



ADVANCING INTEGRATED HEALTHCARE

# Restrictive Eating Disorders ECHO<sup>®</sup>

## Session 6: Family Meal/M meal Coaching

Date: February 15<sup>th</sup>, 2023

*PLEASE NOTE: Project ECHO case consultations do not create or otherwise establish a provider-patient relationship between any clinician and any patient whose case is being presented in a project ECHO setting*

*Care Transformation Collaborative of RI*

# Welcome

- This session will be recorded for educational and quality improvement purposes
- Please do not provide any protected health information (PHI) during any ECHO session

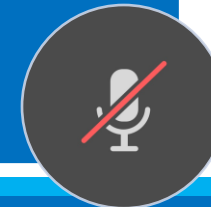
- Please turn on your video
- Please enter your name and organization in the chat box

Introduce Yourself



- Please mute your microphone when not speaking

Microphones



# Agenda

Time	Topic	Presenter
7:30 – 7:35 AM	<b>Welcome, Updates, &amp; Case Presentation Schedule</b>	Liz Cantor, PhD
7:35 AM – 7:55 AM	<b>Family Meal/Meal Coaching</b>	Christina Tortolani, PhD
7:55 – 8:15 AM	<b>Case Presentation</b>	Brittany Vose, MA Aquidneck Pediatrics
8:15-8:25 AM	<b>Discussion</b>	
8:25 AM – 8:30 AM	<b>Wrap Up, Next Meeting</b>	Christina Tortolani, PhD Liz Cantor, PhD

# Reminder

Thursday March 21<sup>st</sup> Session rescheduled to  
**Thursday March 28<sup>th</sup> 7:30-8:30 AM**

# Case Presentation Schedule

Session Title	Date	Presenter
Session 7: Partnering with Caregivers	March 28 <sup>th</sup> , 2024	Dinusha Dietrich, Smithfield Pediatrics
Session 8: Collaborative Weighing	April 18 <sup>th</sup> , 2024	Antoinette Sullivan & Erin Dalton Coastal Medical Narragansett
Session 9: One Team, One Message	May 16 <sup>th</sup> , 2024	Laura Dawson Maureen McKenna, Coastal Medical Toll Gate
Session 10: Harnessing Parental Anxiety	June 20 <sup>th</sup> , 2024	Colleen Vitale Atlantic Pediatrics & Laura Beaudry Bald Hill Pediatrics
Session 11: Navigating Challenging Family Dynamics	July 18 <sup>th</sup> , 2024	Michelle Beller, Barrington Pediatric Associates
Session 12: Brain Recovery – Success Stories	August 15 <sup>th</sup> , 2024	Heather Pelletier & Brittany Vose

# FAMILY BASED TREATMENT: PEDIATRIC EATING DISORDERS



CHRISTINA TORTOLANI, PHD

# LEARNING OBJECTIVES

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- Describe rationale for family meal intervention in FBT
- Identify 1 strategy used in the family meal intervention
- Identify 1-2 ways caregivers can provide effective meal support

