

## Support for Eating Disorders and Disordered Eating at the Student Health Centre

We know that eating disorders are common and periods of transition such as starting or returning to university can be a high-risk time for eating disorders and disordered eating to develop, re-emerge or worsen.

Here at the Student Health Centre we want to do all we can to support you to keep yourself well and get the most out of your university experience.



Full recovery from eating disorders and disordered eating is possible and we are here to support you with this. Although anyone can recover at any stage, research suggests that the sooner you reach out for support the better your chances of making a full recovery are.

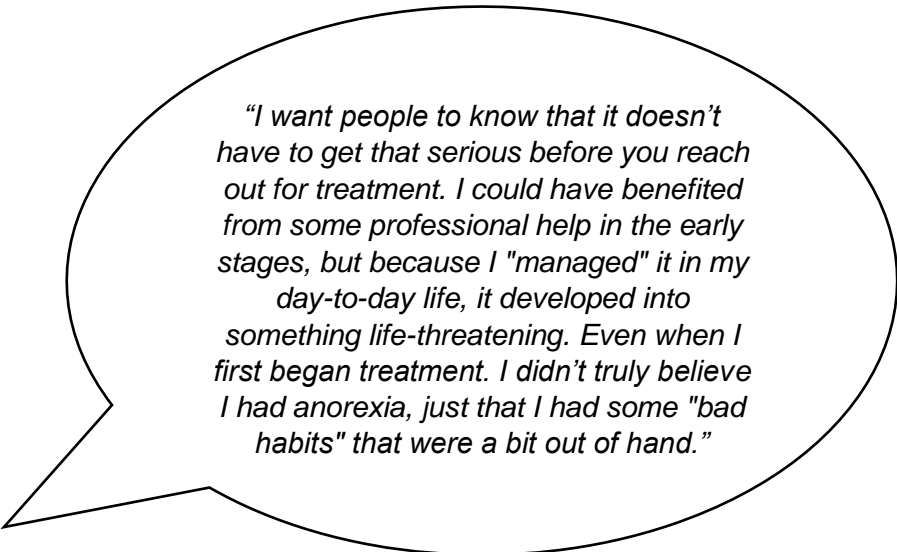
Here at the Student Health Centre we are experienced in managing eating disorders and disordered eating and we would love to help you, whatever stage you are at.

Here is an example of some of the support we have available:

- Consultation with our GPs with special interest and knowledge in eating disorders
- 'FREED' (First Episode Rapid Early Intervention for Eating Disorders) referral into our local community eating disorder service (CEDS), for those who have been experiencing an eating disorder for up to 3 years and are aged 18-25 years old. For more information on the national FREED programme see: [Eating disorder help & support for young people & carers | FREED \(freedfromed.co.uk\)](http://freedfromed.co.uk)

- Standard referral into our local community eating disorder service (CEDS) for those who require specialist support and have a longer history of eating disorders. For more information on CEDS see: [Community eating disorder service | DPT](#)
- Signposting to other relevant local support services including:
  - TALKWORKS- our local depression and anxiety service who also offer cognitive behavioural therapy (CBT) and guided self-help for some people engaging in bingeing or purging behaviours, where depression or anxiety is associated with their eating difficulties [TALKWORKS | Mental Health Support for Devon \(dpt.nhs.uk\)](#)
  - University of Exeter Student Wellbeing [Eating difficulties support group | Student Wellbeing | University of Exeter](#)
  - Eating disorder charities [The UK's Eating Disorder Charity - Beat \(beateatingdisorders.org.uk\)](#)
- Support from our in-house specialist Dietitian for guidance around meeting your nutritional needs, improving your physical health and support with improving your relationship with food
- Nutrition-focused group psychoeducation: **Nourished**. **Nourished** is run by our Dietitian and Healthcare Assistants, aimed at those in or thinking about recovery from disordered eating and eating disorders, or those who have recovered from eating difficulties and are working on relapse prevention. These dietetic-led groups aim to empower you with evidence-based information you can trust on nutrition, food and eating to support you to identify and challenge disordered beliefs and enhance your resilience against nutrition misinformation you come across.
- Physical health monitoring with our Practice Nurses and Healthcare Assistants- we know this can feel daunting, our clinicians are experienced in supporting people with eating difficulties and are sensitive in their approach

If you have a history of an eating disorder, are in recovery from an eating disorder or disordered eating or develop any concerns around your eating, weight or relationship with food please do not hesitate to book an appointment to speak with us about this so that we can ensure the right support is in place and agree a plan with you that feels supportive.



