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American Academy of Pediatrics

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AAP endorses eating disorder guidelines

by **Carla Kemp** • Senior Editor

The Academy has endorsed guidelines for physicians and other health professionals on how to recognize and manage eating disorders.

The report, Critical Points for Early Recognition and Medical Risk Management in the Care of Individuals with Eating Disorders (www.aed-web.org/AM/Template.cfm?Section=Medical_Care_Standards&Template=/CM/ContentDisplay.cfm&ContentID=2413), was developed by the Academy for Eating Disorders' Medical Care Standards Task Force and also has been endorsed by the Society for Adolescent Health and Medicine.

Eating disorders, including anorexia nervosa, bulimia nervosa and binge eating disorder, can be life-threatening, regardless of a person's weight, according to the guidelines. In fact, anorexia has the highest mortality rate of any psychiatric disorder.

"Eating disorders are serious mental illnesses with significant, serious and potentially life-threatening medical consequences, as well as psychiatric consequences," said Elizabeth M. Alderman, M.D., FAAP, chair of the AAP Section on Adolescent Health Executive Committee, who reviewed the guidelines and recommended the Academy endorse them. Members of the AAP Committees on Adolescence and Nutrition also reviewed the guidelines and recommended endorsement.



Dr. Alderman

The report promotes early recognition and timely intervention that includes evidence-based medical, psychological, nutritional and psychopharmacologic services. The pediatrician is a member of the multidisciplinary team and may assemble the team if the patient initially presents to him or her, Dr. Alderman said.

The patient's family often is the first to seek help for the patient. The guidelines stress that health professionals should trust a family's concerns and include the family as key members of the team.

Individuals with eating disorders may have a variety of symptoms or no obvious physical signs. "The medical consequences of eating disorders can affect every organ system," Dr. Alderman said. "The guidelines describe signs and symptoms that affect these systems, including menses as an important vital sign."



However, Dr. Alderman noted that it is a myth eating disorders affect only girls from certain socioeconomic and ethnic groups. "Boys and people from all socioeconomic and ethnic groups may have eating disorders, as well as patients who are overweight or obese," she said.

Presenting signs can include:

- marked weight loss, gain or fluctuations;
- oral trauma or lacerations;
- chest pain or heart palpitations;
- hematemesis, constipation or hemorrhoids;
- low bone mineral density;
- seizures;
- depression/anxiety/obsessive behavior;
- poor healing; and
- yellowish discoloration of skin.

The guidelines list symptoms that should prompt an evaluation for an eating disorder. In addition, the document emphasizes that acute malnutrition is a medical emergency and can occur at any body weight.

If a physician suspects a patient may have an eating disorder, he or she should perform a comprehensive assessment that includes a complete history, physical exam and laboratory evaluation. The guidelines outline areas to cover during the history, what to assess during the physical exam, what laboratory and imaging studies and other tests to perform, and potential abnormal findings in a patient with an eating disorder.

The document reviews the goals of treatment, noting that eating disorders are not fads or phases. People do not choose to have eating disorders, even though they may engage in behaviors that precipitate an eating disorder.

The report also includes a list of interventions and discusses the importance of ongoing management since distorted body image may persist after the patient returns to a healthy weight. "Evidence-based treatment delivered by health professionals with expertise in the care of patients with eating disorders is mandatory," according to the guidelines.

Last year, the AAP Committee on Adolescence published a clinical report titled *Identification and Management of Eating Disorders in Children and Adolescents* (*Pediatrics*. 2010;126:1234-1247), which discusses diagnostic criteria and outlines the initial evaluation of the patient with disordered eating. It also describes medical complications in patients with eating disorders and outlines treatment options.

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