# How to diagnose ANDIEXIA NEVOSA using the 4 step history?

## ODD THEY MEET DSM-5 CRITERIA?

- How do you feel about how you look? (Criterion C)
- What is your ideal weight? (Criterion C)
- Are you worried about gaining weight? (Criterion B)
- Do you do anything to avoid gaining weight? (Criterion B)
- Have you lost weight recently/ deliberately? (Criterion A)



# @ HOW ARE THEY LOSING WEIGHT!

### a) Restriction

- What do you usually have to eat in a day? What have you eaten in the last 24 hours?
- Do you have any rituals around what you eat? (e.g. cutting food into little pieces, using small cutlery, eating alone)
- Have you been or are currently dieting? (e.g. counting calories, restricting macronutrients, skipping meals)

### b) Binge

- Do you feel out of control when you eat?
- Do you ever eat when you are not hungry?
- Do you ever eat a large portion of food in asmall amount of time?

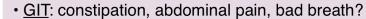
### c) Purge

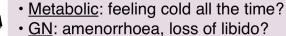
- Do you ever use laxatives, thyroxine, skinny tea?
- Do you ever make yourself throw up after meals?
- How often do you do this? Is it related to what you have eaten?

# BANY SIDE EFFECTS FROM DISORDER?



<u>Cardiac:</u> fainting, dizziness, palpitations, ankle swelling?





• Mental health: suicidality, depression, poor sleep, poor concentration?





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# (4) HISTORY + PROGRESSION OF DISORDER?

- · When did you start having this relationship with food?
- Does anyone in your family have any issues with food?
  History of dieting or eating disorders?
- What do you do for work/ hobbies? (e.g. dancing, modelling, extreme sport)