*"I want people to know that it doesn't have to get that serious before you reach out for treatment. I could have benefited from some professional help in the early stages, but because I "managed" it in my day-to-day life, it developed into something life-threatening. Even when I first began treatment. I didn't truly believe I had anorexia, just that I had some "bad habits" that were a bit out of hand."*

## What to expect from your appointments at the Student Health Centre

It takes courage to speak out and ask for support and we understand that you might feel anxious about this. This section is about giving you an idea of what you can expect when you come to see us.

We are friendly here at the Student Health Centre and are committed to providing you with person centred care that takes into account your individual needs, beliefs and preferences. We are non-judgemental, professional and sensitive in our approach and will do our best to put you at ease during your appointments.

### Seeing a GP

Most consultations are 10 minutes long but it is advised that you request a double appointment to discuss eating difficulties or mental health (20 minutes).

You will likely be asked about what has prompted you to make an appointment, the symptoms you are experiencing, how long they have been going on for and your concerns and expectations.

The GP is likely to ask about eating disorder behaviours you might be experiencing including restrictive eating (e.g. skipping meals, limiting portion sizes, cutting out certain foods/food groups, rules around food or eating, calorie counting), bingeing (eating much larger quantities than would be considered normal for the context often in a short space of time and with associated distress), purging (e.g. making yourself sick or using laxatives or diuretics (water tablets) with the aim of losing weight or to get rid of what you have eaten or had to drink), your relationship with exercise and physical activity, changes to your weight and your thoughts around your weight, shape and eating. They will also ask about your physical health symptoms such as dizziness, fainting, chest pains and your mental health. They may ask about whether you received any eating disorder treatment previously and what you found helpful in the past.

It can feel daunting but try to be as open as you can with the GP about how you are feeling and the impact your eating difficulties are having on you. Understanding how your eating difficulties affect you helps the GP to make an accurate initial risk assessment and agree the best next steps forward with you.

See guidance from Beat about seeing the GP: [Help and treatment for an eating disorder - Beat \(beateatingdisorders.org.uk\)](https://www.beateatingdisorders.org.uk)

### Seeing a Practice Nurse or Healthcare Assistant

All eating difficulties have the potential to cause physical harm. Physical health monitoring is not just about checking your weight, although this can be a useful proxy measure of physical health. Best practice guidance recommends that we perform a range of physical tests to assess overall physical risk. Our eating disorder physical health monitoring appointment slots are typically 30 minutes long. Below is a list of the tests we might perform with explanations of how and why they are carried out:

What we measure	How we measure this	Why we measure this
Weight	We use calibrated digital scales for weight monitoring and weight is measured in kilograms. We will ask that you empty your bladder before being weighed and remove your shoes and any outer layers and empty your pockets. It is sensible to wear light clothing to your appointment to ensure this measure is as accurate as possible. You can request to be blind weighed if you would prefer not to know the numbers but it is important to agree how we will communicate risk to you e.g. if you have lost weight or if things are on track.	You can have an eating disorder or be experiencing disordered eating at any weight, shape or size but, together with other measures, regular weight monitoring helps us to assess physical health risks. Weight loss and rapid changes tell us more about physical risk than the weight by itself. Lots of things affect our weight day to day so some fluctuation is expected. This is why we look at trends more than individual results.
Height	You will be asked to remove your shoes and stand up straight against the wall. We will take a height measurement by pulling down a tape measure fixed to the wall until it touches your head.	Having an accurate height measure helps us to calculate your body mass index (BMI). Although as adults our height usually stays the same, if you have restricted your body's energy availability through engaging in eating disorder behaviours as a child, teenager or young adult you may not have reached your height potential. When people make changes to improve their nutritional intake and status, they sometimes experience some catch up growth. Our height also changes slightly throughout the course of the day. Checking your height makes sure the measurements we have remain accurate.
Body Mass Index (BMI)	BMI is calculated by dividing your weight (in kilograms) by your height (in metres) squared.	BMI gives us a relative figure of your weight compared to your height. The taller we are, the higher our weight needs to be to be a healthy BMI. The healthy BMI range for most adults is between 20-25kg/m <sup>2</sup> .
Mid-upper arm circumference (MUAC)	Occasionally we will take a measurement of one of your arms in place of or as well as a weight measurement, if we feel weight is unreliable e.g. due to fluid, or if measuring weight is not possible. The distance between your shoulder and elbow will be measured and a measuring tape will be wrapped around your arm halfway between these two points. The measurement will be recorded but individual results are unlikely to be fed back to you.	This measure indicates to us whether you are losing weight if weight on the scales is unreliable or not possible. We aren't looking at arms specifically, it is just a proxy measure of nutritional status and changes over time and arms are generally a more accessible body part which are less invasive to measure and are less affected by day-to-day fluid shifts. The measurement doesn't tell us much on it's own and for this reason we prefer not to feedback the reading to you. We are looking at trends over time.



