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Occupational Therapy
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Picky Eating & When to Intervene

Results from the Duke Preschool Anxiety Study

Selective eating disorder (SE) is a condition common to children in which food aversion prevents the consumption of certain foods. Selective eating is so common that it is sometimes regarded as a normal stage of development that most children will outgrow, but data from the Duke Preschool Anxiety Study published last month in *Pediatrics* challenges that concept.¹ **The data suggest that selective eating announces other psychosocial comorbidities and predicts future anxiety disorders.** The researchers recommend that parental complaints of selective eating disorder trigger greater investigation and intervention.



The prevalence of selective eating disorder among preschoolers is estimated between 14% and 20%.^{2,3} The Duke Preschool Anxiety Study finds the prevalence among developmentally normal preschoolers in the Raleigh / Durham region to be 20.3%. The high prevalence and the fact that some children outgrow selective eating symptoms suggest this might be described as a normal stage of development. However, in some cases, selective eating is known to persist into adolescence and adulthood and to be connected with faltering growth, respiratory tract infections, anorexia nervosa, and susceptibility to chronic illness.^{4,7} In the current study, Dr. Nancy Zucker and colleagues followed 917 developmentally normal preschoolers to begin creating an evidence-based standard for choosing which cases of selective eating merit further investigation.

They compared children without selective eating behavior to children with moderate selective eating disorder (child only eats within the range of his or her preferred foods) and severe selective eating disorder (eating with others is difficult because of extremely limited food range). They found that children with selective eating disorder are 70% more likely to develop or increase symptoms of generalized anxiety disorder later in childhood. Moreover, the presence of selective eating was associated with significantly elevated symptoms of social anxiety, generalized anxiety, and depression. The authors state, "the fact that a behavior is relatively common does not mean that it is harmless." Given that selective eating among preschoolers correlates strongly with important comorbidities, the authors suggest a much more proactive response to reports of parental concern.

The study also evaluated for differences in sensory processing. They found that children with selective eating disorder commonly demonstrate enhanced sensitivity to texture, smell, visual cues, and motion. **The current study adds to a growing body of evidence connecting sensory processing differences with selective eating traits.⁸⁻¹¹ It is likely that sensory sensitivity plays a causal role in both selective eating disorder and generalized heightened anxiety among children.¹⁰** Fortunately, sensory sensitivity and selective eating disorder are patterns modifiable through approaches in pediatric speech and occupational therapy.

Emerge - A Child's Place can provide additional help in terms of transforming picky eaters into children with better, more sustainable nutritional intake while also addressing the full spectrum of differences that may be contributing to anxiety and attention challenges. Sessions may be individual or in carefully enrolled groups. Programs include both education for parents and therapy for children that the children perceive as play.

Please tell parents about Emerge – A Child's Place

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