



Treatment of an adolescent with an eating disorder in a psychiatric ward. Nurse's point of view.

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Abstract

An eating disorder is a life-threatening mental illness that usually occurs at a young age. The disease occurs more in girls than in boys. The disease is primarily treated on an outpatient basis. Sometimes treatment needs to be provided in a psychiatric ward.

The purpose of this study was to review existing research evidence on how nurses can support adolescents with eating disorders at the ward so that recovery from the illness can begin. Data was collected from two different data bases: PubMed and MedLine (EbscoHOST). The search gave three articles that was analyzed using content analysis. Two different categories emerged: nurse related factors and nurse-patient related factors.

In conclusion, for the treatment of a young person with an eating disorder to progress in a psychiatric ward, the nursing staff should have knowledge of the eating disorder as an illness and its treatment, the ability to empathize, and the ability to establish a reliable treatment relationship with the adolescent and their family/caregivers so that the patient's recovery in the ward could be accomplished.

Keywords/tags (subjects)

Eating disorder, adolescent, Psychiatry, Psychiatric ward

Miscellaneous (Confidential information)

None.

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1 Introduction

An eating disorder is a life-threatening illness in which a person has a distorted image of their own body. This can be seen as obsessive thoughts and anxiety towards eating (Ruuska 2022). The most well-known forms of eating disorders are anorexia nervosa and binge eating disorder (Fredriksson, Koskinen and et.al, 2018, 54).

According to the World Health organization, WHO, “in 2019 almost 3 million children and young people suffered from an eating disorder” (World Health Organization, Eating disorders, 2022). Due to the corona, the number of eating disorder among adolescences has been increasing and this can be seen in Finland as well. According to a study conducted by HUS, in the years 2018-2021, the number of eating disorder patients in psychiatric care among adolescence has increased by 69%. At the same time, the number of patients who need voluntary or involuntary ward treatment has also increased (Häkkinen & Raevuo, 2022).

This thesis deals with how young patients with eating disorders are treated in the ward compared to Finnish current care guidelines – recommendation. Finnish current care guidelines are “independent, evidence-based national treatment guidelines” (Käypä hoito, 2023), Recommendations are drawn up in one association of specialists for doctors, nursing staff and citizens as a basis for treatment decisions. “Finnish Current Care Guidelines can be used to improve the quality of care and reduce variations in treatment practices.” (Käypä hoito, Mitä teemme? 2023).

2 Eating Disorder

2.1 Definition

Eating disorder is a disease that changes a person's attitude towards food while endangering their physical and mental well-being (Ruuska, 2022). The actual cause of the onset of the disease is unknown. Known is, that psychological, biological, genetical and family -cultural factors can play a role in the onset of the disease (Käypä Hoito, 2013).

Eating disorders usually begin at a youthful age and are more common among girls than boys. After falling ill, the person often continues to lead a normal life, which makes it more difficult to detect the disease by an outsider. (Ruuska, 2022). The person himself is often numb to the disease and does not understand or admit that he needs help (Pulkkinen & Vesanen, 2017).

Common to all people with eating disorders is a distorted body image and a need for control. Many are also afraid of growing up and/or changes in their bodies. (Pulkkinen & Vesanen, 2017). Although eating disorders have common characteristics, these can be divided into several different subcategories according to more specific symptoms typical of the disease. The most typical of these is adolescence anorexia nervosa or atypical anorexia nervosa. In it, the young person controls his eating in such a way that he becomes underweight. The young person does not internalize this underweight, but still imagines that he is fat due to a distorted body image. (Fredriksson, Koskinen and et.al, 2018, 550).

According to ICD-10, International classification of diseases, which is created by World Health Organization, WHO, and used nationally in Finland, anorexia nervosa can be diagnosed when (Terveyden ja Hyvinvoinnin Laitos, 2020) the young person's weight has fallen below 15% of the average weight for height or the BMI is no more than 17.5. Weight loss is caused by avoiding fattening foods and/or using products that promote weight loss and forced exercise. The person also has a distorted body image and various somatic ailments, such as missing periods, growth, and the normal development of puberty. (Fredriksson, Koskinen and et.al, 2018, 551). An atypical anorexia nervosa disorder is spoken of when all the criteria for an anorexia nervosa disorder are not met or the symptoms are mild (Käypä Hoito, 2014).

