

# Fear of losing control

Practical guide for treatment of patients with severe eating disorders and forced nasogastric tube feeding



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## DISCLOSURE OF SPEAKER'S INTERESTS

	No (potential) conflict of interests	
	Sponsorship or research funding	
	Fee or other (financial) payment	
	Shareholder	
	Other relationship, i.e. ...	De Ridder Safe and Secure, Assendelft (NL)



# Background

- Introduction
- Setting
- Patient population
- Historical perspective

# A PRACTICAL GUIDE

## FEAR OF LOSING CONTROL





# 1. Preconditions

- Medical treatment and supervision (psychiatrist)
- Executive therapy and treatment (e.g. physician in training, nurse practitioner, psychologist, dietician, experienced and specialized nursing team)
- Environmental facilities (e.g. single rooms, couch, possibility for locked doors)
- Possibilities for physical care (e.g. laboratory testing, vital signs)
- Mission and policy of the ward towards care and treatment of patients with severe eating disorders



## 2. Policy

- Stepped care approach for (assisted) refeeding
- Treatment program (attention for exercise versus immobility)
- Oral refeeding plan (e.g. what and how much to eat at what time)
- Support around weight monitoring and meal times
- Patient goals
- Monitoring physical state
- Support patient and next-of-kin by staff and experts by experience
- Training and clinical supervision of nursing team



## 3. Attitude

- Patient-centered approach
- Positive communication (translation of aggressive behaviour to anxiety and despair)
- Fast decrease of coercion around refeeding
- Observations signs of eating disorder, suicidality and co-morbidity
- Focus on patient goals
- Stimulating helpful cognitions
- Tender, love and care



## 4. Practice

- Basic supportive skills around refeeding
- Assisted oral feeding (oral refeeding plan)
- Tube feeding:
  - Environment (patient room or feeding room?)
  - Step 1: Invitation (one nurse, no use of force)
  - Step 2: Physical support (two nurses, mild use of force)
  - Step 3: Psychological force (three nurses, severe use of force)
  - Additional to step 3: further assistance in restraint in case of extreme resistance of the patient
- Post-incident support of the patient (trauma-informed care?)





# Get to work!

- Demonstration of the stepped-care model
- Input for improvement and additions to the model
- Group discussion about possibilities and challenges around (assisted) refeeding

# Show and Tell





# Get to work!

- Form small groups (three or four participants)
- Discuss and formulate pro's and con's about what you have seen
- We have special interest in:
  - What you can use from this in your own clinical practice
  - What you can teach us about your own clinical practice
  - What can we improve in our stepped-care model



# Thank you for your attention!

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Feel free to contact us with questions, suggestions or experiences!