Eating Disorder Education in Medical Students

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Background

- Eating Disorders (EDs) can affect every body system, leading to osteoporosis, infertility, heart disease, and even death, to name a few.¹
- Early detection is key in the treatment and management of the disease and is associated with improved prognosis¹, yet more than half of all eating disorders go undetected.²
- Almost 20 percent of anorexia nervosa patients will die within 20 years if they go untreated and they face the highest premature mortality rate of any psychiatric illness.¹
- Those suffering from eating disorders need to be understood, helped, and supported; but first they must be detected. The question arises: do doctors feel competent in doing so? Are medical students being educated in how to properly diagnose Eating Disorders?

Objectives

To identify the competence, comfort level, and ability of medical students with regard to eating disorders and to examine the gaps in medical education in this topic.

Methods

- We conducted a cross sectional study to assess how competent medical students feel about the topic of eating disorders by asking about their familiarity with basic terms, knowledge-based questions, usage of screening questions and past experiences. We also solicited feedback on their education on this topic.
- A 19 question survey via Qualtrics was sent to deans of medical education and departments of psychiatry in medical schools throughout the country.

Measurements

- Familiarity of basic terms were analyzed quantitatively on a Likert scale.
- Three knowledge-based multiple choice questions were scored.
- Mean scores were analyzed based on year of medical school education using ANOVA.

Participants Profile

- Total respondents n = 287
- Rising 1st year (35) rising 2nd year (150) rising 3rd year (67) rising 4th year (35)
- Total schools collected data from: 19
- Male (90) female (185) did not identify (12)

Knowledge Based Questions Score

- Medical School Year vs Total Score

Familiarity of Terms

- Anorexia
  - Likert Scale
  - Rising 1st Year
  - Rising 2nd Year
  - Rising 3rd Year
  - Rising 4th Year

- Bulimia
  - Likert Scale
  - Rising 1st Year
  - Rising 2nd Year
  - Rising 3rd Year
  - Rising 4th Year

- Binge Eating Disorder
  - Likert Scale
  - Rising 1st Year
  - Rising 2nd Year
  - Rising 3rd Year
  - Rising 4th Year

- Body Dysmorphic Disorder
  - Likert Scale
  - Rising 1st Year
  - Rising 2nd Year
  - Rising 3rd Year
  - Rising 4th Year

- Orthorexia
  - Likert Scale
  - Rising 1st Year
  - Rising 2nd Year
  - Rising 3rd Year
  - Rising 4th Year

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Conclusion

With each subsequent year of medical school training, students become more familiar with the terms anorexia, bulimia, binge eating disorder, and body dysmorphic disorder.

With each subsequent year of schooling, students scored statistically significant higher on knowledge based questions.

89% of medical students receive less than 4 hours of didactic training in eating disorders in the first two years of medical school.

64% of rising third and fourth year students felt there are gaps in their training on the topic of eating disorders.

Respondents also indicated a lack of knowledge on how to approach eating disorders in a clinical setting.

Future Research

Future analysis of this data includes:
- Eating disorder knowledge of residents and physicians in primary care fields.
- Differences in training among medical schools and residency programs.
- Utilization of screening questions in practice
- Outside experiences of students/residents/physicians who feel more competent with diagnosis and treatment of eating disorders.

Summary

- With each subsequent year of medical school training, students become more familiar with the terms anorexia, bulimia, binge eating disorder, and body dysmorphic disorder.
- With each subsequent year of schooling, students scored statistically significant higher on knowledge based questions.
- 89% of medical students receive less than 4 hours of didactic training in eating disorders in the first two years of medical school.
- 64% of rising third and fourth year students felt there are gaps in their training on the topic of eating disorders.
- Reported gaps in training included how to talk to patients when an eating disorder is suspected, how to talk to younger patients, and treatment of eating disorders.
- Respondents also indicated a lack of knowledge on how to approach eating disorders in a clinical setting.

Conclusions

- As students continue in medical education they become more familiar with eating disorder terms; however, most respondents feel there are gaps in knowledge of eating disorders.
- Due to this, more research should be completed regarding medical education and curriculums on eating disorders.
- More emphasis should be placed on diagnosis and treatment of eating disorders in the clinical setting. This should include training on how to approach and have conversations with patients when an eating disorder is suspected.

Bibliography

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- Differences in training among medical schools and residency programs.
- Utilization of screening questions in practice
- Outside experiences of students/residents/physicians who feel more competent with diagnosis and treatment of eating disorders.