# EXPERIENTIAL...

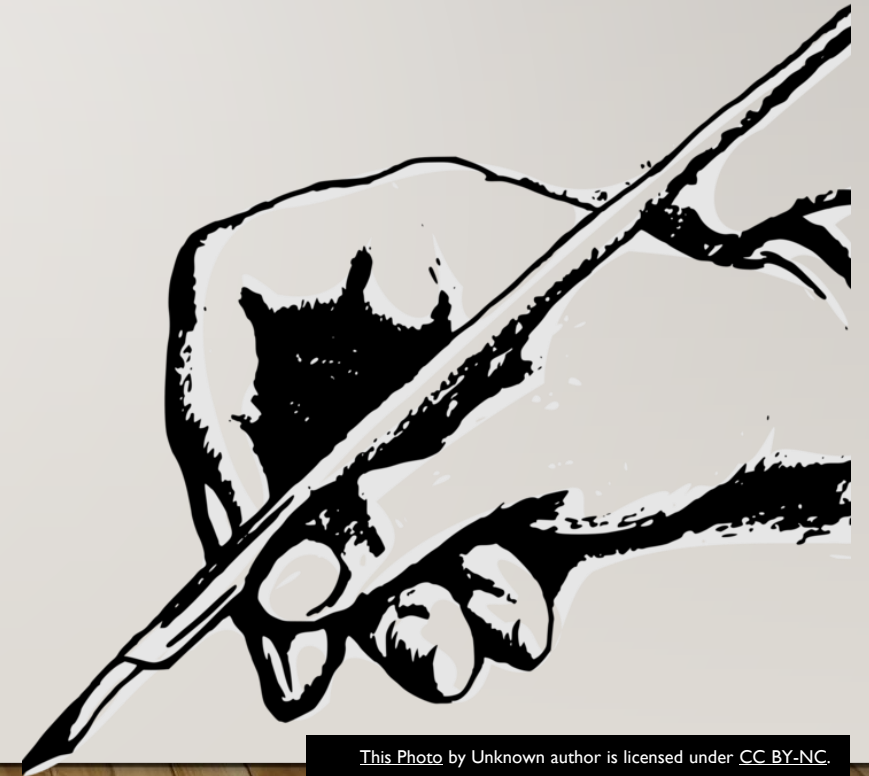
# NON- DOMINANT HAND ACTIVITY

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Write: "I am writing with my non-dominant hand"

Now write: "I feel \_\_\_\_\_ (insert emotion) when writing with my non-dominant hand"

Answer: "If you were told you would need to write with your non-dominant hand the rest of your life, what would you do?"



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THE BRAIN OF A PERSON  
WITH AN  
**ED FIRES DIFFERENTLY**  
COMPARED TO A PERSON  
WITHOUT AN ED

The “dominant” way for a person **without an eating disorder** to respond to food is to:

1. Eat mindfully when hungry and stop when full.
2. Enjoy the taste.
3. Feel the sense of hunger or fullness.

The “dominant” way for a person **with anorexia nervosa** to respond to food is to:

1. Not eat.
2. Move and keep moving.

The “dominant” way for a person **with bulimia nervosa** to respond to food is to:

1. Delay eating food as long as possible.
2. Lack of control over eating
3. Impulsively purge by vomiting or laxative abuse

# WHY A FAMILY MEAL?

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- GOALS for Clinician
  - Assess family STRUCTURE as it may affect ability of parents to re-feed
  - Assess family PROCESS and interactions during eating (parental strengths, weaknesses, extremes)
  - Provide opportunity for parents to SUCCEED in convincing adol to eat more than intended

# THE FAMILY MEAL

- Coaching regarding *empathic* comments coupled with insistence to eat
- Unified message
- Reinforcement of externalization of AN
- Active avoidance of sensitive topics
- Attention to family criticism of patient



WHO'S IN CHARGE? THE PARENTS OR THE ED?

# WHAT DOES IT LOOK LIKE?

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- Family instructed to lay out the meal *as if at home*
- Therapist does not participate (in eating), but observes and asks questions, keeping in mind target interventions
  - Making an inventory of everyday behaviors around eating
- Therapist may intervene directly
  - “Let me jump in here...”

# WHAT DOES IT LOOK LIKE?

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- To what extent are parents able to externalize and separate ED?
- How are parents standing up to the ED? What are they doing? Saying?
- How do parents styles at approaching meal support differ? Complement? Clash?
- Attend to the anxiety levels in room

# ONGOING MEAL SUPPORT

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- "Zero tolerance stance"/ eating is non-negotiable requirement
- Parents make all the food-related decisions
- Supervision: Make the time to sit by your child to support (and monitor) every mouthful.
- Set up close support in school, as your child is (hmmm) *not yet able to tell you the truth*
- "World stops" until child eats
- Give direct eating prompts: "Next bite"
- Distract your child from anxious thoughts with games, movies, non-food-related convo
- Manage own emotional reactions

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# BUNGEE JUMPING



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ADVANCING INTEGRATED HEALTHCARE

# Restrictive Eating Disorders ECHO<sup>®</sup>

## Case Presentation

Presenter(s): Brittany Vose, MA

Date: February 15, 2024

Contact Info: [bvose@aquidneckpediatrics.com](mailto:bvose@aquidneckpediatrics.com)

