Screening for Eating Disorders by Primary Care Physicians

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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 patients may not disclose information immediately, your sustained interest and concern may eventually allow your patient to admit his or her problems and accept your help.

Ask About

- History of weight fluctuations; low weight/high weight, desired weight
- Actions taken to maintain, control, or alter weight
  - Dieting
  - Laxatives, enemas, diuretics, appetite suppressants, supplements
  - Vomiting
  - Excessive exercise
- Periods of binge eating or feeling a lack of control over food intake
- Comfort with current weight/shape
- Report of typical daily food and water intake
- Exercise habits (how much? how often? why?)
- Menstrual history
- Family history of eating disorders, depression, obesity, and chemical dependence

Remember: Patients will be sensitive about weight. Check weight in a gown after voiding and facing away from the scale. When possible, do not make comments about their weight or appearance.

Consider Eating Disorders for Patients with

<table>
<thead>
<tr>
<th>Amenorrhea</th>
<th>Elevated amylase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflux/regurgitation</td>
<td>Bradycardia</td>
</tr>
<tr>
<td>Chronic constipation</td>
<td>Syncope</td>
</tr>
<tr>
<td>Elevated creatinine</td>
<td>Dehydration</td>
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<tr>
<td>Metabolic disturbance</td>
<td>Hypoglycemia</td>
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</tbody>
</table>