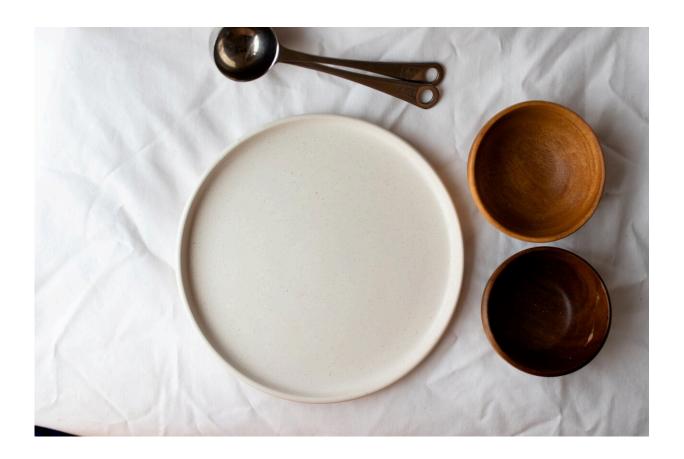


New tool to help primary care clinicians screen for eating disorders

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A first-of-its-kind tool to help expand care for patients with eating disorders is now available to primary care physicians across the U.S. The NCEED Screening, Brief Intervention, and Referral to Treatment for



Eating Disorders (SBIRT-ED) tool lets providers quickly and easily administer an evidence-based screener to patients. If an individual screens positive for a possible eating disorder, providers can use conversation guides and resources from the SBIRT-ED tool to speak to the individual about next steps to address the condition.

"We know that primary care clinicians are well-versed in screening for various mental health conditions and they feel comfortable in this role," says Christine Peat, Ph.D., director of the National Center of Excellence for Eating Disorders (NCEED) at the UNC School of Medicine. "The challenge with eating disorders is that many individuals do not have obvious signs or symptoms so these conditions can go undetected without routine screening. SBIRT-ED addresses that challenge by equipping clinicians with a tool that is brief, easy to use, and geared toward their scope of practice."

More than <u>28 million</u> Americans will have an <u>eating disorder</u> in their lifetime and eating disorders lead to 10,200 deaths every year in the U.S. Research shows that eating disorders are getting worse or have been exacerbated during the COVID-19 pandemic. Because <u>early diagnosis</u> and treatment leads to better outcomes for patients, there is an urgent need for a more comprehensive approach to identify and help people who have eating disorders.

Peat adds that <u>primary care providers</u> have unique relationships with their patients. They are commonly the first touchpoint that someone turns to for medical concerns. This puts primary care providers in a unique and trusted position to help people who struggle with eating disorders. "It's important to screen people even if they don't have obvious weight loss or aren't explicitly disclosing eating disorder symptoms," Peat says. "Eating disorders thrive in secrecy. During the pandemic people have been at home more and socializing less. This is fertile ground for eating disorders and we've seen them increase across



the board, especially in children and adolescents."

Peat, an associate professor in the UNC Department of Psychiatry, led the effort to create the SBIRT-ED tool. The SBIRT model is a well-established <u>public health</u>/harm-reduction approach designed for primary care physicians to detect and manage <u>substance use disorders</u>, depression, and anxiety. Adapting the model for eating disorders creates a flexible tool that can be implemented in various clinics and delivered to patients in a range of ways. It's also feasible to use for every adult patient and facilitates referrals to specialty treatment—a key component of eating disorder management.

The NCEED staff plans to offer trainings on the background and implementation for SBIRT-ED to primary care physicians and their staff. Peat says they are also creating curricula for medical and graduate trainings programs so the next generation of healthcare providers are trained in this approach. "We built the SBIRT-ED tool for primary care practices because we know there is trust between primary care physicians and their patients," Peat says. "This tool can open the door to talk about eating disorders with patients who really need help and might not receive it otherwise."

More information: SBIRT for eating Disorders: eatingdisorderscreener.org/

Provided by University of North Carolina at Chapel Hill School of Medicine

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