Clinical outcomes from a large sample of college-aged individuals receiving virtual family-based treatment for eating disorders

Katherine Hill, MD, FAAP; Megan Hellner, DrPh, RD

Background

Recent research highlights a notable increase in incidence of eating disorders (EDs) in college-aged individuals, for whom family-based treatment for transition aged youth (FBT-TAY) is a first-line treatment. Central to this approach is inclusion of family in their care. However, young adulthood is marked by increasing independence and diminishing family support. Geographic barriers, lack of trained specialists and difficulty navigating the care landscape can further hinder access to treatment.

The aim of this study was to look at treatment outcomes over time for patients engaged in ED treatment using an novel, virtually delivered FBT-TAY approach.

Methods

Virtual FBT-TAY was administered to N=605 patients ages 18-24 by a five-person team including a therapist, dietitian, medical provider, peer mentor, and family mentor. Measures were recorded at baseline and weekly throughout treatment (other than weight, which was taken twice weekly). Eating disorder symptoms were assessed with the Eating Disorder Examination-Questionnaire Short Form (EDE-QS) and depression and anxiety were measured using the Patient Health Questionnaire-9 (PHQ-9) and General Anxiety Disorder-7 (GAD-7).

Results

- 58% completed 6 months of treatment
- 60% fully weight restored at month 6
- Family attended average of 5 sessions per week
- 48% reported no ED symptoms at month 6 (EDE-QS)

Percent of patients with depression who became subclinical over time (PHQ-8)

Percent of patients with anxiety who became subclinical over time (GAD-7)

Conclusion and Implications

- Patients made meaningful improvements across all clinical measures
- Virtual FBT-TAY can expand access to first-line ED treatment by addressing geographic and psychosocial barriers