Another very typical eating disorder in young people is bulimia nervosa. Its criteria are periods when the young person has overeaten at least twice a week for three months. The young person cannot control his food-related thoughts or his compulsive need to eat. The young person also imagines that she is fat and tries to control the fattening effect of food by vomiting, not eating, and by using various slimming products (Fredriksson, Koskinen and et.al, 2018, 155). When all the criteria are not fully met, we speak of an atypical bulimia nervosa.

Binge-eating disorder is a form of eating disorder in which the sufferer devours larger than normal portions of food in a brief period. A person eats even if he is not hungry or is already uncomfortably full of food. Eating results in anxiety, self-loathing, guilt, and depression (Käypä Hoito, 2014).

2.2 Prevalence

Three percent of the total population suffers from eating disorders. Of these, around three million are adolescents (World Health Organization, Eating disorders, 2022). For an unknown reason, girls tend to develop an eating disorder more than boys. They have a 17% higher risk of developing an eating disorder than boys. According to Fredriksson, Koskinen et.al, “young people aged 13 to 18 years, approximately 0.9-2.6% of girls and 0-0.3% of boys suffer from anorexia. Bulimia nervosa affects 0.4-2.3% of girls and 0.1-0.5% of boys. Binge eating disorder affects 1,9-3,5% of girls and 0,3-2,0% of boys” (Fredriksson, Koskinen and et.al, 2018, 552). According to a study conducted by the University of Helsinki in 2020, “there would be more people with eating disorders than expected, and the disease would affect more than 10% of Finnish young people at some point in their lives” (Syömishäiriöliitto Syli, Yleisyys). Less than 40% of all these patients end up in treatment, less frequent for psychiatric ward treatment.

An eating disorder is a life-threatening mental health disorder that usually affects a person with some other mental health disorder. The most common mental health disorders are anxiety or depression. More than a third can be diagnosed with a personality disorder. Many also have characteristics of autism spectrum disorder and obsessive symptoms (Käypä Hoito, 2014).

2.3 Treating adolescence with eating disorder in psychiatric ward

Patients with eating disorders are treated on an outpatient basis. However, sometimes the patient's somatic and psychological condition requires that the patient be treated in specialized medical care. Because it is a mental disorder, patients are always treated in a psychiatric ward when their somatic condition allows. However, not all patients are admitted to the ward. They must meet the criteria set out in current treatment guidelines for treatment at the ward to be arranged (Käypä Hoito, 2014).

2.4 Criteria for the implementation of ward treatment

The need for hospital care is assessed by a psychiatric doctor when the adolescent's BMI has fallen below 15 kg/m² or the adolescent has lost at least 25% of their body weight in the short term. Their systolic blood pressure has fallen under 70 mmHg. Adolescent also has low heart rate, below 40/min or changes in ECG (Käypä Hoito, 2014). When assessing the need for psychiatric ward care,

attention is often also paid to the adolescent's metabolism and whether there are any disturbances. The young person's other psychological well-being is also assessed, as is the coping of the whole family (Pulkkinen & Vesanen, 2017).

In general, ward treatment is carried out as voluntary treatment. If the patient does not want treatment, he or she may be placed in involuntary treatment following the Mental Health Act §8, conditions for prescribing treatment. This article defines how an adolescent may be placed in compulsory care, to ensure their health and safety and prevent their illness from worsening without proper treatment (Finlexin, 1990).

