Severe Electrolyte Disturbance In Anorexia Nervosa With Gastrointestinal Complications: Reading Both The Clinical Evidence And The Patient.

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Aims
To use a case report describing a 38 year old female with anorexia nervosa (AN) (purging subtype) who presented with gastrointestinal and neurological symptoms to raise awareness of medical complications of AN, good health literacy to encourage self-care, and the importance of a multidisciplinary team (MDT) approach to management in those less able to self-advocate.

Hypothesis
In this case, functional illiteracy is a more significant factor in contributing to the perpetuation of AN than laxative use or secondary illness gains.

Background
AN has the highest mortality rate of any mental health disorder and is a cause of medical complications and increased mortality, especially in patients who have comorbid conditions and low health literacy.

Methods
The patient’s electronic health records were used alongside attendance on medical ward rounds and discussion with liaison psychiatry.

Results
It was unclear whether her ‘topping up’ with laxatives maintained or worsened the dysregulation or whether purging behaviours maintained the dysregulation. An abdominal radiograph supported the diagnosis of diarrhoea without colitis. Leg cramps were investigated with no abnormalities on nerve physiology tests. She was difficult to manage due to her functional illiteracy, resulting low health literacy, and inflexible information processing style. Her presentation was due to laxative misuse. She developed pitting oedema on her abdomen secondary to high fluid intake and low albumin from malnutrition; fluid restriction and diuretics commenced, laxatives withheld, and specialised psychiatric nursing deployed to control her chaotic laxative usage. By day 22 she was medically cleared.

Conclusions
Complex and seemingly intractable problems at the interface between physical and mental health may lead to secondary illness gains and clinicians inadvertently reinforcing the patient’s helplessness and inaction. It is imperative that healthcare professionals should use an MDT approach to management and ensure good health literacy for patients to feel empowered to self-care.

Bibliography