Children's Hospital of Philadelphia
PolicyLab

Understanding Eating Disorders: Q&A with CHOP's Alix Timko, PhD

Adolescent Health & Well-Being

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Anorexia is the third most common chronic illness in adolescents and has the highest mortality rate of all psychiatric illnesses. According to the National Institute of Mental Health, eating disorders like anorexia are serious and often fatal illnesses that cause severe disturbances to a person's eating behaviors. Unfortunately, only one in ten individuals with an eating disorder receives treatment.

Alix Timko, PhD, is a psychologist in the Department of Child and Adolescent Psychiatry and Behavioral Sciences at CHOP. Dr. Timko frequently treats children and adolescents with problems that commonly co-occur with eating disorders such as anxiety, perfectionism and body dissatisfaction. PolicyLab researchers who work with adolescents may encounter patients with eating disorders. Therefore, we found Dr. Timko's work so relevant in the clinical and policy arenas, that we wanted to share it with our blog readers.

Question: What are common feeding and eating disorders?

Answer: The most common feeding and eating disorders include anorexia nervosa, bulimia nervosa, binge eating disorder and avoidant restrictive food intake disorder (ARFID). ARFID is a new diagnostic category that includes (but is not limited to) youth who are picky eaters, those who do not seem interested in food and those who do not like various sensory properties of food.

Question: How common are youth eating disorders locally and nationally? Do they disproportionately affect any youths?

Answer: Eating disorders are far more common than many people realize, with a lifetime prevalence rate of 0.3 percent to 3.4 percent for all eating disorders. In general, there are 30 million people in the United States who have suffered with an eating disorder at some point in their lives. This specifically impacts us as a children's hospital since 95 percent of people with an eating disorder are between the ages of 12 and 25 (median age of 12) and include any ethnicity, age, socioeconomic status and gender. At CHOP we see about 250 new cases of eating disorders each year.

Question: Are there any effective prevention interventions for eating disorders?

Answer: Most of the prevention programs we have target body dissatisfaction. Body dissatisfaction has a number of adverse consequences on its own – and for those who are susceptible to developing an eating disorder it can increase risk. If we look at some key behaviors often associated with eating disorders, we will see that almost half of girls in first through third grades want to be thinner, and more than 75 percent of 10-year-old girls are afraid of being fat. The existing programs work to have adolescents critically evaluate the media and the messages it sends and encourage body positivity and body acceptance. While, we know now that the media alone doesn't cause eating disorders, it does add to a proliferation of a thin ideal and can contribute to body dissatisfaction in its own right. A number of these programs have strong data indicating that they may help reduce eating disorder risk.

Question: What barriers do youth face when seeking out treatment for an eating disorder?

Answer: There are a number of barriers that families face. First, there are not enough clinicians trained in recognizing and treating eating disorders – so it can be difficult for families to find appropriate care near their home. The second is getting specialist care. While we know that outpatient treatment is the most effective for eating disorders, there are many areas of country where finding an eating disorder specialist is very difficult. Third, for many families, there is a perceived stigma around the diagnosis of an eating disorder and there is often a perception that youth with an eating disorder are actively choosing to have an eating disorder. This is not the case.

Question: Have policies been introduced to improve screening and treatment for youths?

Answer: This is a really good and sensitive question. Many colleges and universities will conduct eating disorder screenings during National Eating Disorder Week. There are, generally speaking, no national screening programs of which I am aware. Many middle schools will include information about eating disorders, nutrition and healthy eating in their school curriculum on health. Schools will also weigh children and send home information about the child's weight to parents. These latter interventions are more focused on encouraging healthy eating and preventing obesity. The caveat is that there is very little evidence that nutrition programs and weight screenings actually reduce obesity and some growing evidence that they may inadvertently impact the development of eating disorders. In a 2013 study, adolescents identified school based programs focused on "healthy living" as precursor to restrictive eating and their eventual development of an eating disorder.

At the national level, lawmakers introduced the Anna Westin Act of 2015 in the U.S. House of Representatives and Senate. The legislation had three main goals: to improve training of health care professionals and school professionals in the early identification of eating disorders, to ensure that the Mental Health Parity Act extends to residential treatment of eating disorders and to evaluate the need to regulate the alteration of images in advertising. The Anna Westin Act was named for a young woman who suffered from anorexia. She and her family attempted to receive treatment for her illness, but was denied care by the insurance company. She later died from suicide as a direct result of the eating disorder. The language from the Anna Westin Act was embedded in the 21st Century Cures Act, which President Obama signed into law on December 13, 2016. This

is the the first time that Congress passed legistration specifically designed to support indivduals with eating disorders.

Learn more about Dr. Timko and her work here. You can learn more about the Eating Disorder Program in the Department of Child and Adolescent Psychiatry and Behavioral Sciences at CHOP here.

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