

# The Value of Outpatient Dietitian Contact Time for Adolescents With Restrictive Eating Disorders

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## Background & Significance

- Registered dietitians are credentialed experts in nutrition with training in medical nutrition therapy including assessment, nutrition counseling, and patient education
- Nutrition may not be the focus for visits with non-nutrition providers, limiting time spent on nutrition counseling
- Given the primary role of nutrition in eating disorders, it is crucial that patients are given sufficient time with dietitians to receive nutrition counseling

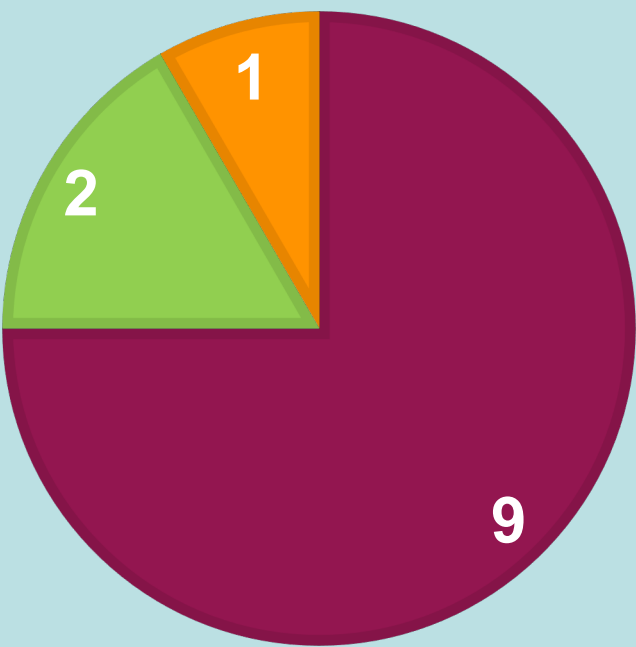