3 Nursing perspective in treatment of adolescence with eating disorder at the ward

Ward care must always have a specific goal. Treatment usually begins with the correction of the patient's nutritional situation before moving on to other therapeutic measures. An individual treatment agreement is created for the young person according to the ward's care model. Treatment agreement specifies for example, daily calorie intake, how often blood pressure and weight will be monitored and restriction of the movement (Syömishäiriöliitto SYLI, Missä ja miten syömishäiriötä hoidetaan). Every member of the nursing staff should follow the treatment agreement to safeguard the care. At the beginning of treatment, adolescent is less likely to be aware of their own illness and would like to continue implementing harmful thoughts, beliefs, and routines at the ward (Meskanen, 2014). It is nursing staff's responsibility to ensure that adolescent is not able to continue these routines but commits to the care. Care more efficient when everyone in the nursing staff is aware of the things the young person is currently committed to.

For the treatment of a young person with an eating disorder to be successful at the ward, a confidential relationship should be established with adolescent for the treatment to be successful. A similar relationship should be established with the parents of a patient with an eating disorder, as the disease affects not only the adolescent, but also his/her relatives. Nurses should recognize and know eating disorders as a disease and identify the most common family-centered forms of therapy to be able to offer psychoeducation to the family and/or caregivers in addition to the young person (Karjalainen, Keski-Rahkonen and Nyberg, 2020). Cooperation helps young people recover

from eating disorders when they understand that all parties want to help and motivate them to recover.

4 Purpose, aim and research question

The aim of this study is to find evidence-based information of nursing inventions on how to take care of an adolescent with eating disorder in psychiatric ward. This literature review is to supply information on developing nursing care models in the adolescent psychiatric ward. The research question is: “how nurses can support and treat an adolescent with eating disorder in psychiatric ward with evidence-based methods.”

5 Methodology

5.1 Literature review

A literature review is an examination of a specific topic using material already collected on the topic (Hewitt-Taylor, 2017, 1.1). Using ready-made material allows you to examine the selected topic from a new, up-to-date perspective (Torraco, 2016, 404). The literature review was chosen for this thesis because material corresponding to the research question was readily available and because of the ease of use of the research method.

When collecting material for literature review, the reliability and accuracy of the material used must be considered. The bias of the matrix and errors should also be considered and, if necessary, eliminated. This can be avoided when certain steps are followed in data collection. First, a topic was defined for the work, after a clear research question was set that would lead through the research work without the work expanding beyond the chosen topic. (Hewitt-Taylor, 2017,1.2, 60-63) Subsequently, data collection of relevant and evidence-based scientific articles began, paying attention to the relationship of the original source to the research question. (Ahonen, Jääskeläinen et al., 2013, 291, 295). After this, the collected data was reviewed before commissioning to ensure the quality, topicality, and usefulness of the data for the research question (Torraco, 2016, 419, 420). Extensive material was found, and several diverse sources were used to ensure the reliability of the material.

5.2 Scientific article research progress

Before collecting the material used in the work, it was investigated whether there was enough comparable and reliable material available for the study question. The search terms were defined according to the PICO system, which, according to Nishikawa-Pacher (2022) “is a formula that is designed for clinical research. It contains four elements, which the corresponding research question must be formed to obtain research aims.” These four elements include target group, intervention, or implementation of the problem in question, comparison and/or control of the treatment and outcome that was observed (Nishikawa-Pacher, 2022, 1,6). The search terms were defined in such a way, that they partly answered the research question (Table 1).

Table 1 Research question according to PICO

PICO elements	Keywords
Patient	Adolescents or teenagers or young adults or teen or youth
“AND”	
Intervention	anorexia nervosa or anorexia or anorectic or eating disorder
“AND”	
Comparison	Nursing interventions or nursing care or nursing support or best practice or
Outcome	nursing treatments

Two databases were used for article research: Medline (EbscoHOST) and PubMed. The search for articles was carried out using keywords according to the PICOS table, that has been described in Table 1: Adolescents “OR” teenagers “OR” young adults “OR” teen or youth “AND” anorexia nervosa “OR” anorexia “OR” anorectic “OR” eating disorder “AND” Nursing interventions “OR” nursing care “OR” nursing support “OR” best practice “OR” nursing treatments.

