

A Physician's Role in Preventing Eating Disorders



Doctors are on the front lines of eating disorders prevention and early identification. They are uniquely situated to help with the development of positive body image, spot early warning signs and promote overall health. During the course of routine appointments, doctors are able to practice all three levels of prevention in their daily practice: universal, selective and targeted/indicated. They can also make well-meaning mistakes that could trigger disordered eating and unhealthy attitudes towards weight. Physicians should take steps to educate themselves on eating disorders in order to ensure that they are providing the best possible care to their patients.

How Can Doctors Practice Prevention?

Universal Prevention is intended to reduce risk factors for eating disorders through improved policy, education and social action. Doctors can practice universal prevention by:

- Educating patients about nutrition and health
- Promoting positive body image and healthy physical activity
- Helping families to communicate effectively, maintain healthy relationships, and build self-esteem
- Guiding parents and children through the challenges of growth and individuation

Selective Prevention is intended to prevent eating disorders by targeting individuals at risk for any eating disorder due to biological, psychological, or sociocultural factors. Doctors can practice selective prevention by:

- Noticing changes in physical parameters such as growth, weight and vital signs
- Sharing concerns regarding risk factors and warning signs and providing initial counseling
- Consulting with schools, athletic organizations and other influential groups

Targeted/Indicated Prevention is intended to prevent the development of an eating disorder in individuals with warning signs and/or clear risk factors. Doctors can practice targeted/indicated prevention by:

- Familiarizing themselves with resources in their area and referring patients for appropriate care
- Sharing with the patient their observations regarding the patient's condition and history and the potential consequences of disordered eating
- Educating patients about the positive benefits of treatment
- Monitoring medical status and keeping patients stable while treatment proceeds
- Joining an interdisciplinary team, including mental health professionals, setting a positive example of collaboration
- Advocating for appropriate care when third party payers deny it

Danger Zones are potentially harmful statements and actions that can be made by even the most well-intentioned doctor. Doctors should take care to avoid:

- Setting or agreeing to an artificially low body weight
- Supporting restrictive dieting
- Sharing their own concerns about food, weight and body image
- Expressing negative feelings regarding fat people
- Being overly-concerned about the increase in obesity and therefore unable to identify pathogenic weight control
- Not working collaboratively with other providers
- Undermining treatment and reinforcing resistance while attempting to support the patient or family