

**LESLIE SIM:** Hello, my name is Dr. Leslie Sim. I am a clinical psychologist in the Department of Psychiatry and Psychology at the Mayo Clinic. Today, I want to talk to you about family-based therapy for anorexia nervosa. Family-based therapy is an evidence-based treatment for adolescents suffering from the illness. What we know about anorexia nervosa is, it's a pretty serious condition, and it really involves-- fear of weight gain is really the hallmark of the disease.

The challenge with this fear of weight gain is that what we know is, people cannot recover from the illness without gaining weight. We also know that this is an illness with a very serious, significant mortality rate, it can become chronic, it can become intractable, it can really diminish patients' quality of life and their overall health. So we have to take this illness very seriously.

Essentially, family-based treatment sees the adolescent as not capable of really making good choices about their health, and they need their family to support them in order to recover. The treatment really mobilizes the parents to help with the refeeding of the child, knowing that the kid cannot do it on their own. They really need help. Essentially, individuals with anorexia nervosa experience a phenomenon called anosognosia. This is where individuals do not know that they're seriously ill. They are not concerned about the low weight, and have a very hard time doing what it takes to get better.

The other challenge with anorexia nervosa is that the symptoms themselves, controlling one's eating, weight, and shape, tend to be what we call egosyntonic in nature. So essentially, this means that the symptoms are consistent with the person's very positive view of themselves. We will see kids who are the valedictorian of their school and have this amazing accomplishment, but if they gain five pounds, they feel absolutely terrible about themselves. And to the contrary, when they lose five pounds, they feel very good about themselves. They think that they're doing something very good. So obviously this makes gaining weight a very difficult endeavor. something that the patient does not want to do.

So traditional psychotherapy, where we work with the individual to help them take action to make change in their life, is not typically successful in an adolescent with this condition. So the other challenge with anorexia nervosa is that these individuals are quite malnourished and emaciated, and are not capable of thinking clearly. We know that a lot of the symptoms of anorexia nervosa are exacerbated by starvation.

In fact, a lot of what we know about anorexia nervosa comes from a study that was done way back in the 1940s. It was actually done up at the University of Minnesota. The goal of the study was to understand the effects of human starvation, so they took normal, healthy male volunteers, and these were all college-aged men with no history of any mental health problems, and they were physically fit, normal weight.

And they had them lose 25% of their body weight in several months. So they put them on a severe calorie-restricted diet, and they found very quickly into the study, the men started showing changes in their behavior. They were irritable, short-tempered, they became very withdrawn, they lacked motivation. Two of the men during the study were psychiatrically hospitalized. The men became very preoccupied with food. They would cut their food up into small bites, they would dilute it with water to make it last longer, they would read cookbooks in their spare time. They became weak, very disabled. And these, again, are a lot of the symptoms that we see in anorexia nervosa.

Interestingly, towards the end of the study, the men were refed. First, their calories were increased systematically, and then eventually they let the men eat whatever they wanted in order to get back to their former weight. And they found that once they were fully weight-restored, all of the symptoms resolved. So we need to apply the information from the study to anorexia nervosa. We need to see that food is the medicine.

And so really refeeding and full weight restoration are key, are central to helping people with anorexia recover. We need, then, to get parents involved, because they know their child best. They are really the experts, and they can help these kids get better. And we do see them get better with this treatment. In fact, the outcomes are quite promising. We know that the majority of younger adolescents with a short history of the illness get better, they have a very good outcome. And five years later, the research says that they tend to stay better. So there's a very low relapse rate. So this is essentially the treatment of choice. Again, I'm Leslie Sim, and thank you so much for listening.