Blood tests	A small needle will be inserted, usually into your arm which will feel like a sharp scratch, the clinician will tell you when to expect this and you might find it helpful to look away. It helps if you have had something to eat and drink beforehand and your arms are warm. If you prefer you can lie down on the examination couch to have your blood taken.	All blood markers have a normal range. In health we expect all results to fall within these ranges. Engaging in eating disorder behaviours can in some cases cause levels to go outside of the normal ranges. We are checking to see if anything has gone out of range that might need correcting. Low levels of certain blood markers such as electrolytes can be very dangerous and if not corrected can be fatal. In malnutrition we may see changes that indicate to us that the body is struggling to maintain its function or that stores of certain nutrients (such as iron or B12) are low. People experiencing eating disorders can be extremely medically unwell and still have normal blood tests. Normal results are therefore not a cause for reassurance, although abnormal ones are a cause for concern.
Blood pressure and heart rate	We will first ask you to lie down on the examination couch. An inflatable cuff will be placed on your arm. The cuff will inflate before deflating as it takes a reading of your blood pressure. This might feel like a tight squeezing sensation for a very short time but is not painful. Your pulse (heart rate) will be taken at the same time. It's important to relax and not talk during this time, because this is when your blood pressure is measured. We will then ask you to stand up and will repeat the measurement.	Blood pressure and heart rate measurements indicate to us whether your heart and blood vessels are healthy and strong. The body can struggle to maintain healthy blood pressure and heart rate when it is malnourished. This can lead to low blood pressure or a drop in blood pressure from lying or sitting to standing which can cause dizziness and fainting in some people.
Temperature	A digital thermometer will be placed in one of your ears for a couple of seconds to take a reading. The temperature will be reported in °C.	When the body is malnourished it can struggle to maintain normal temperature as this uses a lot of energy. Our body needs to keep its temperature within a narrow range at all times to allow all the chemical reactions of the body to take place effectively. If your temperature is very low this indicates to us that the body is struggling to maintain its basic function. If your temperature has been consistently low and is suddenly normal again this could be the body trying to generate a fever to fight off an infection and may indicate that you are unwell.

Muscular function	<p>We may ask you to complete a grip strength test <u>or</u> a 'sit up, squat, stand' test.</p> <p>A hand grip strength test involves squeezing a 'hand grip strength dynamometer' which will give a reading in kilograms. This is compared to normal reference ranges for adult males and females.</p> <p>A sit up, squat, stand test is a two-part test:</p> <ol style="list-style-type: none"> <li>1. You will be asked to first lay on your back on the floor before attempting to sit up into a seated position, using your hands only if needed</li> <li>2. Next you will be asked to squat down to the floor from standing and stand back up, using your hands only if needed</li> </ol>	<p>This is a functional measure to see if your body is becoming weaker. Low or falling scores in these tests indicates to us that your body is struggling to maintain it's function.</p>
Electrocardiogram (ECG)	<p>You will be asked to lie down on the examination couch and remove most of your upper clothing. A number of small, sticky sensors called electrodes will be stuck onto your arms, legs and chest. These are connected by wires to an ECG recording machine. You will be asked to lie very still and quietly whilst the machine measures your heart rate and rhythm. The test is painless.</p>	<p>ECGs are used to check your heart rate and rhythm.</p> <p>The heart, like all organs and tissues in the body, can be impacted by engaging in eating disorder behaviours. Malnutrition can cause the heart to beat more slowly and become weaker. Purging behaviours make the body lose electrolytes. Electrolytes help muscles to contract normally. When electrolyte levels are too low or too high in the body this can cause abnormal heart rhythms and can be fatal.</p>

It is likely that you will be asked to come for monitoring on a regular basis as it is helpful for us to see the trends and changes in your results over time rather than results in isolation. We will tailor the frequency of monitoring and which tests you require based on your previous results and current symptoms that you tell us about.

