Disclosure to Participants

- Notice of Requirements For Successful Completion
  - Please refer to learning goals and objectives
  - Learners must attend the full activity and complete the evaluation in order to claim continuing education credit/hours

Effective Strategies for Identifying an Eating Disorder and Navigating Treatment Options for Patients with type 1 diabetes and an Eating Disorder (ED-DMT1)

Stunkard’s Figure Rating Scale, http://aje.oxfordjournals.org/content/158/8/792/F1.expansion
33% of girls with Type 1 diabetes will have an eating disorder.
Insulin = Fat
Increase in A1C & decrease in weight
Decrease in testing of BG
“Forgetting” meter and/or records
“I don’t like shots.”
Fear of lows
Repeated hospitalizations for DKA
Multiple medical appointments
Long times between appointments
Anxiety about being weighed
Frequent lows (binging / purging)
Wide fluctuations in BG control for no reason
Dry skin, loss of hair

• Restricting
• Restricting with purging
• Restricting with bingeing & purging
• Bingeing
• Self induced vomiting
• Laxative use
• Ipecac abuse
• Diuretic abuse
• Compulsive exercise

PLUS
the option of withholding insulin
There are NO anorexics, bulimics or diabetics. There are only PEOPLE with these illnesses.

Bibliography