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Building Research Capacity for Nursing &
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Cymydu Gwylt Ymchwil ar gyfer Nyrsia a
Gwaltwyr Proffesiynol Cysylltiedig a Fferylwyr

RECOGNISING AND MANAGING EATING DISORDERS IN CHILDREN AND YOUNG PEOPLE WITH TYPE 1 DIABETES

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APOLOGIES



AIM

- EXPLORE 'DIABULIMIA'
- CLINICAL GUIDELINES
- IDENTIFYING EATING DISORDERS
- THE SITUATION IN WALES, UNPUBLISHED DATA
- MANAGING EATING DISORDERS IN TYPE 1 DIABETES



EATING DISORDER DEFINITIONS



Anorexia Nervosa



Bulimia Nervosa



Other Specified Feeding or Eating Disorder (prev EDNOS)



‘Diabulimia’



Friendships

Alcohol
and Drugs

Self-care

Finance

Sex

Self-
esteem

Advice To My
16-Year-Old
Self

HOW DISORDERED IS OUR EATING?

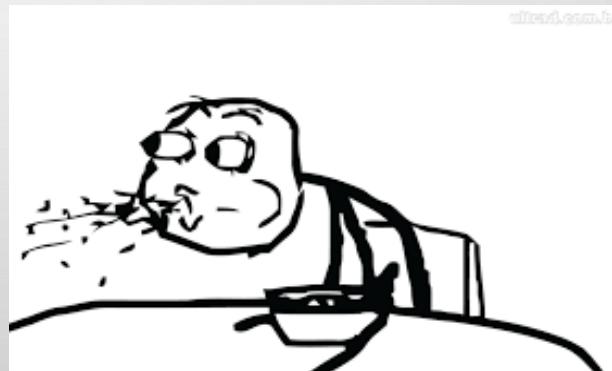


REFLECTING ON AN EATING DISORDER IN DIABETES

THE EXPECTATION OF HOW I SUPPOSED TO CONTROL MY DIABETES WAS SO HIGH FROM OTHER PEOPLE THAT IT WAS UNACHIEVABLE AND UNREALISTIC, I COULDNT' REACH 'PERFECT' SO THE ONLY THING I FELT I COULD ACHIEVE WAS PUTTING MY EFFORTS INTO [MY EATING DISORDER] 'CONTROLLING THE UNCONTROLLED'.

“IT'S NOT LIKE ANYBODY HAS DIED”

- FEMALE INSULIN RESTRICTORS DISPLAYED HIGH LEVELS OF EATING DISORDER SYMPTOMS AND THE AVERAGE AGE OF DEATH FOR FREQUENT INSULIN RESTRICTORS WAS 45 YEARS OF AGE (GOEBBEL-FABBRI ET AL., 2008)



EATING DISORDER RISK



Type 1 Diabetes

- Up to 67% of patients with Type 1 Diabetes engage in disordered eating behaviours
- Clinical and sub-clinical eating disorders are not unique to the diabetic population
- Risks are much greater



