Torbay and South Devon
NHS Foundation Trust

PATIENT INFORMATION

Selective Eating and ARFID

How to introduce new foods to a Young Person with ARFID or selective eating

Name: _____

Date: _____

Dietitian: _____

Contact: _____

This information is for young people with nutrient deficiencies related to *Avoidant Restrictive Food Intake Disorder (ARFID).* The advice will provide parents and young people with information on food chaining and help find a suitable multivitamin and mineral to support their growth and development. This information is also applicable to young people with selective eating, where no diagnosis of ARFID has been given.

What is ARFID and how may it present in young people?

ARFID is a term that describes someone who is eating a very limited variety or amount of food, not caused by a desire to lose weight or change their body.

It has a moderate-severe impact on their life, including physical compromise and social implications.

ARFID is defined as an eating disorder but is different to other restrictive eating disorders, because it is not driven by a desire to change physical appearance or weight.

ARFID commonly presents as an extremely restricted diet with 10 or fewer preferred foods.

Reasons for an ARFID presentation include:

- Severe texture sensitivities
- An adverse experience with food in early childhood such as choking, vomiting, or an allergic reaction.
- Lack of hunger signals; food can feel like a chore or unnecessary due to lack of interoception

What causes ARFID?

ARFID is not the result of parenting choices.

Young people may have a *biological disposition* to developing it that is triggered by a food-related trauma.

This results in negative feelings and predictions about the consequences of eating. These predictions and feelings towards food can limit the variety or volume of food eaten.

This restriction in variety or volume can result in nutritional deficiencies as key foods groups may be missing. It can also reduce the ability of the young person to expose themselves to new foods as they will only have their perceived preferred food.

'They won't eat that, yet'

'Yet' is a very powerful word.

By using 'yet', it passes on the message that they *can* try new foods and challenge themselves, just not 'yet'

This can help develop a sense of optimism for both you and your young person.

Focus foods

A focus food is a food that you are purposefully and strategically selecting for your young person.

Consider consulting with your Dietitian to identify what food group is lacking, and what is realistic.

A focus food is beneficial because it can:

- Provide structure and a plan
- Provide variety because you are introducing a new food
- Build comfort and motivation

The guidance on focus foods is to pick 3 to 5 to introduce every 1 to 2 months. The expectation is not that all these foods will be in your young person's diet by the end of this time.

Does my young person need a multivitamin?

Almost all young people with ARFID will have a vitamin or mineral deficiency. Over half of young people with ARFID are a normal weight; this is not a way of measuring health, and they may still be *malnourished*.

What multivitamin and mineral your young person needs is dependent on their current preferred foods. Most commonly, young people with ARFID are deficient in Vitamin A, Vitamin C, iron, zinc, Vitamin B12 and Vitamin D.

Vitamins and minerals are necessary for growth and to remain healthy. Most people obtain these through a varied and balanced diet. Young people with ARFID have a restricted intake whereby certain foods or food groups are omitted. Most commonly, there is a reliance of carbohydrates and a lack of fruit, vegetables and proteins.

What multivitamin and mineral do I use?

The multivitamin and mineral you chose should consider your young person's texture preferences and what their diet is lacking. Your Dietitian can help to recommend what is best for your young person. A list of comprehensive multivitamins is listed below:

Name	Type	Price per serving	Flavour
Nutrigen Vitamixin	Sprinkles	£0.43	Unflavoured
Ella Ola Multivitamin	Sprinkles	£1.01	Unflavoured
Wellkid Multivitamin and Mineral	Liquid	£0.25	Unflavoured
Vitabiotics Feroglobin Liquid	Liquid	£0.23	Unflavoured
Nature's Way Alive! Children's Multi-Vitamin	Chewable	£0.33	Berry
Vitabiotics WellKid Multi-Vitamin Smart	Chewable	£0.23	Mixed fruit
Vitaboost kids	Effervescent	£0.15	Orange

SpongeBob SquarePants Multivitamin	Effervescent	£0.65	Tropical

Food chaining

Food chaining is matching preferred foods to new focus foods according to sensory properties such as colour, shape, taste, texture, smell, and temperature.

Food chaining should be led by your young person when introducing and progressing. There should not be pressure to try something new. New foods should be placed on a separate plate, alongside current preferred foods. They should be declared as new food; the goal is not to ‘trick’ your young person into trying a new food.

For example, if your young person eats a specific brand of crisps, these are the steps you may take to introduce new foods. Let your young person know this is a new food and place it on a separate plate.

Six steps to eating a new food

Step 1: Tolerate

Be in the same room as the food; sit at the table with the food in front of you.

Step 2: Interact

Use a utensil to pick up the food, help prepare it, or place it on your plate.

Step 3: Smell

Smell the food in the room, on the table, or on your plate.

Step 4: Touch

Touch the food with a fingertip, lips, teeth, or tongue.

Step 5: Taste

Lick, chew and spit, or chew and swallow.

Step 6: Eat

Eat the new food

Example of food chaining:

1. Preferred crisp brand
2. Similar brand
3. Lower salt crisp
4. Sweet pop chips crisps
5. Puffed cereals e.g honey cheerios
6. Regular cheerios
7. Other cereals

Common questions and answers

Does this mean my young person has Autism?

No, although ARFID is more common in neurodiverse young people due to their heightened sensitivity to stimuli.

Will they grow out of this?

Someone will not simply grow out of ARFID. However, older young people are likely to have more motivation to introduce new foods due to social pressures and their own goals.

Will my young person eat when they are hungry?

Young people with ARFID often have limited hunger signals as may rarely, if ever, be hungry. By creating a routine, and set eating windows, it can mimic hunger.

For example, in teenagers, this may be setting reminders on their phone. In younger children, it may be setting up an eating space at set times and set places.

Are they choosing to restrict food to change their shape?

ARFID is unlike other eating disorders as it is not intentional restriction to change their body shape or weight. ARFID is more driven by texture sensitivities or the fear of negative consequences of eating food, such as choking.

Does my young person need an Omega-3 Supplement?

Omega-3s are found in food sources such as oily fish, nuts and seeds. It is not common that someone with ARFID will accept these. If your young person, can accept a tablet or liquid omega-3, it is beneficial. However, this is not often realistic.

Definitions

Interoception - Interoception refers to the process by which the nervous system senses, interprets, and integrates signals originating from within the body, providing a moment-by-moment mapping of the body's internal landscape across conscious and unconscious levels.

ARFID - Avoidant/Restrictive Food Intake Disorder

Neurodiversity - Neurodiversity is the term that explains the natural variation in everyone's brain, including thinking processes, information processing and learning. Examples of neurodiversity include Autism and Attention Deficit Disorder (ADHD)

Biological Disposition - an increased genetic likelihood or susceptibility to develop a certain disease, trait, or behaviour.

Malnourished - an imbalance between the nutrients your body needs to function and the nutrients it gets. It can mean undernutrition or overnutrition.

Additional notes

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Mission statement

Within available resources, the Department of Nutrition and Dietetics mission is to:

- Raise awareness of the importance of nutrition and apply evidence-based dietetic practice in Health Promotion, Disease Prevention and Treatment of Acute and Chronic Medical Conditions.
- Provide access to the best independent nutrition and dietetic advice and education for patients, carers and all health care professionals.

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For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

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