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# Reasons for Selecting this Case

Do Not Include PHI

Why did you choose this case?	<p>Patient has been a “picky eater” throughout her whole life</p> <p>Family has tried outpatient individual therapy and nutrition consults; however, felt “left in the dark”</p> <p>Minimal communication between treatment providers</p>
What questions do you have for the group?	<p>How to effectively mobilize and build a sense of urgency with parents and treatment providers when the child’s weight has been consistent, yet critical for years?</p> <p>How to externalize the eating disorder and consider life without the eating behaviors that have occurred since childhood?</p>

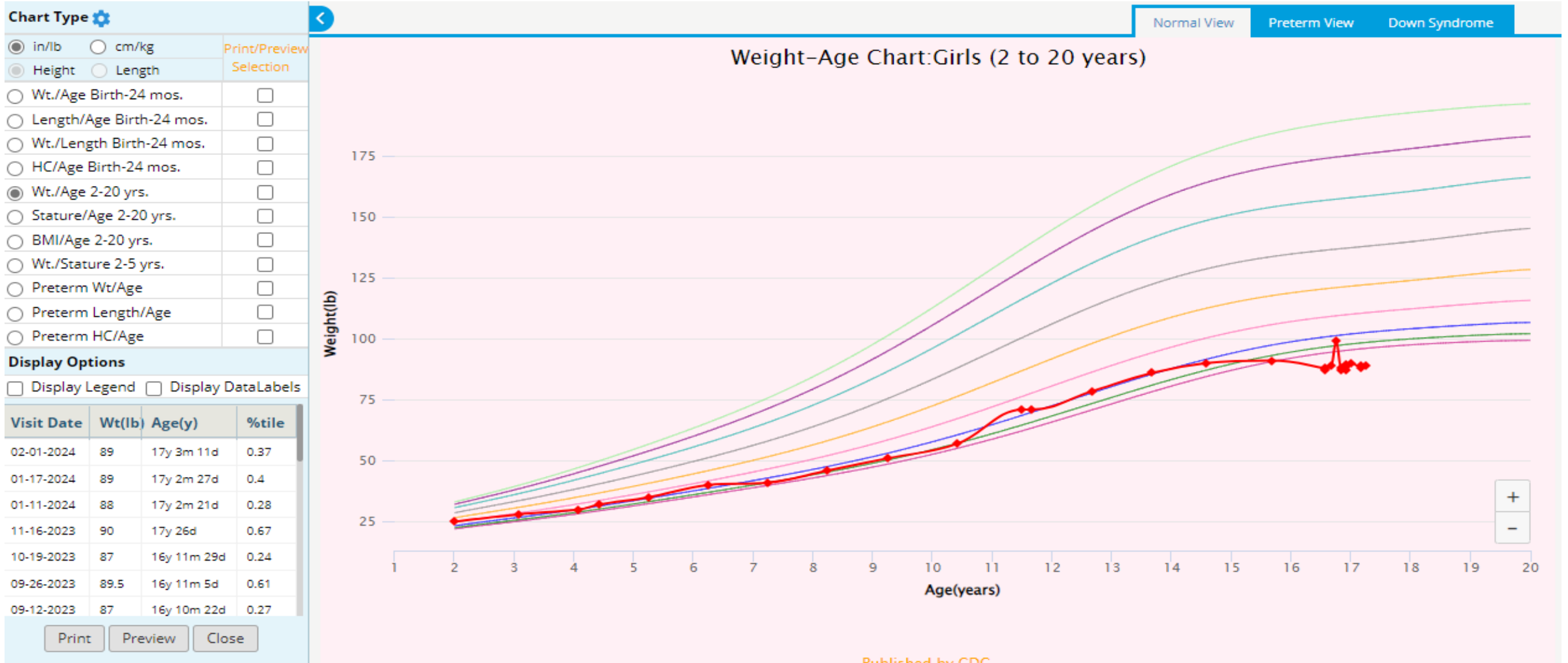
# Basic Patient Information

Do Not Include PHI

Age	17 years old
Gender Identity	Female
Race/Ethnicity	Caucasian
Current Weight and Height	Weight: 89lbs                      Height: 63 in
BMI percentile and expected body weight	0.56%
How long has the patient had concerning growth trends?	Always has been in the lower % tile Decline in growth chart began about two years ago Concerns exacerbated in Summer 2023
How long has this individual been in your care?	2 Sessions
Insurance type (Commercial, Medicaid, Uninsured, Other)	UMR

