

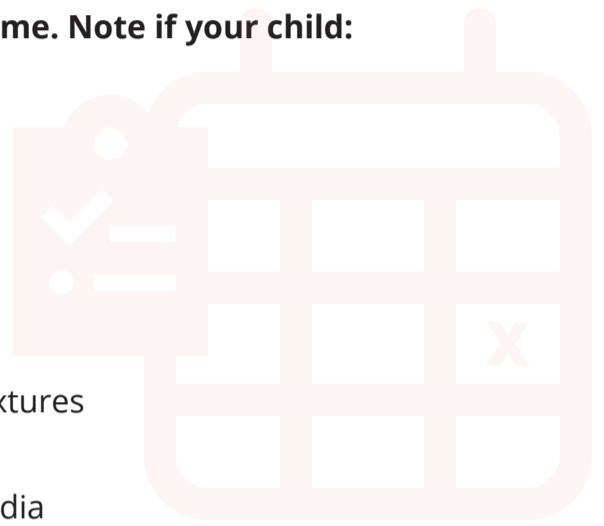
What to Do if You Suspect Your Child Has an Eating Disorder

What do you do if you think your child has an eating disorder? A visit to their pediatrician is often the first step. Yet even before that appointment, there are a few things you can do to help.

Before your appointment with the provider:

Keep a record of signs and symptoms that you see at home. Note if your child:

- ❗ Turns down foods they once enjoyed
- ❗ Is afraid to eat in front of other people
- ❗ Pushes food around on the plate instead of eating
- ❗ Is driven to exercise to make up for what they ate
- ❗ Wants to cook and control what goes in meals
- ❗ Talks negatively about their body shape or size
- ❗ Is unable to eat foods with certain tastes, colors, or textures
- ❗ Disappears after each meal to go to the bathroom
- ❗ Follows weight loss or food-related posts on social media
- ❗ Has trouble sleeping or staying warm



Once you are at a provider's office:



Ask your pediatrician to avoid the use of language that causes stigma.

- ✔ Children and teens who have eating disorders often receive reassurance about their behaviors before their eating disorders are diagnosed.
- ✔ This includes language around appearance or diet.
 - A simple comment like, "No cookies?! I wish every patient of mine ate as healthy as you!" can delay diagnosis. It gives a false impression that disordered eating patterns are healthy and praiseworthy.



Talk to the provider about how to communicate your child's weight.

- ✔ Ask if they can accommodate a blind weight so your child does not have immediate access to the number on the scale.
- ✔ Remember: kids whose weights are in the normal range may still struggle with eating disorders.
- ✔ Kids can also have eating disorders even if they are still eating.

Work together with your child's provider to examine the line on your child's growth chart. Has their height and weight stayed on track? Or has it flattened or decreased at a time you might have expected an increase in weight, like during puberty?



Discuss other potential reasons for a sudden change in eating patterns.

- ✔ Is there a history of thyroid concerns, diabetes, bowel disease (Crohn's, colitis), or polycystic ovarian syndrome in your family?



Discuss next steps.

- ✔ Follow-up bloodwork, an ECG to examine heart health, or a DEXA scan to measure bone density might be necessary to check your child's physical health.
- ✔ The [American Academy for Child and Adolescent Psychiatry](#) also recommends the following:
 - Eating Disorder Examination Questionnaire (EDE-Q)
 - Eating Attitudes Test (EAT), including the children's version
 - Eating Disorder Inventory (EDI)
 - Bulimia Test - Revised (BULIT-R)
 - Labs for CBC, BUN, creatinine, glucose, liver function, TSH, and others

Keep in mind that not all pediatricians are eating disorder experts. Explore with the provider whether a referral to an adolescent medicine specialist with specialized training in eating disorders could help. Ask the provider for recommendations for local mental health professionals and dietitians. They may know which providers they can work well with and have ways to connect you to local care.

Complete release-of-information forms for any other healthcare providers who might be involved with your child's eating disorder treatment team.

- ✔ It's important to have consistent communication between all members of your child's care team (dietitian, therapist, school counselor, etc.).

Funding Statement

Funding for the National Center of Excellence for Eating Disorders was made possible by Grant No. H79SM081924 from SAMHSA of the U.S. Department of Health and Human Services (HHS). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, SAMHSA/HHS, or the U.S. Government.

In partnership with

