

STUDY PROTOCOL

Children with Early Onset Eating Disorder

This study commenced in July 2002.

Due to variation in national management strategies for this condition, a change has been made to the case definition to include outpatients.

CASE DEFINITION

Please report any child aged 5 –13 years *inclusive*, newly diagnosed with early onset eating disorder which is defined as:

- **Determined food avoidance**
AND
- **Weight loss or failure to gain weight during a period of growth, not due to any identifiable organic cause.**
AND
- **Is admitted to hospital OR managed within the community.**

BACKGROUND

Epidemiological studies suggest that the incidence of eating disorders, including anorexia nervosa, has been increasing in adolescents over the last 50 years. However, there is wide variation in the few available estimates of incidence of eating disorders in children under 13 years of age.

Current DSM-IV criteria for anorexia nervosa require patient concerns about body weight, disturbed body image and fear of weight gain. However, these criteria may not accurately reflect the clinical features in young children for several reasons:

- Young children may not report fear of weight gain while at a low weight but may do so only when weight has been restored to a more healthy level.
- Children may be unable to express distress in terms of body shape and self-perception but may instead describe somatic symptoms such as abdominal pain or discomfort once re-feeding commences.
- While the presence of amenorrhoea is an important diagnostic feature for anorexia nervosa in post-menarchal girls it may be a developmentally inappropriate criterion in young girls, in whom a history of delay in onset of puberty may be important.
- The DSM-IV criteria specifies that weight should be <85% of expected weight for height, however, this may lead to an underestimate of the severity of low weight in younger children in whom linear growth as also been affected.

Therefore, this study uses a deliberately broad definition of early onset eating disorder which is appropriate for young children.

STUDY OBJECTIVES

1. Estimate the incidence of early onset eating disorder in Australian children
2. Describe the age, sex and family history
3. Describe the range of clinical features at presentation including other psychiatric illness
4. Compare the features at presentation of eating disorder in this population with existing DSM IV criteria
5. Describe the acute medical complications experienced by children with early onset eating disorders
6. Describe the therapeutic interventions used in management.

FOLLOW-UP OF REPORTED CASES

A brief questionnaire requesting further details will be forwarded to clinicians who report a case of early onset eating disorder to the APSU.

If you have any questions please contact :

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