

AUTISM AND ANOREXIA NERVOSA

MAIR ELLIOTT

YOUNG PATIENT ACTIVIST



@MairElliott1



@MairElliottMH



mairelliott

ANOREXIA NERVOSA (AN)

- An eating disorder characterised by a preoccupation with body weight and restrictive eating leading to dramatic weight-loss.
- The age of onset is typically adolescence and early adulthood.
- It has one of the highest mortality rates of any mental illnesses with 1 in 5 dying due to complications, either physical or emotional.
- Is linked to personality traits such as perfectionism, driven, ambitious, and goal focussed.

AUTISM (ASC)

- Autism is a neurodevelopmental disorder characterised by differences in social communication and interaction.
- Each autistic person has a varying level of functioning, i.e. being able to wash, clean, cook, take care of themselves.
- Autistic people experience sensory information differently to Neurotypicals (non-autistic people), which includes being hyper or hypo sensitive to different types of sensory information.
- Often, autistic individuals will have a strong knowledge base and skillset in a specific area of interest.

ASC IN WOMEN AND GIRLS

- It was long thought that ASC was a male specific condition. Autism research only used male participants, only males received support, the 'male brain theory', etc. perpetuated this belief.
- It has become apparent that it is not a male specific condition, but instead there is a gender difference in how it presents.
- Women and girls can and do have autism, but it looks slightly different to the male presentation.

ASC IN WOMEN AND GIRLS

- Women and girls are far more likely to 'mask' and 'camouflage' – they adapt themselves to the social environment using copycat techniques.
- They are more likely to have a social group due to this, and more likely to have less eccentric 'special interests'.
- They are more likely to internalise distress compared to males who are more likely to externalise distress.

AN AND ASC

- Increasing evidence is showing that roughly 20-30% of women with AN also meet the criteria for an autism diagnosis. (1)
- It is thought that this group of people has the worst outcomes for treatment of anorexia nervosa.
- There may be differences in how the eating disorder starts, presents and the maintaining factors in women with both ASC and AN.

WHAT COULD BE THE DIFFERENCES?

Presentation

- Less concern over weight.
- Use of starvation as a mechanism for 'numbing' sensory overstimulation and anxiety.
- 'Picky eating' or ARFID like presentation.

Maintaining factors

- Routine, rituals and 'obsession'.
- Fear of change.
- No alternative coping mechanisms for sensory processing differences and anxiety.

CURRENT CARE AND TREATMENT IMPLICATIONS

- Standard treatments available on the NHS are aimed at tackling weight and shape concerns/body dysmorphia.
- This is not necessarily relevant to women with ASC, and so is much less likely to show good outcomes.
- Women are often accused of 'disengaging' or 'being in denial' when these standard treatments don't work.
- A lot of women don't get support, or become revolving door patients.

MOVING FORWARD

Step 1

- Research!
- There is research currently being undertaken at UCL by the SEDAF team.

Step 2

- Adapt therapies and treatments to better suit autistic women with eating disorders.
- Ensure members of eating disorder treatment teams also have Autism training.

THANK YOU FOR LISTENING

Any questions?



@MairElliott1



@MairElliottMH



mairelliott