

# Staff engagement in the treatment of patients with an eating disorder - A qualitative study of staff experience

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## Introduction

The national clinical programme for eating disorders was launched in 2018, with the publication of the index model of care. Since then, limited progress has been made in the provision of specialist eating disorder services around the country. Currently, there are three Health Service Executive (HSE) funded teams providing specialist care in their respective catchment areas. Throughout the rest of the country, care is provided by general child and adult community mental health teams. The lack of widespread eating disorder services has resulted in variable access to treatment for this patient population. With this lack of specialist services, many psychiatrists have limited clinical experience in treating patients with eating disorders. Perhaps, it is due to this inexperience, that some psychiatrists dislike or avoid interactions with this patient population.

## Aim and Objectives

The study aims to describe staff engagement in treating patients with eating disorders, and to identify barriers to the provision of treatment.

## Methods

A qualitative approach was chosen, aiming to capture the subjective experience of psychiatrists who had managed patients with eating disorders. Ethical approval for the study was granted by the Irish Management Institute's Social Research Ethics Committee in November 2019. The study participants were recruited through the issuing of an open invitation. Efforts were made to ensure a diverse sample, with three consultant psychiatrists, five senior registrars and four registrars in psychiatry included. Informed consent was provided by all participants. One pilot interview was carried out to refine the interview schedule this resulted in only minor alterations. Twelve doctors participated in a semi-structured interview. The interviews were audio-recorded, and transcribed verbatim by the author. The data was analysed using thematic analysis. An independent researcher reviewed the data set, and the matrix to establish inter-coder reliability. The chosen researcher had previous experience in analysing qualitative data and also works as a psychiatrist



## Results

The themes identified included providing treatment to patients with a poor prognosis, managing the emotional toll of treating patients with eating disorders, and the subtheme of the internal and external pressure experienced when treating patients with an eating disorder.

### Providing treatment to patients with a poor prognosis

The provision of treatment for individuals with eating disorders is challenging for most psychiatrists, and mental health teams. Multiple factors were found to contribute to this, including the patient's resistance to treatment, and a lack of experience and specialist knowledge.

*"The active resistance that some patients have towards treatment.....is another issue that is difficult to manage. Some patients will not want to give up their eating disorder, and they will view any action that is working towards this very negatively."*

### Managing the emotional toll of treating patients with an eating disorder

The emotional toll of an eating disorder is far reaching, with a significant effect on the patient, their family members or carers, and the psychiatrists involved.

*"You are constantly trying to get the patient to see things from your point of view. You can definitely become the enemy.....that isn't a pleasant experience if it happens."*

### The internal and external pressure experienced when treating patients with an eating disorder

The psychiatrists described an internal pressure they experienced, with the suggestion that recovery for these patients was more pressing compared to other psychiatric diagnoses.

*"I even have the expectation that they will get completely better and this is probably not the case for all of these patients. Maybe there is more pressure from families and that is the issue, like compared to other psychiatric diagnoses"*

The external pressure for these patients to receive specialist treatment was described.

*"Maybe there is more pressure from families and that is the issue, like compared to other psychiatric diagnoses. ... there isn't always understanding by the families of the patients that this isn't always possible."*

## Discussion

The study participants detailed multiple barriers to managing patients with eating disorders. The challenge of treating patients with the morbidity and mortality associated with eating disorders was noted. An emotional toll was revealed to effect the participants, especially with consideration to the patient's resistance to treatment. A unique combination of internal and external pressure was described, with family members, the media and the psychiatrists themselves all contributing to this.