

PR2.F – Caso di Studio 3 - Bulimia

Descrizione del Caso

- Paziente femmina di 17 anni, residente in un'area urbana, proveniente da una famiglia di status socio-economico medio-alto
- Dall'anamnesi nutrizionale e medica: la paziente ha un comportamento narcisistico con un'alimentazione scorretta da circa 4 anni
- A causa dell'emarginazione all'interno dei gruppi scolastici, la paziente ha problemi ad accettare il proprio peso e la propria forma corporea
- Ha ridotto il numero di pasti consumando un solo pasto al giorno
- Negli ultimi 6 mesi, la paziente ha riferito variazioni di peso fluttuanti \pm 3 kg
- La paziente non presenta sintomi specifici di carenza di micronutrienti o squilibri mestruali.
- Sono stati segnalati episodi di abbuffate/compulsivi 5-6 volte al mese con episodi di senso di colpa
- Episodi di vomito autoindotto si verificano 1-2 volte al mese.
- Il livello di attività fisica era compreso tra 1 e 2 ore al giorno, 7 giorni alla settimana.
- Dopo la valutazione psichiatrica, vengono identificati i test normali, viene iniziato il trattamento e la terapia cognitivo-comportamentale.
- Si raccomanda un consulto dietetico e un attento monitoraggio del piano alimentare per un periodo di almeno 18 settimane.

Questions

Utilizzando le informazioni fornite, determinare:

- la situazione antropometrica del paziente in relazione all'età
- il fabbisogno energetico per mantenere il peso attuale
- il fabbisogno nutrizionale (calorie e macronutrienti) per il riequilibrio del peso
- le raccomandazioni di base per l'attività fisica
- aspettative a breve termine (4 e 6 settimane)
- approccio dietetico in caso di mancato raggiungimento dell'obiettivo prefissato
- aspettative a medio termine (1 anno)



Funded by
the European Union

The European Commission's support does not constitute an endorsement of these contents, which reflect the views only of the authors, and the Commission cannot be held responsible for any use which may be made of this information.

Example of a dietary approach to the presented case

Anthropometric and nutritional assessment

17y 4m (208 months), female					
	Value	Imperial	%ile	Z-score	50%ile
Weight (kg)	47	103.6 lb	11%	-1.21	55.5
Stature (cm)	164	64.6 in	56%	0.16	163
Wt-for-stature (kg)					
BMI-for-age	17.5		6%	-1.54	21.0

Following the food diary assessment, the following results were obtained: 1018 kcal/day, 51 g protein, 127 g carbohydrate, and 31 g fat during 3 main meals, without snacks, including all food groups

Estimated Daily Caloric Needs	2,759 kcal/day
-------------------------------	----------------

Macronutrients:

Macronutrient	Recommended Intake Per Day
Carbohydrate	310 - 448 grams 1
Total Fiber	26 grams
Protein	40 grams
Fat	77 - 107 grams 1
Saturated fatty acids	As low as possible while consuming a nutritionally adequate diet.
Trans fatty acids	As low as possible while consuming a nutritionally adequate diet.
α-Linolenic Acid	1.1 grams 1
Linoleic Acid	11 grams 1
Dietary Cholesterol	As low as possible while consuming a nutritionally adequate diet.
Total Water	2.3 liters (about 10 cups) 1

Establishing nutritional requirements

- A diet plan was initiated. The patient had a mean intake of 1400 kcal for a period of 2 weeks, with a gradual increase of 150 kcal/week until an intake of 2000 kcal/day was reached
- The patient had to limit sports activity to 60 minutes/day, 5 days a week

	At initiation	At 6 week intervals	At 12 weeks interval
Proteins (g)	68	83	97
Fats (g)	45	54	64
Carbohydrates (g)	170	207	243
Calories	1400	1700	2000



Funded by
the European Union

The European Commission's support does not constitute an endorsement of these contents, which reflect the views only of the authors, and the Commission cannot be held responsible for any use which may be made of this information.