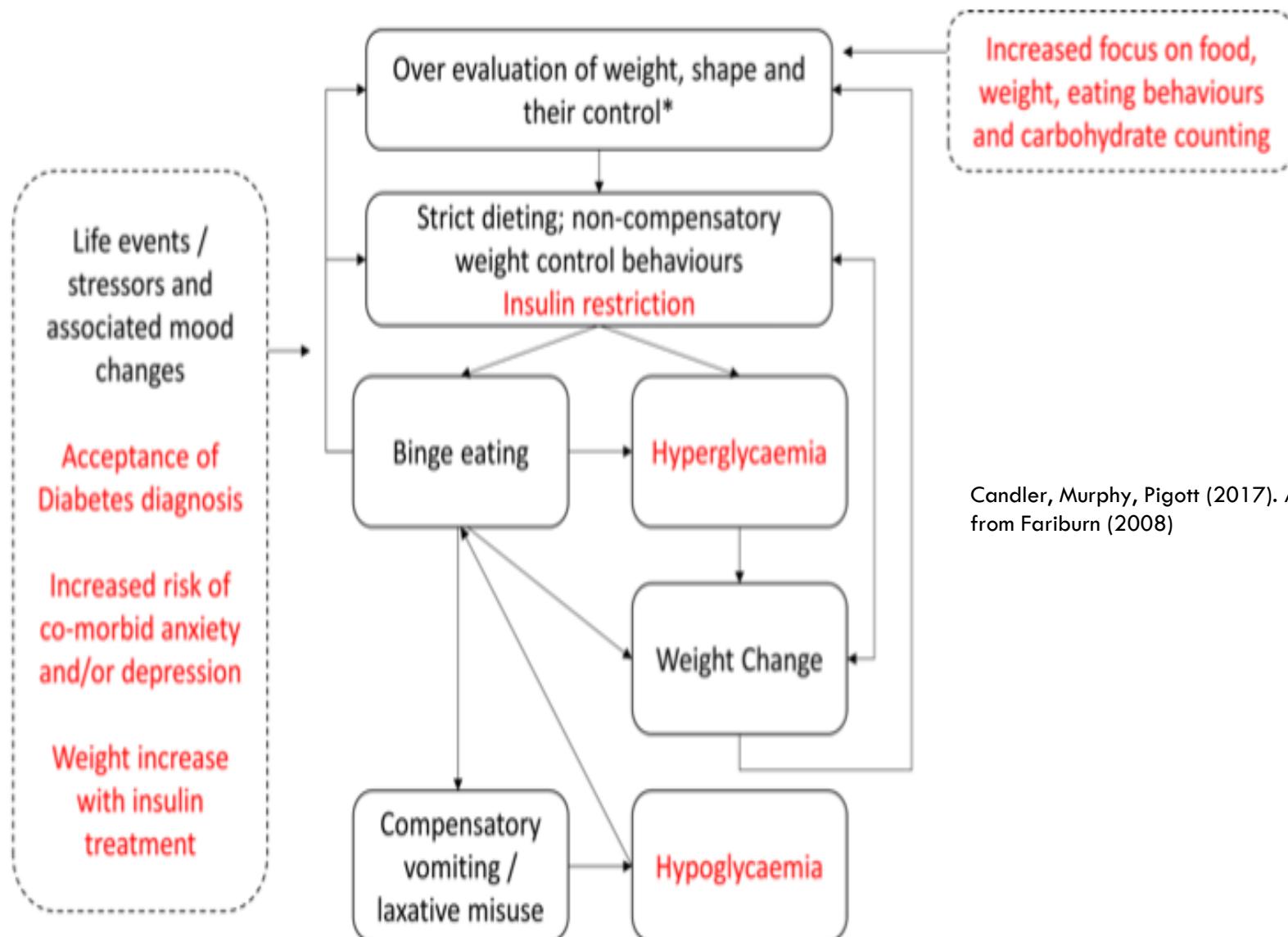
Gender Risk

- Females > Males : Disordered eating patterns (Neumark-Sztainer et al.2002; Mitchinson and Hay, 2014)
- Females exposed to unrealistic images of leanness and thinness
- Males also exposed to social media trends around 'physique' and risk should not be ignored



Obesity

- Often thought to negate risk of eating disorders
- Young people who are overweight are more likely to engage in disordered eating techniques (Tomiyama, 2014)
- Restriction, binging and purging are ineffective methods of weight control - ? Causitve or resultive of obesity



Candler, Murphy, Pigott (2017). Adapted from Fairburn (2008)

* The factors that predispose an individual to developing an eating disorder are wide and varied, and beyond the scope of this paper. This diagram provides a framework of understanding a cycle which may trigger and maintain an eating disorder, including factors specific to having a diagnosis of Type 1 Diabetes. **Diabetes specific factors denoted in red.**

RECOGNISING EATING DISORDERS IN TYPE 1 DIABETES



Modified SCOFF
questionnaire

"Do you ever take
less insulin than you
should"

Weight changes
Hospital Admissions
Appetite changes
Polyuria/Polydypsia
Concentration in
school

Raised HbA1c
Not taking insulin
Binging/ Purging

Restrict
Fat
Cut out
Detox

Sometimes, there may
be no prelude or
precursor. Allowing
young people the
opportunity to ask for
help

