

1. Can you describe for the committee what treatment looks like for a person experiencing a severe eating disorder?

Most individuals with an eating disorder respond best to treatment involving a multidisciplinary team, including but not limited to a primary care physician, dietitian, and a psychotherapist who are knowledgeable about eating disorders. The most effective and long-lasting treatment for an eating disorder is some form of psychotherapy or counseling, coupled with careful attention to medical and nutritional needs.

2. What are some typical signs and symptoms that would likely trigger intervention?

Eating disorders can be diagnosed based on weight changes, but also based on behaviors, attitudes and mindset. Some of the earliest signs of an eating disorder could include a variety of emotional, physical, and behavioral changes. While these changes may seem like harmless and typical adolescent behavior, taken together they can indicate a serious, life-threatening eating disorder. These changes can include:

Emotional

- Change in attitude/performance
- Expresses body image complaints/concerns: being too fat even though normal or thin; unable to accept compliments; mood affected by thoughts about appearance; constantly compares self to others; self-disparaging; refers to self as fat, gross, ugly; overestimates body size; strives to create a “perfect” image; seeks constant outside reassurance about looks
- Incessant talk about food, weight, shape, exercise, cooking, etc.
- Appears sad/depressed/anxious/expresses feelings of worthlessness
- Emotions are flat or absent
- Intolerance for imperfections in academics, eating, social life, etc.
- Is target of body or weight bullying currently or in the past
- Spends increasing amounts of time alone; pulls back from friends
- Is obsessed with maintaining unhealthy eating habits to enhance performance in sports, dance, acting, or modeling
- Overvalues self-sufficiency; reluctant to ask for help
- Unable or unwilling to acknowledge recent changes

Physical

- Sudden weight loss, gain, or fluctuation in short time
- Complaints of abdominal pain
- Feeling full or “bloating”
- Feeling faint, cold, or tired
- Dark circles under the eyes
- Calluses on the knuckles from self-induced vomiting
- Dry hair or skin, dehydration, blue hands/feet

- Lanugo hair (fine body hair)
- Fainting or dizziness upon standing
- Thinning, dry hair

Behavioral

- Diets or chaotic food intake; pretends to eat, then throws away food; skips meals
- Exercises for long periods; exercises excessively every day (can't miss a day)
- Constantly talks about food
- Difficulty sitting still: hovers over chair instead of sitting, constantly jiggles legs, gets up from desk at every opportunity, offers to run errands
- Makes frequent trips to the bathroom
- Makes lists of foods and calories eaten
- Wears very baggy clothes to hide a very thin body (anorexia) or weight gain (binge eating disorder) or hide "normal" body because of disease about body shape/size
- Is fatigued; gets dizzy
- Avoids cafeteria, works through lunch, eats alone
- Carries own food in backpack or purse
- Shows some type of compulsive behavior
- Denies difficulty

3. What would be the consequences if that person would not be able to access treatment?

If left untreated, eating disorders can be life-threatening. They are serious illnesses that can damage the brain, liver, kidneys, GI tract, teeth, skin, hair, bones, and heart. They can result in such serious medical conditions as retarded growth, osteoporosis, kidney problems, gastrointestinal dysfunction, and even heart failure. That is why it is so important to identify the illness in its earliest stages. The quicker an individual gets into treatment, the more likely they will be to recover.

4. What are the most common barriers to treatment? In your experience, do people with eating disorders have appropriate access to treatment through their health insurance, specifically as it relates to residential eating disorder services?

The cost of residential treatment for eating disorders can be upwards of \$30,000 a month. Many insurance companies do not provide full coverage for this treatment. This is why it is so important for school professionals and parents to be able to recognize the signs and symptoms of eating disorders to help identify individuals in the earliest stage of their illness. By preventing the development of full syndrome disorders and the chronic health problems they cause, early detection and intervention through this pilot program for school screenings would significantly reduce treatment costs and could even save lives.