

November 15, 2021

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Reference: Draft Recommendation Statement and Draft Evidence Review: Screening for Eating Disorders

Dear USPSTF Coordinator:

The Academy of Nutrition and Dietetics (the “Academy”) appreciates the opportunity to submit these comments to the Department of Health and Human Services relative to its October 19, 2021 request for comment on the *Draft Recommendation Statement and Draft Evidence Review: Screening for Eating Disorders*. Representing more than 112,000 registered dietitian nutritionists (RDNs),¹ nutrition and dietetic technicians, registered (NDTRs), and advanced degree nutritionists, the Academy is the world’s largest association of food and nutrition professionals and is committed to a vision of a world where all people thrive through the transformative power of food and nutrition. Every day our members provide medical nutrition therapy for patients who have, or are at risk for, eating disorders in a variety of clinical, public health, and other settings across the continuum of care, often via telehealth, with the flexibilities necessary due to the COVID-19 public health emergency.

The Academy supports issuance of this Draft Recommendation Statement and Draft Evidence review with modifications. Eating disorders are complex and to ensure health equity and effective treatment, it is essential to recognize eating disorders among diverse populations and provide collaborative, multidisciplinary healthcare.

Specific Answers to Questions Asked

Question: Do you think this report includes all of the relevant studies?

The Academy respectfully suggests the report is not complete and recommend inclusion of the following studies.

Austin et al. (2008) evaluated a population screen for eating disorders through the self-reported screening questionnaire, the Eating Attitudes Test (EAT-26). The screen picked up significant differences among girls from different racial/ethnic groups.²

¹ The Academy approved the optional use of the credential “registered dietitian nutritionist (RDN)” by “registered dietitians (RDs)” to more accurately convey who they are and what they do as the nation’s food and nutrition experts. The RD and RDN credentials have identical meanings and legal trademark definitions.

² Austin, S. B., Ziyadeh, N. J., Forman, S., Prokop, L. A., Keliher, A., & Jacobs, D. (2008). Screening high school students for eating disorders: results of a national initiative. *Prev Chron Dis*, 5(4), A114.

Stice et al. (2000) evaluated the Eating Disorders Diagnostic Scale (EDDS), a 22-item self-report scale for adolescents and adults (ages 13-65) that shows reliability and validity to be sufficiently sensitive to detect full and subthreshold diagnosis for anorexia nervosa, bulimia nervosa, and binge eating disorders. The study found strong evidence of reliability and validity of the use of EDSS.³

As the USPSTF weighs the risk-benefit analysis of instituting eating disorder screening for adolescent and adult populations, it is important to note that the parameters used to determine “efficacy” are imbalanced. For example, the widespread use of BMI screening in and outside of a medical setting has shown to have little or no efficacy in reducing childhood obesity rates yet is still widely used. The converse has actually been found to be true, with the percentage of youths with elevated BMIs continuing to grow paralleling the percentage of youth experiencing weight stigma and body dissatisfaction.^{4,5}

Question: Do you agree with how the studies and the overall data have been interpreted?

The report should be revised in that the SCOFF questionnaire is highly effective for the use of detecting in an eating disorder in adult women in the primary care setting. The “I” statement on its own may be misconstrued that there are no appropriate screening tools developed for eating disorders, which is not the case.

Question: What could be done to make the findings in this report clearer?

The statement is clear; see the statement above regarding the SCOFF questionnaire.

Please share anything else about this report that you have not already mentioned

The Strategic Training Initiative for the Prevention of Eating Disorders (STRIPED) defined the extensive social and economic burden of eating disorders in the U.S.⁶ They found that:

- a. 28.8 million Americans will have an eating disorder in their lifetime
- b. 2 million children alive today will have an eating disorder before 20 years of age
- c. 10,200 people die annually (one every 52 minutes) from eating disorders
- d. \$64.7 billion is the yearly economic cost of eating disorders
- e. 53,918 emergency visits are attributed to eating disorders annually
- f. 23,560 inpatient hospitalizations are attributed to eating disorders annually

Diagnoses of eating disorders in adolescents have risen drastically over the course of the COVID-19 pandemic, increasing the need for screening protocols. For example, hospitals across

