



Screening for Eating Disorders by Primary Care Physicians

Compiled and Written by Margo Maine, PhD

As a primary care provider, you could be the first person to recognize and offer assistance regarding a patient's eating and weight concerns. Please incorporate these questions into your patient interviews. Although a patient may not disclose enough information immediately, your sustained interest and concern may eventually allow your patient to admit their problems and accept your help.

Ask About:

- Recent weight fluctuations
- History of weight fluctuations
- Report of meals eaten on previous day
- Periods of bingeing or feeling a lack of control over food intake
- Comfort with current weight/shape
- Menstrual history
- Family history of eating disorders, depression, chemical dependence
- Desired weight
- Actions taken to maintain, control, or alter weight
- Any attempts to lose weight through:
 - Laxatives
 - Diuretics
 - Diet pills
 - Vomiting
 - Enemas
 - Exercise
 - Exercise habits (how much? how often? why?)
 - Other supplements (from health food stores)



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www.NationalEatingDisorders.org · Information and Referral Helpline: 800.931.2237

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Addressing Eating Disorders as a Physicians

A “Twelve Step” Program

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1. Admit the problem. Sizeism, weightism, “ideal thinness” and unattainable standards of beauty exist in:
 - Our culture
 - Your patients
 - You (?)
2. Ask questions about weight, menstrual, and dieting history:
 - A patient’s usual weight
 - Weight and menstrual fluctuations
 - Dieting
 - Other behaviors being used to change weight
3. Convey the importance of adequate nutritional intake, especially:
 - Calcium
 - Protein
 - Adequate fat
 - Balance (the food pyramid)
4. Do not overemphasize weight as an indicator of general health.
5. Understand and explain to patients the set point theory.
6. Be concerned about amenorrhea
 - Bone density
 - Fertility
7. Educate patients and staff about the dangers of dieting
 - Sets up a “binge”
 - Decreases BMR
 - Makes it easier to store fat
 - Impairs physical, psychological, and emotional functioning
8. Maintain a weight sensitive office.
 - No jokes about eating disorders
 - Privacy when weighing patients/ no weighing in public location
 - Respect client’s feelings
9. Provide educational materials about appropriate nutrition and eating disorders.
10. Bring up your concerns directly to patient.
 - Confront or Carefront? Present concerns in a sensitive and caring way.
11. Know the local and national resources for treatment.
 - For information and treatment referrals, contact NEDA at 800-931-2237 or NationalEatingDisorders.org.
12. Respect the power of illness.
 - Establish an appropriate treatment plan
 - Collaborate with mental health specialists
 - *Hang in there – your support and concern are important.*



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