Completion of interventional therapy

- Dietary recommendations were supplemented with group and individual therapy
- Recommendations for: psycho-emotional management, music therapy, dance therapy, personal motivation, collateral activities of active rest and increasing self-confidence, group communication

Re-evaluation at four-week interval

17y 5m (209 months), female

Value Imperial %ile Z-score 50%ile

Weight (kg)	48.3	106.5 lb	16%	-1.00	55.6
Stature (cm)	164	64.6 in	56%	0.15	163
Wt-for-stature (kg)					
BMI-for-age	18		10%	-1.28	21.1

Estimated Daily Caloric Needs	2,272 kcal/day
--------------------------------------	----------------

Macronutrients:

Macronutrient	Recommended Intake Per Day
Carbohydrate	256 - 369 grams ⓘ
Total Fiber	26 grams
Protein	41 grams
Fat	63 - 88 grams ⓘ
Saturated fatty acids	As low as possible while consuming a nutritionally adequate diet.
Trans fatty acids	As low as possible while consuming a nutritionally adequate diet.
α-Linolenic Acid	1.1 grams ⓘ
Linoleic Acid	11 grams ⓘ
Dietary Cholesterol	As low as possible while consuming a nutritionally adequate diet.
Total Water	2.3 liters (about 10 cups) ⓘ

- Following the re-evaluation, a positive weight evolution was observed
- The patient managed to stick to the indicated food plan with 3 main meals
- Binge eating episodes were reduced to 1-2 over a month with no vomiting episodes
- Continue with a 2000 kcal/day meal plan, with target inclusion of all food groups and percentage increase of all macronutrients
- The introduction of 1-2 snacks was attempted, without being mandatory
- The patient was advised to reduce the intake of sweet juices by hydrating with water and teas, while using some food supplements
- Physical activity, also increased interest in Mindful Eating and cooking
- The psycho-emotional management evolved, the patient was more involved motivationally



**Funded by
the European Union**

The European Commission's support does not constitute an endorsement of these contents, which reflect the views only of the authors, and the Commission cannot be held responsible for any use which may be made of this information.

Re-evaluation at other six-week interval

- Weight evolution was positive and constant
- Psychiatric evolution was positive, without episodes of compulsive eating and self-inflicted vomiting
- The patient was still dissatisfied with the appearance of her own body and the accumulated weight, but self-monitoring was slower; she was involved in more group activities and sports activity has decreased in intensity

Re-evaluation at other six-week interval

17y 6m (210 months), female

Value Imperial %ile Z-score 50%ile

Weight (kg)	52	114.6 lb	33%	-0.45	55.7
Stature (cm)	165	65.0 in	62%	0.30	163
Wt-for-stature (kg)					
BMI-for-age	19.1		23%	-0.75	21.1

The patient continued with a food plan of 2000-2200 kcal/day, a more flexible food plan, and monitoring at 6-8 week intervals

Weight evolution after personalized dietary intervention at about 1 year

17y 4m (208 months), female

Value Imperial %ile Z-score 50%ile

Weight (kg)	47	103.6 lb	11%	-1.21	55.5
Stature (cm)	164	64.6 in	56%	0.16	163
Wt-for-stature (kg)					
BMI-for-age	17.5		6%	-1.54	21.0



- Binge eating episodes were reduced to zero
- Dietary and medical monitoring continues

18y 8m (224 months), female

Value Imperial %ile Z-score 50%ile

Weight (kg)	55.2	121.7 lb	42%	-0.20	56.9
Stature (cm)	166	65.4 in	67%	0.43	163
Wt-for-stature (kg)					
BMI-for-age	20		30%	-0.52	21.5



**Funded by
the European Union**

The European Commission's support does not constitute an endorsement of these contents, which reflect the views only of the authors, and the Commission cannot be held responsible for any use which may be made of this information.