5.3 Data selection process

The articles used in the literature review had to meet certain criteria for them to be accepted for research use. Articles corresponding to the research question of this literature review, which did not contain information about treating adolescence with eating disorder in psychiatric ward (e.g.,

articles about treating adolescence with an eating disorder in outpatient care), were excluded. Articles, that had been published after 2013 or did not correspond to the Finnish treatment model for eating disorder patients, were also excluded. Articles that corresponded to the Finnish treatment model and the research question, had been published after 2013 and for which abstract and full text were available for JAMK students, were included. The process by which the articles were approved to this study, is shown in Figure 1.

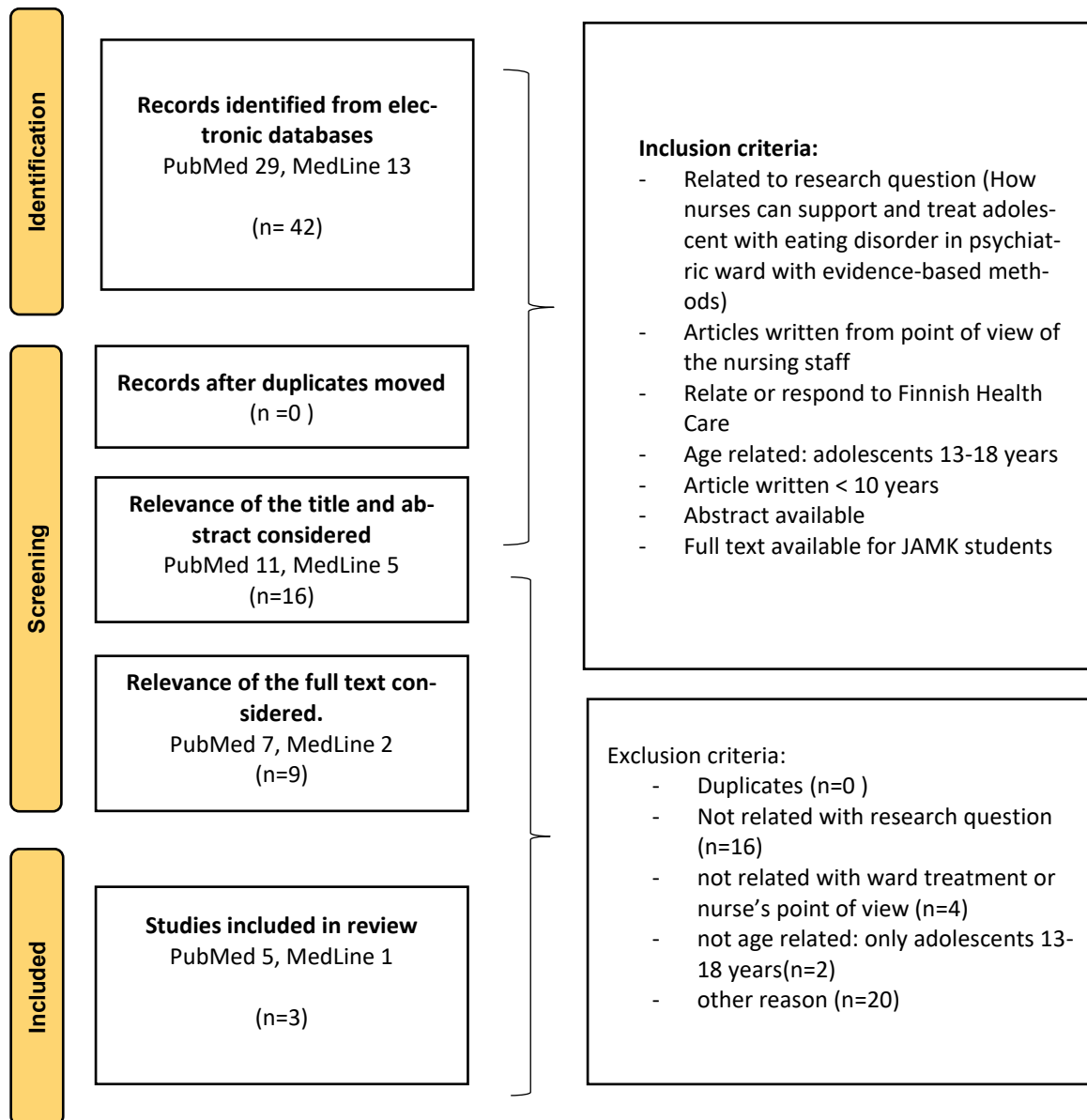


Figure 1 PRISMA Flow chart of data selection process

MedLine search engine found 29 articles that matched the search, of which 20 were eliminated directly based on the title. The headings in question did not refer to the research question. Two

(n=2) articles were rejected based on an abstract with strong indications that the text would not provide answers inclusion criteria. Five (n=5) articles were eliminated based on the full text. The texts did not provide sufficient information, related to the nurse's perspective on nursing or related to the research question, or did not answer the inclusion criteria. Two (n=2) articles were selected, because they answered in all inclusion criteria.

PubMed there was 13 articles that matched the search terms. Of these, eight (n=8) were eliminated based on title alone. The headings did not meet the inclusion criteria. Of the five (n=5) remaining articles, four were eliminated based on abstract, which indicated that the articles did not answer the research question. Only one (n=1) article was accepted based on the entire text, as the only one to answer the research question.

5.4 Approved articles selection process

Articles for literature review were carefully selected according to the selection process described in Figure 1. In the selection, particular emphasis was placed on how well the articles answered the research question or corresponded to Finnish current care lines. The articles also had to correspond to the given age range, adolescents 13-18 years old, and contain information about the treatment of patients with eating disorders in the ward from the nurse's point of view. One of the three articles used in the work was conducted in Australian and two in Taiwan.

