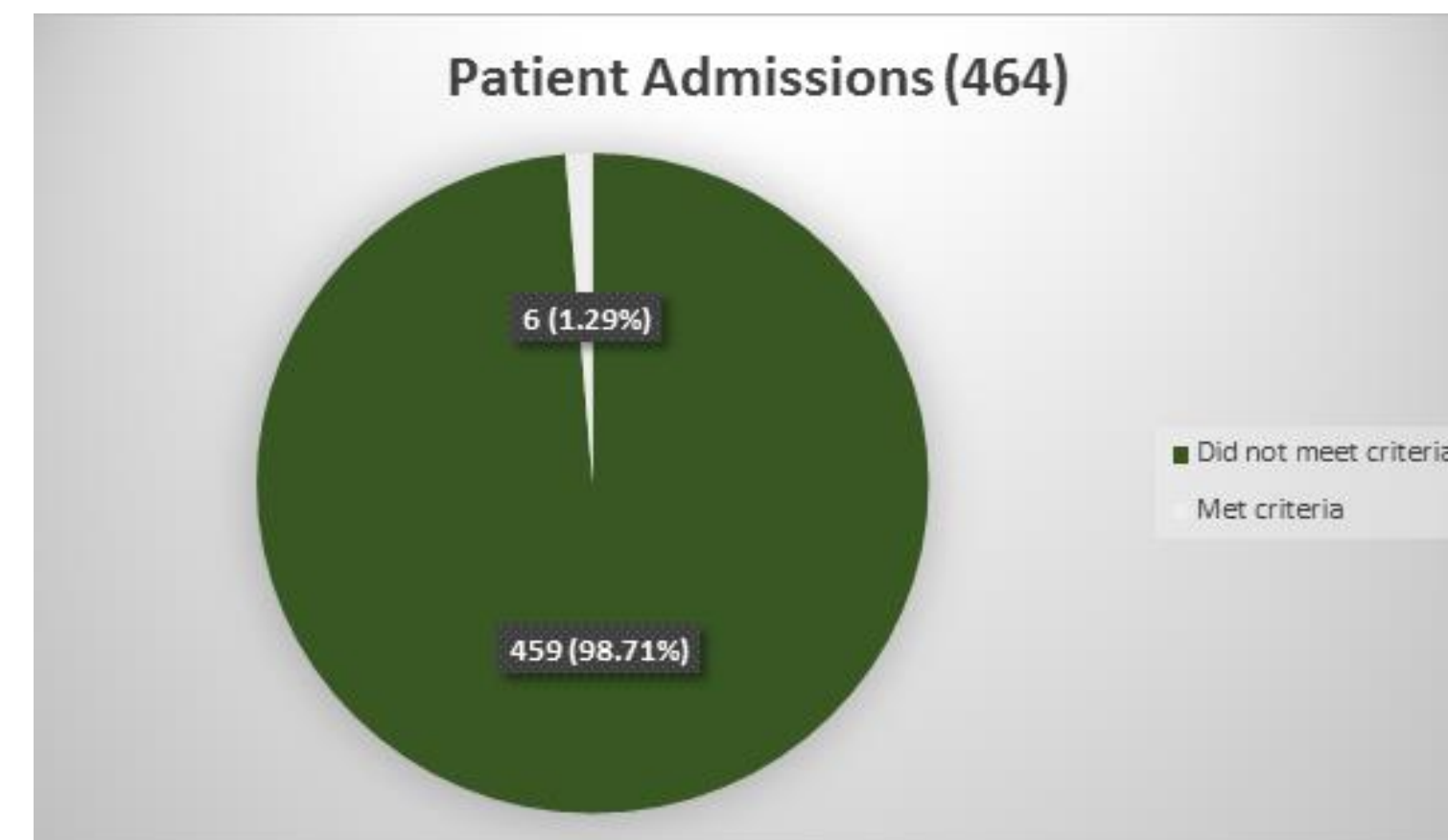
- Eating disorders (ED) arise most commonly between 15-19 years old.<sup>1,2</sup> Unfortunately, they are frequently underdiagnosed. Reasons for this are multifactorial, but one factor is stereotypes limiting screening. Some assumptions include:<sup>3</sup>
  - ED patients are only thin, white, or upper middle class.
  - ED only affects women / men are immune to body image issues.
  - Trans and queer people do not struggle with ED.
  - People develop ED because “they need attention.”
- Surveys show that nearly 75% of adolescents with ED have contact with mental health professionals.<sup>4</sup> This suggests that there are multiple avenues for early intervention and treatment.
- The purpose of this project is to increase organizational focus on ED treatment and to determine the influence a brief intervention would have on screening and diagnosis for Child and Adolescent (C&A) patients at a large free-standing mental health facility.

## Methods

- Intervention: On July 23, 2020, a 1-hour physician education intervention reviewed screening, diagnosis, and treatment options. Supplemental info about local ED resources & management was provided (See QR codes for supplement provided).
- Data Collection: Researchers compiled information using Epic Hyperspace EMR reporting function and reviewed preadmission questionnaire completed by parent and patient regarding eating behaviors.
- Analysis: Comparison between 6 months pre- and 6 months post-intervention of:
  - Number of patients meeting DSM-5 criteria for weight parameters in anorexia nervosa (patients between ages 12 - 17 with a BMI less than the 5th percentile.)<sup>4</sup>
  - Number of patients/parents who indicated symptoms on screening questions used for all teen admissions
  - Number of patients screened for ED in initial assessment.
  - Total number of ED diagnoses.

## Preliminary Results

- 6-month period prior to intervention:
  - 464 patients aged 12 – 17 years old were admitted.
  - 6 met standard criteria for ED (1.29%).
    - 1 patient indicated symptoms in preadmission questionnaire.
    - 4 had documented ED screening in the initial evaluation.
    - 0 were given a formal ED diagnosis.
    - Of note, the 1 patient who screened positively via the questionnaire was screened by the physician in the initial evaluation but was not given a formal ED diagnosis.



## Limitations / Conclusions

- This project may show that brief educational interventions can better equip physicians to identify the patients at risk for an eating disorder and give insight to treatment that fits the needs of this unique population.
- Post-6 month data was completed on January 24, 2021 and is being analyzed using the same reporting system as the pre - 6 month data.
- Limitations:
  - Extremely small sample size
  - Would likely benefit from expanding criteria to include other eating disorder diagnoses (binge eating, bulimia)
  - Impact of COVID-19 pandemic (historical effect)
  - Could consider using standard BMI scores instead of the age adjusted percentiles as the DSM 5 suggests<sup>8</sup>.



QR Code:  
Supplemental  
Materials, Eating  
Disorders  
Treatment Team



QR Code:  
Supplemental  
Materials, Eating  
Disorders  
Screening tools,  
Treatment Fast  
facts

## References

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