

Dorset HealthCare

# T1DM and Eating Disorder

## Collaborative Care

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- Why explore Eating Disorder in T1DM?
  - How our paths crossed
  - Compassion Project
  - Our integration experience:
    - Things in common
    - Things we do differently
    - Challenges
    - Working together
    - Learning from each other
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# T1DM and Eating Disorder

- T1DE is a serious eating disorder affecting people with T1DM
  - Estimated that **1 in 4 women** and **1 in 10 men** have T1DE
  - Insulin restriction/omission is a unique eating disorder behaviour used to induce weight loss
  - Can develop through a combination of physical, social and mental health factors, as well as the things people with T1DM have to do regularly.
  - Life threatening consequences; Diabetic ketoacidosis
  - 3-fold increase in the risk of death
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# *“The world’s most dangerous eating disorder”*

- **Awareness and understanding is low amongst healthcare professionals.**
- **People with T1DM and Eating Disorder do not always receive the joined up healthcare they require in order to get better.**
- **The long term consequences of both disorders can lead to increased mortality, morbidity, chronic complications, critical incidents and health care utilisation.**



# How Our Paths Crossed

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- Awareness raising and initial contact resulting in first national day conference.
  - Professional clinical liaison
  - Dr Helen Partridge, Consultant Diabetologist, Bournemouth Diabetic and Endocrinology Centre, Royal Bournemouth Hospital and Dorset Healthcare Eating Disorder Service
  - Trying to engage a young lady with T1DM and history of significant weight loss and poor diabetic control over the last year. BMI 14. Suspected Eating Disorder.
  - Joint clinic assessment appointment
  - Joint MDT working
  - Community, Day Service and Inpatient treatment
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# What We Have In Common

- **MDT approach to treatment**
- **Need to establish positive rapport – engagement is key**
- **Establish trust, understanding and acceptance**
- **Community treatment**
- **Aim is to be able to eat flexibly and regularly**
- **Focus on physical health**

## T1DM Management

- Focus on meal content, timings
- Support patient to self manage
- Perfect glycaemic control
- Medical Management
- Goal is to live the healthiest life you can
- Diabetes shouldn't stop you from doing anything

## ED Management

- Avoid calorie/ carb counting
- Family/carer involvement
- Treatment more 'prescriptive'
- Psychological and behavioural treatment
- Goal is recovery. 1/3 cases will be severe and enduring
- Eating Disorder will stop you living a fulfilling life

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# ComPASSION Type 1 Diabetes Project

- 1 of 2 national Pilot sites to trial and test an integrated diabetes and mental health pathway to support people suffering from T1DM and Eating Disorder and stop them 'falling through the net'.
  - Share lessons learned and resources to support the continued development and expansion of the integrated pathway and hub and spoke model.
  - Commissioned by the NHS Diabetes Programme Board
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# Challenges

- Identifying cases
- Differentiating ED from 'Diabetes Burnout' or self neglect relating to comorbid psychiatric condition
- Geography – Working across borders
- Best place to see patients?
- Working across transitions eg. all age EDS vs. Paeds/Adult service
- Working with teams that have different resources and offer different services

# Specialist MDTs

- **Consultant Diabetologist**
- **Consultant Psychiatrist in Eating Disorders**
- **Diabetic Nurse Specialist**
- **Eating Disorder Specialist Practitioner**
- **Psychologist specialising in T1DM**
- **Specialist Diabetes Dietician**
- **Specialist Eating Disorder Dietician**

# Aspirations

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Share our experience and learning with colleagues from other Diabetes and Eating Disorder Services in Wessex

Develop and evaluate an integrated, patient-centred care pathway

**A work in Progress!!**

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# Learning from each other



Dorset HealthCare  
University  
NHS Foundation Trust

Teaching each other through observation, joint case management, informal discussion, joint Conferences/  
Teaching events

- Meeting and talking to each other
- Observing each other work
- Learning about the conditions
- Joint assessment and follow up. Both expertise in the room
- Adapting existing evidence based interventions to accommodate both disorders – eg Carer's Support and Training, Family Therapy, online education resources
- Learning from Patient/ Carer experience



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# **2nd National Eating Disorders/Diabetes Conference**

**4 July 2019  
Bournemouth**