The Swiss article, written by Chang, Chen, Huang, and Liao ,2022, describes from a nurse's perspective the challenges of treating an eating disorder patient from a psychosocial perspective. The article has been implemented using a questionnaire. Golden, Kapphan, Keane-Miller and Sainani 2013, based on a literature review, address the effect of nutrition on the length of ward care. Chen and Wu ,2021, conducted interviews about nurses' experiences in treating eating disorder patients. In a collapsed, all three articles dealt with nurses' experiences of treating an eating disorder patient in ward settings.

5.5 Data Analysis

The data considered the writing pose has been analysed throughout the writing pose. This ensures that the material found is suitable for the research work and that the selected material corresponds to the research question. The material collected during the process has been read through several times. The necessary data has been extracted from the texts, the similarities have been combined, as well as the differences between the articles discussed around the phenomenon (Kyngäs, Kääriäinen and Mikkonen, 2020, chapter 1.4, 2.2).

The selected data was collected in an excel spreadsheet, where color-coding was used to classify the collected data into different categories and highlight similarities to facilitate further work. Table 2 below shows the criteria on which classification was made.

Table 2 Process of Data Analysis

Initial classification	Subcategories	Main Categories
Nurse affected background: experience, professional competence, knowledge of the disease	Nurse related factors	Factors affecting the success of treatment
Establishing a confidential patient-caregiver relationship: nutrition, mental health, emotions	Nurse-Patient related factors	
Family-centred care and psychoeducation	Understanding the disease	Strategies in enhancing care
	Support for the family meals	

6 Results

Remaining three articles all raised same categories regarding how nurse can support and treat patient with eating disorder at the psychiatric ward. These categories affect to the success and result to the treatment. Main themes and its subcategories are represented in Table 3.