THE SITUATION IN WELSH CHILDREN AND YOUNG PEOPLES NETWORK



GOOD EXAMPLES OF JOINT WORKING BETWEEN CHILD AND ADOLESCENT MENTAL HEALTH SERVICES AND PAEDIATRIC DIABETES



MANAGING EATING DISORDERS

NICE CG9. Eating Disorders in the over-8s: management

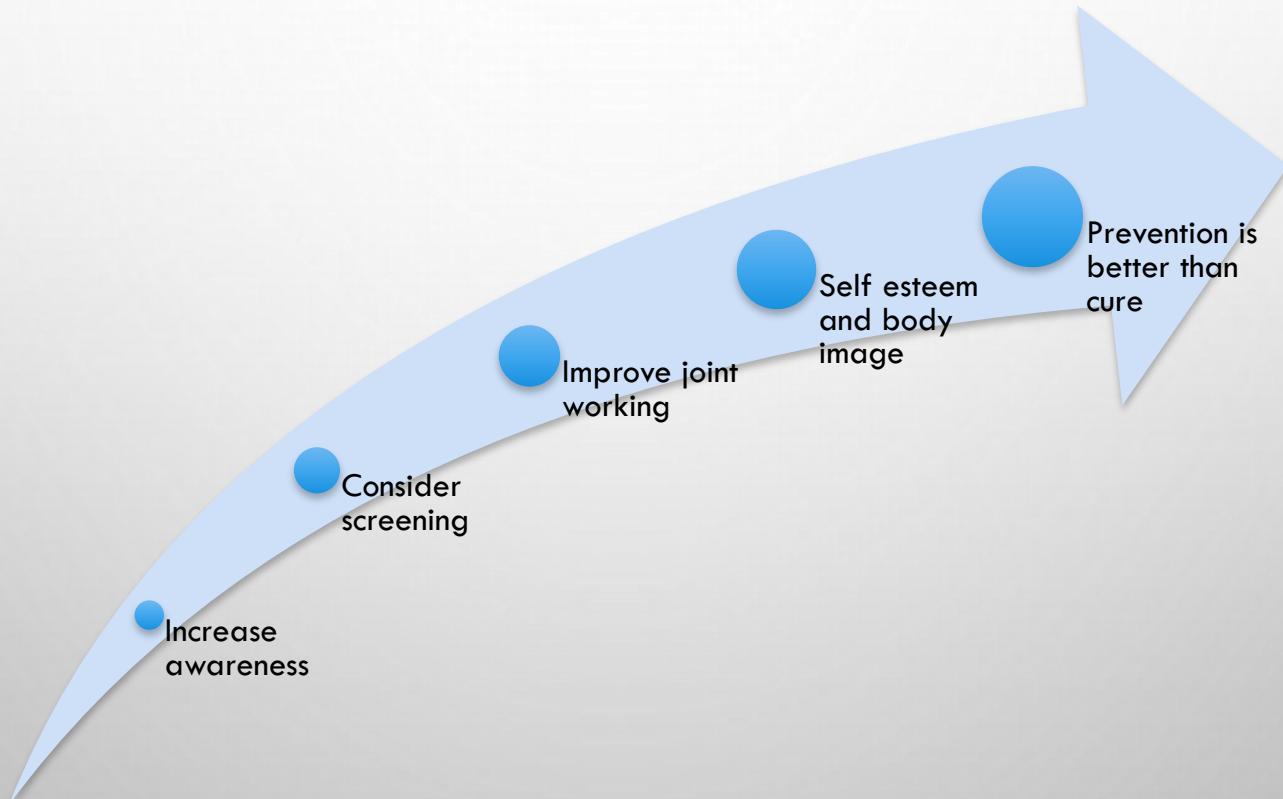
Young people with T1DM and poor treatment adherence should be screened and assessed for the presence of an eating disorder.

Treatment of both subthreshold and clinical cases of an eating disorder in people with diabetes is essential

RCPsych. Summary of Junior MARSIPAN: Management of Really Sick Patients under 18 with Anorexia Nervosa

Re-establish regular meal pattern based on three meals+2–3 snacks per day, without any macronutrient avoidance or self-restriction

For patients requiring specialist eating disorder beds, safe refeeding including access to dietetic advice is essential





THANK YOU FOR LISTENING



ANY QUESTIONS?

memesgenerator.net

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