There is hope! Help for Disordered Eating

Many people recover from eating disorders and disordered eating. If you have eating concerns, there are resources available to assist you. Take the first step and reach out to someone.

Resources at Kansas State University:

To make an appointment or get information on current charges, call:
Lafene Health Center
785.532.6544
www.k-state.edu/lafene
Counseling Services
785.532.6927
www.k-state.edu/counseling

Counseling Services and/or Lafene Health Center can also provide information on health care providers in the Manhattan and surrounding communities who specialize in the treatment of eating disorders.

Programs commonly used for referrals:

Behavioral Health Services,
Mercy Regional Health Center, Manhattan
www.mercyregional.org

Pawnee Mental Health, Manhattan
www.pawnee.org

Eating Disorder Center of Denver
www.edcdenver.com

OMNI Behavioral Health
Omaha, NE
www.omnibehavioralhealth.com

The Renfrew Center, www.renfrewcenter.com

Remuda Ranch, www.remudaranch.com

Children’s Hospital of Denver
www.thechildrenshospital.org/conditions/psych/eatingdisorders

Or visit: www.edreferral.com for information on providers & programs in the student’s city of residence.
The philosophy behind eating disorders treatment at Lafene and K-State is one of treating the whole student. Eating disorders affect people emotionally, socially, and physically. Treatment therefore utilizes the expertise of a multidisciplinary team.

**Treatment Options**
A student may undergo initial assessment for disordered eating by contacting:
- a counselor (from Counseling Services at K-State or an off-campus therapist),
- a medical provider at Lafene Health Center OR
- the registered dietitian at Lafene.

This is often a decision made by the student based on his/her personal preference and comfort level with the individual provider.

After the initial assessment, the student may be instructed to schedule an appointment with other members of the treatment team. After appropriate team members have assessed the student, one of the following recommendations will be discussed with the student:

**When the eating disorder history and severity level indicate short-term outpatient care:**
- the student may be encouraged to consider available options on campus (usually one to two semesters) or in the community. Such services may include nutrition, medical, and psychotherapy services.
- the student will meet regularly with one or more team members and may also be encouraged to participate in group therapy services when available.

**When the eating disorder history and severity level indicate that more intensive or long-term care is required:**
- the student is referred to community providers or regional facilities that offer the appropriate level of care. (See links to programs/facilities on back.)
- These programs often offer individual, group, and/or family therapy at a level not feasible in outpatient settings such as the college campus.

**When the eating disorder history and severity level indicate residential services are required** the student is referred to various programs that offer in-patient care for severe eating disorders.

**Appointments with Treatment Team Members – What to Expect**

**Physician:**
The role of the physician, as overall coordinator of medical care, with assistance from other medical professionals, is to help prevent and/or treat the medical ramifications of disordered eating.

Your initial visit includes:
- a thorough history and physical examination to determine if you are at risk or currently have an eating disorder.
- any necessary diagnostic tests (e.g., lab, EKG, bone density) to help your physician evaluate any physical effects resulting from disordered eating.

**Psychologist or Social Worker:**
Your counselor’s role is to assist you in identifying underlying issues that may contribute to your eating behaviors and to help you formulate healthier coping tools. Several important factors will be discussed, including:
- your disordered eating symptoms.
- your coping skills and support system.
- body image.
- level of functioning (eating, sleeping, use of substances or medications).
- suicide risk assessment.

**Dietitian:**
Your dietitian’s role is to help you establish a healthier eating pattern and reduce harmful nutrition beliefs and behaviors that can undermine your recovery. In the initial assessment, you will be asked about:
- your typical food and beverage intake.
- activity level.
- eating behaviors and body image concerns.

A customized meal plan will be provided based on estimated calorie and nutrient requirements (determined by activity level, gender, age, height and weight). You will not be pressured to ‘eat’ or rapidly change current behaviors; rather, you will be coached to achieve gradual nutrition improvements to support recovery.

**Your Role on the Treatment Team**
Asking for help can be a difficult and gradual process. The treatment team will support, guide, and sometimes challenge you. In order for treatment to work, you must be engaged in the process. This includes:
- Remaining open and honest with all team members.
- Addressing concerns with treatment providers as they occur.
- Regularly attending visits with each team member (physician, therapist, dietitian) to ensure health and safety.
- A willingness to work on body image, eating behavior, exercise behavior, and relationships outside of appointments.
- An openness to feedback and trust in the process of recovery.

**Are You at Risk?**
Free, confidential and anonymous online self-screening at www.k-state.edu/lafene/nutri_info.htm

**Eating Disorder Symptoms that May Require Urgent Care**
- Dizziness, fainting, shortness of breath
- Chest pain
- Prolonged/painful constipation or diarrhea
- Blood in stool or vomit
- Uncontrollable inability to keep down any food or fluids

**Ultimate Treatment Goals**
- Medical/physical stability and restoration of physical health
- “Normalized”, non-restrictive eating (variety, balance, nutritional adequacy and comfort with food)
- “Normalized”, safe physical activity (not excessive or compulsive)
- Absence of purging behaviors
- Healthy coping mechanisms
- Improved mental health
- Social support in place to minimize or prevent relapse during stress