# Growth Curve

Do Not Include PHI



# Does the Patient/Family have treatment goals? Please describe.

Do Not Include PHI

- Weight restoration before college
- Increase variety in food consumption
- Parents are looking to identify and implement strategies to support their daughter in increasing her caloric intake

# Relevant Background

Relevant medical and/or behavioral comorbidities	Anxiety; ADHD, inattentive type; Dyslexia Dysmenorrhea
Relevant medications	Junel FE (Oral Contraceptive)
Relevant lab results	January 2024 Ferritin 17; RDW-SD 47.0; Platelet 433000
Relevant BH Screening results	June 2023 – PHQ9 score 2 Minimal Depression GAD 7 score 0
Relevant SDOH Screening results	None reported
Family History of other psychiatric concerns	No relevant family history reported

# Relevant Social History

Do Not Include PHI

Family history of disorder eating?	Younger Sister reports being a Pescatarian Father reports history of various dietary practices including vegetarian
Family/patient history of trauma?	Mother diagnosed with breast cancer in Fall of 2021
School related concerns?	Dyslexia and ADHD increase her frustration and apathy towards school
Other social history concerns?	Oldest Sibling of 2; 2 years apart

# Eating Disorder Treatment History

Do Not Include PHI

<p>What interventions have been tried (e.g. re-feeding, meal supervision, exercise restriction)</p>	<p>Parents tried reasoning with the patient; Pediatrician advised exercise restriction a few times over the past year</p>
<p>What treatment barriers have the family identified?</p>	<p>Father’s worry in his ability to manage the distress of an upset daughter          Family schedule – both patient and sibling are very active in sports          Family Narrative “She’s just a picky eater.”</p>
<p>What levels of care have been used for treatment?</p>	<p>Outpatient individual therapy          Nutrition consultations</p>
<p>What is the most recent course of treatment?</p>	<p>FBT with some modifications</p>
<p>Other concerns with nutrition/eating (such as cultural considerations)?</p>	<p>None</p>

# Physical Activity

<p>Does the patient engage in regular physical activity? (yes/no) Please describe</p>	<p>Yes – previously swimming for two teams up to 10 hours per week 08/30/2023 Exercise restriction advised by PMD to permit swimming 1 day a week 09/26/2023 PMD cleared patient to swim 3 days per week 11/16/2023 PMD cleared patient to swim 5 days per week (increase of 3 lbs.) 01/11/2024 Exercise restriction advised by PMD to swim 3 days per week 02/01/2024 – full exercise restriction</p>
<p>Other concerns with physical activity/exercise (such as physical restrictions, access, environmental safety)?</p>	<p>None</p>
<p>What interventions have been tried?</p>	<p>Allowance to participate in sports if weight was gained</p>



# Patient /Family Successes and Strengths?

Do Not Include PHI

- Family shares an acceptance and appreciation for one another
- Mother already manages all food preparation for each family member
- Patient is future oriented about attending college
- Mother appears mobilized and ready to take action against the eating disorder
- Father and sister often engage her in different activities (distraction)

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# Summary & Clarifying Questions



# CME Credits

(applied for MDs, PAs, Rx, RNs, NPs, PhD)

- BH clinicians can submit their certification to their accrediting agency for credit equivalency
- CME Credits – Please request session credits when filling out the evaluation at the end of the meeting.
- Evaluation/Credit Request Form: <https://www.surveymonkey.com/r/RSKN6W9>
- Evaluations must be completed to receive credit
- Certificates will be mailed ~ 1 month after event



# Thank you!

## **Next Meeting:**

Thursday March 28<sup>th</sup>, 2024 - 7:30 – 8:30 AM  
Family Meal/ Meal Coaching

Evaluation/Credit Request Form: <https://www.surveymonkey.com/r/RSKN6W9>