³ Stice, E., Telch, C. F., & Rizvi, S. L. (2000). Development and validation of the Eating Disorder Diagnostic Scale: A brief self-report measure of anorexia, bulimia, and binge-eating disorder. *Psychological Assessment*, 12(2), 123–131. <https://doi.org/10.1037/1040-3590.12.2.123>

⁴ Richmond T, Thurston, I & Sonnevile, K. (2021). Weight-focused public health interventions—no benefit, some harm. *JAMA Pediatr.*; 175(3): 238-239. doi:10.1001/jamapediatrics.2020.4777

⁵ Portilla, M. (March 2011). Body mass index reporting through the school system: potential harm. *J Am Diet Assoc.*; 111(3):442-5. doi: 10.1016/j.jada.2010.11.018.


⁶ Deloitte Access Economics. (June 2020). The Social and Economic Cost of Eating Disorders in the United States of America: A Report for the Strategic Training Initiative for the Prevention of Eating Disorders and the Academy for Eating Disorders. <https://www.hsph.harvard.edu/striped/report-economic-costs-of-eating-disorders/>.


the nation are reporting the inability to keep up with demand as St. Louis Children’s Hospital in Missouri is seeing 8-15 kids per day for behavioral health issues including suicide attempts, eating disorders, anxiety, and psychosis.⁷ At C.S. Mott Children’s Hospital in Ann Arbor, Michigan, administrators found medical admissions among adolescents with eating disorders during the first 12 months of the pandemic more than doubled the mean for the previous 3 years.⁸ At Arkansas Children’s, the hospital has seen a 150% increase in mental health disorder emergency admissions.⁹ This uptick in mental health conditions has led the Children’s Hospital Association, American Academy of Pediatrics, and the American Academy of Child and Adolescent Psychiatrists to launch “Sound the Alarm for Kids”, which is an awareness campaign to increase funding to address this emergency.¹⁰

The lack of training in the primary care setting directly impacts screening, brief intervention, and referral to treatment. Of 637 medical residency programs, 514 did not offer any scheduled or elective rotations for eating disorders.¹¹ Of the 123 programs that did offer such rotations, only 42 offered a formal, scheduled rotation.¹² The U.S. healthcare system is currently responding to mental health crises and is not effectively invested in early intervention or ongoing management.

The Academy appreciates your consideration of our comment for the information collection: *Draft Recommendation Statement and Draft Evidence Review: Screening for Eating Disorders*. Please contact either Jeanne Blankenship at 312-899-1730 or by email at jblankenship@eatright.org or Mark Rifkin at 202-775-8277 ext. 6011 or by email at mrifkin@eatright.org with any questions or requests for additional information.

Sincerely,


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⁷ Onge, Kim. (July 15, 2021). Missouri facing pediatric behavioral health crisis; hospitals running out of beds for kids. News 4 St. Louis. Retrieved from https://www.kmov.com/news/missouri-facing-pediatric-behavioral-health-crisis-hospitals-running-out-of-beds-for-kids/article_cf9d6e00-e510-11eb-9df3-b7371bcd1e44.html.

⁸ Otto, A.; Jary, J.; Sturza, J.; Miller, C.; Prohaska, N.; Bravender, T., Huyssee, J.V. (2021) Medical admissions among adolescents with eating disorders during the covid-19 pandemic. *Pediatrics*; 148; DOI: 10.1542/peds.2021-052201

⁹ Jensik, Lauren. (September 27, 2021). Arkansas Children’s CEO says mental illness-related ED visits have jumped 150% during pandemic. Becker’s Hospital Review. Retrieved from <https://www.beckershospitalreview.com/hospital-management-administration/arkansas-children-s-ceo-says-mental-illness-related-ed-visits-have-jumped-150-during-pandemic.html>

¹⁰ Ray, Gillian. (November 2, 2021). “Sound the alarm for kids” raises awareness of national mental health emergency in children and teens. Retrieved from <https://www.childrenshospitals.org/Newsroom/Press-Releases/2021/Sound-the-Alarm-for-Kids>.

¹¹ Mahr F, Farahmand P, Bixler EO, Domen RE, Moser EM, Nadeem T, Levine RL, Halimi KA. (May 2015). A national survey of eating disorder training. *Int J Eat Disord*;48(4):443-5. doi: 10.1002/eat.22335.

¹² Ibid.