

Eating Disorders Program

Capital Health Eating Disorder Clinic Physician Referral Criteria

Address:

Room 3005, 3rd Floor
Abbie J. Lane Memorial Building
5909 Veterans' Memorial Lane
Halifax, NS B3H 2E2

Telephone: (902) 473-6288

Fax: (902) 473-6282

The Eating Disorder Clinic provides treatment for those meeting the DSM IV diagnostic criteria for:

Anorexia Nervosa: 307.1

1. Person has lost enough weight so that present weight is at least 15% below minimal normal level
2. Strong fear of weight gain, even if the person is underweight
3. Disturbance in how body weight or shape is experienced or an inability to accept the seriousness of the low body weight
4. In females, the absence of at least three consecutive menstrual periods

Types:

Restricting: No bingeing or purging behaviours

Binge-Purge: Regularly uses purging or binge eating behaviours (vomiting, laxatives, enemas)

The Clinical program does not provide treatment to overeaters, to those with Binge Eating disorder or for weight management concerns.

Bulimia Nervosa: 307.51

1. Recurring binges--eating large amounts of food in a specific time period and feeling out of control .
2. Purging behaviours used regularly, e.g., vomiting, laxatives, excessive exercise, enemas.
3. Binging and purging has occurred at least twice weekly for three months.
4. The persons' evaluation of themselves is overly influenced by their body size.
5. Problems occur other than in Anorexia Nervosa.

Eating Disorder Not Otherwise Specified: 307.50

For disorders that do not meet the above criteria, examples include: Anorexia Nervosa with regular menses; Anorexia Nervosa with weight in normal range despite significant weight loss; Bulimia Nervosa with less frequent binge eating and purging; Bulimia Nervosa involving purging without bingeing, etc

Additionally, patients **must meet other criteria** to effectively take part in and benefit from the treatment program.

1. Body Mass Index (BMI) not less than 18. BMI = Weight (kg). Height (M²) Normal range is 20-27
Below this range, concentration and cognitive function are impaired for learning, problem solving and practice of skills. Preoccupation with food, due to starvation interferes with learning and increase incidences of resistance to treatment. Physical discomfort makes sitting for long periods difficult. Energy is limited. Below this range, the individual may require hospitalization to support weight gain to this minimum before active treatment can begin.
2. The individual must be willing and able to commit to regular weekly attendance in treatment for the duration of treatment.
3. The individual must be willing to actively participate in group sessions to challenge and change thought, behaviours and to practice healthy ways of coping.
4. The individual must be willing to gain weight if below their normal weight range.
5. The individual must be physically stable to participate in the program.
6. The individual must abstain from disruptive behaviours that have a negative impact on other group members and/or the group process.

POLICY OF THE CAPITAL HEALTH EATING DISORDER CLINIC RESPONSIBILITY TO PATIENTS (For Referring Physicians)

1. Our service is meant to complement and enhance the service you are providing for your patients.
2. During the time that your patient is receiving services of our Clinic, we do not assume (primary care) responsibility for their overall case management and well being. We will work to assist them specifically with problems and issues directly related to the Eating Disorder in collaboration with the services that you provide them (medical/physical /psychotherapy/chemotherapy capacity, etc.)
3. We assume responsibility for psychotherapeutic education regarding the eating disorder, encouraging learning and practice of new and healthier coping skills, problem solving, and working on self esteem issues. We will provide support and encouragement to our patients to take risks to address issues, change behaviours, and make life style changes. We cannot assume responsibility for lack of progress in patients who are unable or unwilling to challenge the Eating Disorder during treatment in the Clinic.
4. We are unable to be responsible for any patient actively engaging in suicidal or self destructive behaviour due to our inability in this setting to assure their safety. Alternate treatment would be sought via collaboration with you the referring agent to obtain appropriate care and services for such a situation or with emergency services. Participation in the Clinic may be suspended until the patient is able to take responsibility for their safety and well being.

To make a referral, please complete the Capital Health Eating Disorder Clinic Physician Referral Form and mail/Fax it to:

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