Table 3 Main categories and subgatecories of the results

Main Categories	Subcatecories
Nurse-related factors	Professional competence
	Characteristic features
Nurse-patient related factors	Reliable care relationship
	Reliable relationship with parents/caregivers

6.1 Nurse related factors

Chen and Wu (2021) as well as Chang, Chen, Huang, and Liao (2022) all point out in their articles how much the success of the treatment of a patient with an eating disorder is influenced by the **professional competence** of the staff. Staff members who had studied and worked with an eating disorder were more likely to achieve therapeutic results with adolescent with an eating disorder. They have the right kind of expertise and understanding of the disease and what kind of support the person with an eating disorder needs during treatment.

Nurses who have less knowledge and expertise in treating an eating disorder patient generally have a negative attitude towards their treatment. This has a negative impact on the patient's symptoms and treatment results, as it is easy to focus only on weight instead of holistic treatment (Chen and Wu, 2021 and Chang, Chen, Huang and Liao, 2022).

Characteristic features of the nursing staff also affect to the results of the treatment. Those nurses who are friendly, approachable and show support to the patient in their difficult condition had a positive effect on the treatment outcomes of the patient with an eating disorder (Roche, Stein-Parbury and Zugai, 2013). Patients received a feeling from these nurses that they were cared

for, seen as themselves and that their recovery was taken seriously. It was easier to consume calories with these nurses when they supported the young person in a distressing eating situation and were able to be flexible about how well the eating situation corresponded to a normal eating situation.

Nurses that were using coercion and blackmail to obtain therapeutic results were creating the impression to adolescents with eating disorder that they were being punished with treatment. These patients were dissatisfied with treatment instead of being motivated to get better (Chen and Wu, 2021,1391-1392).

6.2 Nurse patient related factors

Nurses who were able to establish **reliable relationship** with adolescent with an eating disorder had better therapeutic outcomes than those who could not. Adolescents were able to express their feelings, thoughts and receive treatment (Chang, et al 2022, 7-8). These nurses were able to create adolescent more individualized treatment for the eating disorder and to motivate them to heal from the disease (Chen and Wu, 2021, 1392).

Nurses who were able to establish **reliable relationship** with the adolescent's **family and/or caregivers** were also able to create better therapeutic outcomes than those, who lacked with it. An eating disorder is a mental disorder that affects not only the patient, but also his/her loved ones. Nurses who succeeded in establishing a trusting relationship with the patient's loved ones were better able to provide them with psychoeducation and support at different stages of treatment. They were also able to guide loved ones in managing anxiety and how adolescents with eating disorders should be supported in eating situations at home. A trusting relationship with the family and/or guardians also created trust in the patient himself, which was found to have positive effects on the treatment of an eating disorder patient at the psychiatric ward (Chang, et al 2022,4).

7 Discussion

In line with research question "**how nurses can support and treat an adolescent with eating disorder in psychiatric ward with evidence-based methods**, review and findings indicate the competence and professional skills of nurses have an impact on the recovery of adolescent with an eating

disorder. Wu and Cheng (2021), Chang et al, (2022) and Roche et al. (2013) indicated all that the nature of the nurses and their attitude towards eating disorders were also considered to play a role in the adolescent's recovery. Nurses with professional competence, understanding and experience in treating eating disorders had better therapeutic outcomes than nurses with less understanding and competence. Experienced and educated nurses were able to identify all the characteristics of an eating disorder, to see the adolescent behind the illness, and to give them and their loved ones the right kind of support and psychoeducation in the fight against the eating disorder. The same nurses also can support the young person in both anxiety and difficulty eating, and to create a safe atmosphere where the young person can freely express their own feelings and thoughts, which is also important in recovering from an eating disorder. (Wu et al, 2021, 1387-1392; Chang et al. 2022, 4-8; Roche et al., 2013, 2024).

Research shows that nurses' professional skills and knowledge of eating disorders alone are not enough to promote adolescent's recovery from eating disorder in a psychiatric ward. Nurses must also be empathetic, able to see the patient behind the illness and support them in challenging situations. Nurses must also be able to work with adolescent's family/caregivers to promote their well-being with family-centered methods. Treatment should focus on building a relationship of trust, mental health, emotions and correcting nutritional deficiencies so that the adolescent is able to face their illness and start recovery supported and motivated by nurses.