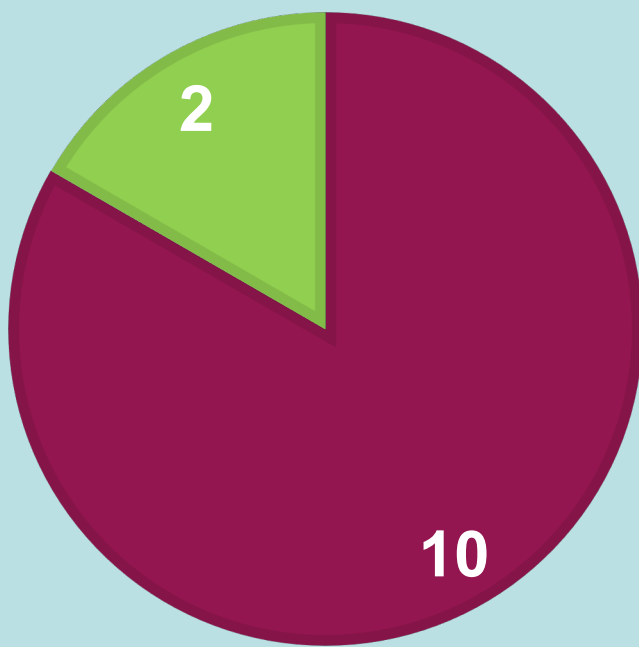
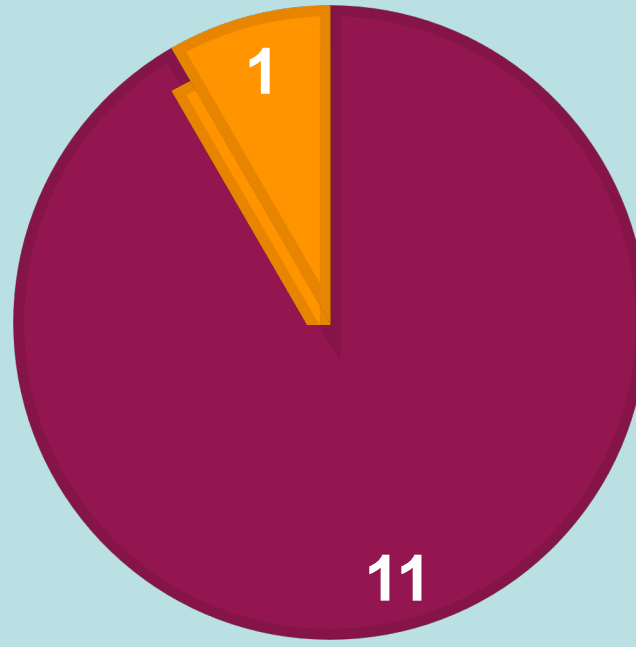
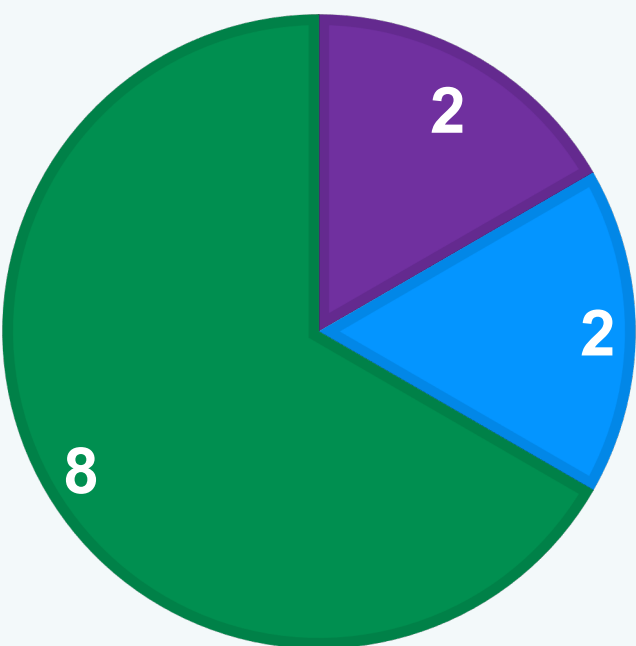
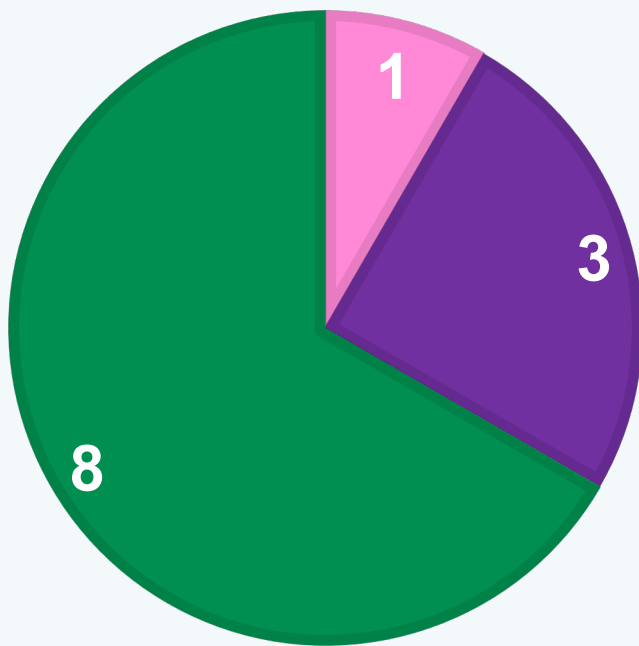
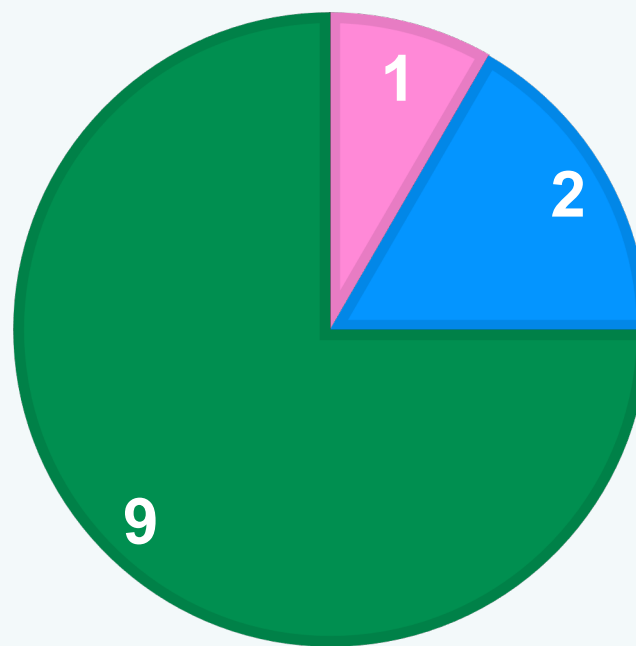
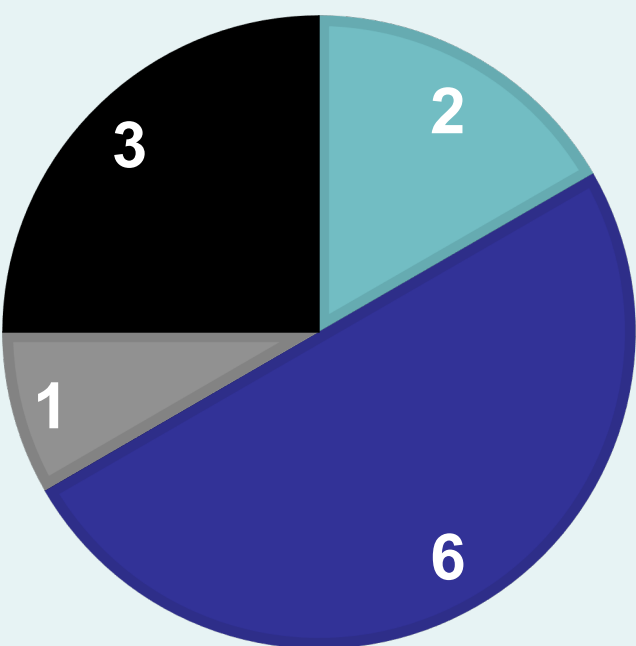
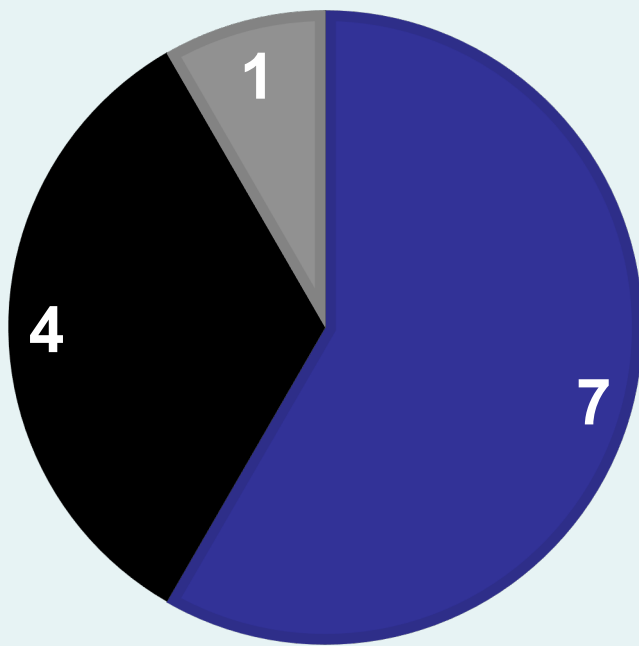
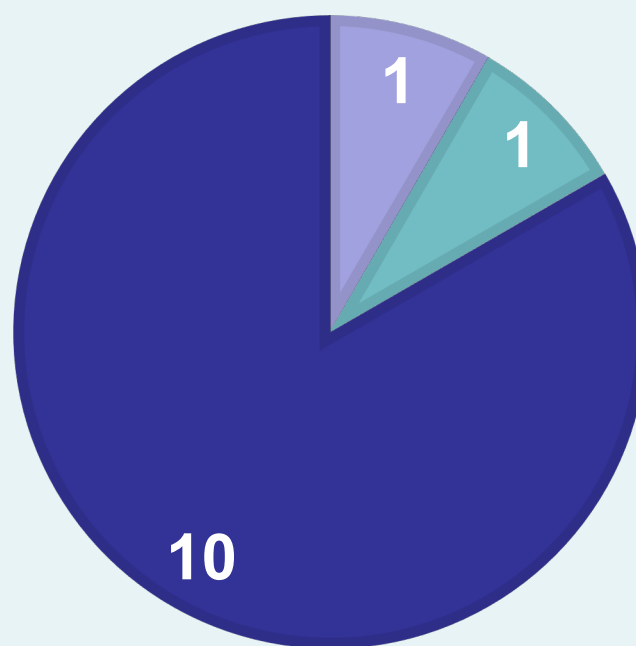
## Objectives

