

Beat

Eating disorders

NEED TREATMENT FOR AN EATING DISORDER?

The first step is a GP appointment.

www.beateatingdisorders.org.uk

WHAT'S THIS LEAFLET FOR?

Eating disorders are complex illnesses, and it's best to get help early.

There are specialist eating disorder services that exist to treat people. There are a few ways to access them, but one of the most common ones is your GP referring you to a specialist.

This leaflet helps you, a supportive person like a family member or friend, and your GP all work together to get you the support you need. It's based on the guidelines on eating disorders from the National Institute for Health and Care Excellence (NICE) and the Scottish Intercollegiate Guidelines Network (SIGN). GPs should use this or similar guidance when making decisions about their patients' healthcare.



WORRIED YOU HAVE AN EATING DISORDER?

You might have complicated feelings about recovery. The idea of giving the eating disorder up can sometimes make people feel sad, angry, or scared. But getting treatment is really important.

If you're feeling ready to talk to your GP, these are some things you can do:

- Make an appointment straight away. The sooner you can get treatment, the better. You can ask for a double appointment to give yourself more time.
- Take someone along for support if you'd like. Some GPs might ask to talk to you alone for part of the appointment, but your supportive person can come back to talk about the next steps. Have a chat with the person before the appointment about how you'd like them to support you.
- Give your GP as much information as you can, including the GP section in this leaflet. You could write down your symptoms, worries, and questions before the appointment, so you don't have to think on the spot.

GPs don't specialise in eating disorders, so ideally they'll refer you to someone who does – a specialist who can look at your needs and work with you to come up with a treatment plan that works for you.

But because GPs aren't eating disorder specialists, they might have some misconceptions. If they do, you can use the table in this leaflet to help you respond.

If they won't refer you to a specialist, you have the right to ask to see another GP. Don't be daunted and don't give up. You deserve support, and the sooner you get a referral, the better.

WORRIED ABOUT SOMEONE ELSE?

If you're worried about someone you know, you might not be sure what to do next. If they haven't said anything to you, you might be wondering how to bring it up with them. There's a page called 'Supporting someone with an eating disorder' on our site that can help you with that.

- If they've come to you with their concerns, make sure you meet their bravery and trust with compassion and understanding.
- Support the person to set up a GP appointment as soon as possible, or do this for them. You can ask for a double appointment to allow more time.
- Offer to come to the appointment. They may want you to be in the room for all or some of it, or just stay with them while they're waiting. They may want you to do most of the talking, or take a backseat. Find out what role they'd like you to play.
- Write down things you've noticed that have worried you, so you can refer to them in the appointment. Let the person you are supporting know you have done this so they are prepared for the discussion. If the person has asked for support, you can help them do this for themselves as well.

The goal of the GP appointment is to get a referral to a specialist. Sometimes GPs can have misconceptions about eating disorders – the table in this leaflet can help you talk through these.

If the person you're supporting doesn't get a referral at their first appointment, they might be put off from asking for help again. Make sure they know they deserve treatment, and that you'll support them to get it. If they're getting nowhere with their first GP, help them make an appointment with a different GP.

WHAT IF MY GP WON'T REFER ME?

Lots of GPs will refer you without any issues. If they're hesitant, it might be for one of the reasons below. Here's some guidance you can point to that will help you handle that and get the referral you need.

For more information, visit beateatingdisorders.org.uk. You can call or email our Helpline to talk about anything in this leaflet.

Misunderstandings you might come across	What that means
The symptoms haven't been going on very long, or don't seem very serious.	Delaying can mean the illness gets worse, meaning treatment needs to be longer and more expensive.
There's no need for a referral unless your weight is very low.	Eating disorders are serious health conditions. Someone's weight can go up, down, or stay the same – this shouldn't be the deciding factor in whether to refer someone. Guidelines list lots of mental and physical factors the GP should look at.
This might just be a phase, so it's worth waiting to see if it goes away on its own.	Eating disorders aren't a phase and don't usually go away without treatment. A "wait and see" approach is far more likely to lead to the illness getting worse, which is why guidelines are clear that any suspected eating disorder needs to be referred to a specialist straight away.
You don't have to restrict your food to have an eating disorder.	You don't have to restrict your food to have an eating disorder. There are different types of eating disorders that present in different ways. For example, bingeing can be a key symptom alongside feeling a loss of control over eating. Identifying that a person has an eating disorder and ensuring they get early treatment for their illness gives them a better chance of recovery.
You can't have an eating disorder because you have another condition.	Guidelines are clear that patients should be assessed and receive treatment at the earliest opportunity, which is why healthcare teams should collaborate so your eating disorder and other conditions can be treated.

GP GUIDE TO EATING DISORDERS

Eating disorder charity Beat have designed this leaflet to help patients who are worried they have an eating disorder get help quickly.

The information below is based on research and is in line with NICE and SIGN guidelines for eating disorders which cover anorexia, bulimia, binge eating disorder and OSFED (other specified feeding or eating disorder). NICE and SIGN are clear that people with eating disorders should get treatment as soon as possible.

This section summarises the guidelines and clears up some common questions and misunderstandings about eating disorders.

Does my patient have an eating disorder? If so, what do I do?

Guidelines suggest looking at a range of factors when deciding whether to refer someone for treatment. But it can take a long time for the person to recognise they're not well and ask for help, or for people around them to realise what's happening. So if they've reached the point of coming to their GP with their concerns, that's a strong sign in itself that they have an eating disorder.

The best thing you can do is listen to their concerns, and make it clear they deserve support. Because of the highly specialised level of care needed for people with eating disorders, it is recommended that you refer them straight away for specialist assessment. Make sure you enter "eating disorder" into SNOMED CT / READ code.

Would it be better to wait to see if things get better or worse before referring?

No – patients should be assessed and receive treatment at the earliest opportunity. Delaying this can lead to serious long-term consequences.

Their weight is not dangerously low – should referral be delayed?

No. Eating disorders are mental illnesses – you can't gauge whether someone has one using only physical signs like weight, which may go up, down, or stay the same. No single measure like BMI should be used to decide whether to refer them or not.

What if my patient is denying there's a problem?

It's very common for people with eating disorders to struggle to recognise they're ill (DSM 5). Not seeing that there's anything wrong can be a symptom in itself.

That means they might have made this appointment because someone close to them has encouraged them to. You should consider the concerns of people like family members when deciding if you should refer someone. If there's any doubt, don't wait – refer to specialists.

Who is in the best position to make an assessment?

It is recommended you refer anyone with a suspected eating disorder straight away to a community-based, age-appropriate eating disorder service for further assessment or treatment.

Thank you for reading this leaflet. By referring your patient for specialist assessment as quickly as possible, you'll help to give them the best chance of a full recovery.

FIND OUT MORE

Learn more about what we do at
beateatingdisorders.org.uk

General enquiries:

0300 123 3355

info@beateatingdisorders.org.uk

Use helpfinder.beateatingdisorders.org.uk
to find services in your area.



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MORE INFO

NEED HELP NOW?

Our Helplines are open every day.

England:

0808 801 0677

help@beateatingdisorders.org.uk

Northern Ireland:

0808 801 0434

NIhelp@beateatingdisorders.org.uk

Scotland:

0808 801 0432

Scotlandhelp@beateatingdisorders.org.uk

Wales:

0808 801 0433

Waleshelp@beateatingdisorders.org.uk

Or follow us on social media:

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As a charity, we rely heavily on fundraising and charitable donations to fund our vital support services, including our print and downloadable resources which we supply free of charge. To find more about how you can support us please visit www.beateatingdisorders.org.uk/support-our-work/ or call 01603 753308

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