8 Ethical considerations, validity, reliability and limitations

According to Bandhari (2021) "ethics in research are principles that guide your research process and practices". For this reason, a certain protocol must be followed to ensure that ethics are met when conducting research. This includes, among other things, protecting the rights of people who have carried out research, adhering to academic research and enabling the validity of the study (Bandhari, 2021). To maintain ethics in this research, the systematic procedure of literature review has been followed: searched for articles, used known search method, findings and avoided bias. The articles used were found on two different search engines and had been published in a few different countries. The articles were also peer-evaluated and published between years 2013-2023. The autonomy of nurses, patients and hospitals mentioned in the articles had been protected. The confidentiality of the published information was ensured by the publisher. The risk of plagiarism was eliminated by a bibliography and quotations.

Reliability and validity measure the consistency and reliability of research work by repeating the same method. When the same result is obtained with the same method, it can be said to be reliable. When the results are reliable, they usually are validity too (Middleton, 2019). This research ensured reliability and timeliness by repeating the same research methods in several different systems using the same criteria. This ensured the correctness of the study, the reliability of the results and eliminate biases.

Although the results of the study were strong, the limitations would come from the use only two databases. The search for information was also limited by the number of free full text articles for JAMK students. This limited the author's ability to add one informative material to the study for financial reasons. The research is also limited by the fact that it has been written by one author with limited experience in research work and its compilation.

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Appendices

Appendix 1. Summary of article review

Number	Author and Title	Aim and Purpose	Participants	Methodology, data collection & analysis	Findings & Results	Country of study
1.	<p>Chang Y-S., Chen S-L., Huang L-C. & Liao F-T. (2022)</p> <p>The treatment Experience of Anorexia Nervosa in Adolescents from Healthcare Professionals' Perspective: a qualitative study</p>	<p>Aim of the study was to explore healthcare professionals' experiences from treating adolescents with eating disorder in hospital ward.</p>	<p>16 healthcare professionals: 10 nurses, 3 dieticians & 3 physicians</p>	<p>Qualitative study. The survey was carried out with a paper form that included questions about nurses' experiences of treating eating disorder patients at the ward. Questionnaires were send to staff working on a ward.</p> <p>Data was analyzed with the qualitative content analysis.</p>	<p>The key factors were:</p> <ul style="list-style-type: none"> -Awareness of illness -Support of the parents -Setting goals for treatment -Education of the staff -Interaction: soft and hard approach 	<p>A hospital-based study.</p> <p>Taiwan.</p>

2.	<p>Chen S-L. & Wu Wan-Ling (2021)</p> <p>Nurses' perception on and experiences in conflict situations when caring for adolescents with anorexia nervosa: A qualitative study</p>	<p>Aim of the study is explore nurses' experiences and observations in conflict situations whencaring of adolescents with eating disorder.</p>	<p>10 female nurses.</p>	<p>Qualitative study. Implemented Target sampling method.</p>	<p>The main findings were the difficulty of establishing a therapeutic relationship with the patient and influencing their mind by motivating the adolescent to receive treatment and recover from the illness.</p>	<p>A hospital-based study.</p> <p>Taiwan.</p>
3.	<p>Roche M., Stein-Parbury J. & Zugai J. (2013)</p> <p>Effective nursing care for Adolescents with anorexia nervosa: a consumer perspective</p>	<p>Aim of the study is find out how, from the patient's point of view, the nursing staff could develop their own skills so that the recovery of a person with an eating disorder from the illness could begin to materialize.</p>	<p>8 adolescents recovering from eating disorder.</p>	<p>Qualitative study. The data was collected through interviews and conducting a thematic analysis.</p>	<p>The key factors were:</p> <ul style="list-style-type: none"> -Gaining weight through positive nursing impacts - The impact of a positive approach and providing the right support on the outcome of treatment 	<p>A hospital-based study</p> <p>Australia</p>