NB: How often you are asked to come in for monitoring does not reflect how serious your eating difficulties are!

### Seeing a Dietitian

A Dietitian works with you to support you to make positive changes in eating behaviour, develop an accurate understanding of healthy eating and increase confidence in making flexible food choices, to support long term health. If you are accepted for treatment under the community eating disorder service (CEDS) you will be able to access 1-1 dietetic support from their service if required. We also have an in-house Dietitian who offers 1-1 support for people experiencing eating difficulties who are not able to access support from CEDS.

### 1-1 support from our Dietitian

At the initial assessment the Dietitian will be looking to better understand how your eating difficulties have developed over time, your previous experience of dietetics and treatment, and the impact your eating behaviours have upon your physical health and wellbeing. They will explore your beliefs and understanding around food and nutrition. Together you will consider what feels important to you and agree some nutrition related goals and a plan to help you to begin to work towards changes that you feel ready to make.

You can decide after your initial appointment whether you would like to engage in a number of 1-1 sessions to support you to work towards agreed goals or the Dietitian can signpost you to helpful resources to explore and you will be welcome to rebook in future if further support is required.

Most consultations are 30-60 minutes long. Typically the initial dietetic assessment is closer to 60 minutes whereas any follow ups will likely be shorter than this. A pre-appointment form is often sent out ahead of the initial assessment in order to gather information and get you thinking about what you want to get from the appointment.

### Nutrition-focused group psychoeducation: Nourished

When you are experiencing an eating disorder or disordered eating it is easy to lose confidence in what or how to eat to support your health. There is a multitude of misinformation about 'healthy eating' from various sources, in recent years most notably through social media.

This new dietetic-led group series will cover a variety of topics relating to nutrition, set in the context of recovery from eating disorders and disordered eating. We will be aiming to separate fact from fiction around nutrition and broaden your consideration of nutrition beyond body weight alone. Through this, we hope to empower you with the scientific knowledge to challenge disordered or unhelpful beliefs around food and nutrition and enhance your resilience against nutrition misinformation you come across.

**Nourished** is open to anyone registered at the Student Health Centre who feels they are experiencing an eating disorder or disordered eating, as well as those who have recovered from eating difficulties and are working on relapse prevention. The group will be held in a room on the main Streatham Campus site. Details of group dates and times, location and topic will be advertised in the Student Health Centre waiting room and on our website.

We will ask for your name and date of birth upon arrival to allow us to add a short entry to your medical notes to record your attendance. The Dietitian will deliver a presentation on the weeks topic and you will be given opportunities to ask any questions during the session. It is up to you how much you interact in the session- you are welcome to sit quietly and observe or to share your questions, thoughts and reflections. Please bear in mind that this is not group therapy. We will agree ground rules/expectations at the start of each session.

## What we expect from you

- We ask that you engage with your individual treatment plan and any recommendations made by us or by other agencies involved in your care regarding your physical or mental health.
- Please book appointments as requested by us or by other agencies involved in your care.
- Please attend appointments booked by or for you on time, please allow enough time before your appointment to check in at reception.
- If you are unable to attend your appointment, please contact us with as much notice as possible to cancel and rearrange, please do not miss the appointment without telling us or cancel without rearranging.
- We ask that you are proactive in arranging physical health monitoring for periods where you will be unable to attend the Student Health Centre face to face, for example over the university holidays. We are happy to provide a letter to your local GP practice, but we require you to provide us as far in advance as possible with the name and contact details of your local practice and details of how long you will be there for. You will also need to register with your local practice temporarily as a 'temporary resident' and arrange appointments with them directly.
- If you permanently move out of the Exeter area we expect you to re-register at your local GP practice as a permanent resident.
- We encourage you to prioritise your health- the university's Student Wellbeing team can support you with putting reasonable adjustments in place to support you to attend appointments for your mental and physical health.
- We expect you to take responsibility for seeking sooner medical attention when required. This includes seeking urgent medical attention if you develop any symptoms of concern, such as:
  - Sudden breathlessness
  - Chest pain or palpitations
  - Sudden weakness
  - Fainting or collapsing
  - Thoughts to harm yourself or end your life
  - Any other change to your physical or mental health that concerns you
- Please familiarise yourself with the University of Exeter briefing statement on eating disorders: [Briefing on eating difficulties \(exeter.ac.uk\)](http://exeter.ac.uk)