

Ward 7C Raigmore Hospital

**Care of patients with anorexia nervosa
on a medical ward**

INFORMATION FOR PATIENTS, CARERS AND FAMILIES

You have – or your relative has – been admitted to Ward 7C Raigmore Hospital because physical health is threatened by an eating disorder. This can be a worrying and distressing time for everybody concerned. Anorexia nervosa is a life-threatening illness, and physical health risks sometimes require urgent assessment and treatment, along with intensive monitoring. Ward 7C provides a highly specialised service with dedicated and skilled staff whose expertise is in nutrition.

Our Philosophy of Care

An eating disorder is an illness: people with eating disorder experience very high levels of distress when they try to resist the demands of their eating disorder thinking. This can lead to situations where patients may find it very difficult to cooperate with staff, or to accept recommended treatment. This means that clear and consistent limits on what is and is not safe are required. We aim to be compassionate and protective, even when the eating disorder brings frustrations for everyone.

The nature of anorexia nervosa means that each patient's needs are different. Highland Eating Disorder Service and the Nutrition team based in Ward 7C work closely together to deliver care in line with national guidelines.

Following a period of medical stabilisation in ward 7C, an individualised plan will be made for ongoing treatment. For some people, further outpatient treatment will be appropriate and for others referral to the inpatient units such as the Eden Unit in Aberdeen will be required.

We understand that admission to hospital is difficult for both patients and their families. Please let us know if you have any questions.

Many useful resources and supports are available via Beat, the national UK eating disorders charity.

<https://www.beateatingdisorders.org.uk/>

Questions and Concerns

Please ask a member of staff to set aside some time to explain and discuss your treatment.

What to expect when you are admitted to ward 7C	Why this is needed
Patients are asked to remain on bed rest, and should not leave the ward. A wheelchair is used if there is a need to transport the patient	We need to keep patients warm and rested to prevent strain on the heart – continuous cardiac monitoring (ECG) may also be needed. Nurses need patients constantly available for monitoring
The Consultant Physician, in consultation with the dietitian, may prescribe a nasogastric tube for the delivery of nutrition.	This makes it possible to prescribe balanced nutrition in the right dose to avoid life-threatening ‘refeeding syndrome’ which can result from damage to the heart from chemical imbalance. It also makes ‘underfeeding syndrome’ less likely.
All feeds/eating and drinking, washing and use of the toilet or commode are supervised. Patients may not at first use bathrooms.	Clinicians need an accurate measurement of patients’ fluid input and to prevent over-drinking and eating disordered behaviours. Anorexia often obliges patients to make use of privacy – particularly in bathrooms – to get rid of calories by purging or exercising
Patients wear hospital nightgowns rather than their own clothes. They may request extra covers and blankets for warmth or modesty.	Anorexia often obliges patients to dispose of food in their clothes. It may also cause them to hide weights or carry laxatives or other items or substances in their pockets.
We may ask family to take home bags, books, magazines & stationery. Alternatively we may require permission to have these regularly searched, or stored.	As above, anorexia often obliges people to conceal food, medication or other items or substances, which are dangerous to the sufferer and also to other people.
Visiting is limited to next of kin and agreed family and friends only. Visitors must agree not to bring food/sweeties, drink, medication, or sharp items to the patient	Nutrition has the medical and legal status of a ‘medicine’ in the treatment of anorexia nervosa so must be prescribed by staff and dispensed in the prescribed doses only, by staff. It is harmful if friends who may also have an eating disorder, or people who are unduly curious about anorexia, visit the ward.

After the first day or two, as safe progress is made, some individual modifications to these guidelines may be made by the treatment team.

What happens next

Patients will have been referred to this programme by one of the Specialist Eating Disorders Consultant Psychiatrists. They and their staff will have close communication with 7C colleagues, and may well come to visit in person. We will also work together to make sure that when you leave the ward, the transition to further care goes as smoothly as possible. Some patients will be referred onward to the Eden Unit, or to another Specialist Eating Disorders Unit (SEDU), whilst others will return to outpatient treatment. We will let you know what follow up is arranged as soon as possible, together with details of the date and time of transfer or of the first clinic appointment.