- Compare the differences in treatment progress of patients diagnosed with restrictive eating based on “low”, “moderate”, and “high” dietitian contact hours over a 12-week period
- Identify potential disparities in dietitian contact time based on patient gender identity, race/ethnicity, and sexual orientation

## Subjects & Methods

- Inclusion criteria for chart review:
  - Patients diagnosed with a restrictive eating disorder who participated in the Coordinated Care Model at Seattle Children's Adolescent Medicine Program between October 1, 2019, and March 9, 2020 (onset of COVID-19)
  - Attended at least one visit with a dietitian
  - Chart included treatment goal weight
- Data collected: dietitian contact time, last documented rate of weight restoration, last documented percent treatment goal weight, hospitalizations at Seattle Children's Hospital for restrictive eating, and demographic information

## Results

n = 36 patients	Dietitian Contact Time (Hours)		
	Low: 0.25 – 2.25 hrs (n = 12)	Moderate: 2.5 – 3.5 hrs (n = 12)	High: 3.75 – 6.5 hrs (n = 12)
<b>Average Dietitian Contact Time (Hours)</b>	1.25	3.04	5.33
<b>Patients Who Achieved ≥ 95% Treatment Goal Weight</b>	6 (50%)	4 (33%)	7 (58%)
<b>Rate of Weight Restoration:</b>			
• < 0.5 pound/week	10 (84%)	8 (67%)	8 (67%)
• 0.5 – 1 pound/week	1 (8%)	3 (25%)	3 (25%)
• > 1 pound/week	1 (8%)	1 (8%)	1 (8%)
<b>Hospitalized After Completing Outpatient Care</b>	2 (17%)	1 (8%)	0 (0%)
<b>Gender Identity</b>			
<b>Race/Ethnicity</b>			
<b>Sexual Orientation</b>			

## Conclusions & Discussion

- 7 patients with high dietitian contact time achieved ≥ 95% treatment goal weight compared to 6 with low contact time
- 33% of patients with high contact time had a rate of weight restoration ≥ 0.5 pound/week compared to 16% with low contact time
- Dietitian contact time inversely correlated with hospitalization for restrictive eating
- More patients with low contact time identified as nonfemale (3), BIPOC (4), and queer (3) than those with high contact time
- Black and indigenous patients, except for three multiracial patients, were not encountered during chart review including before applying inclusion criteria (n = 50 patients)

## Future Directions

- Initial data suggests that 2.5 – 6.5 contact hours over 12 weeks (~1-3 return visits per month) may support a greater rate of weight restoration
- Reasons for low contact time with dietitians need to be explored
- Identify strategies to overcome barriers to increase engagement with dietitians
- Barriers and solutions to patients identifying as nonfemale, BIPOC, and queer receiving more dietitian counseling time need to be explored by Seattle Children's
- Barriers and solutions to patients identifying as black and indigenous participating in the Coordinated Care Model need to be explored by Seattle Children's