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## **Sensory Regulation and Avoidant Restrictive Food Intake Disorder: Education and Resources for Providers**

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## Sensory Regulation and Avoidant Restrictive Food Intake Disorder: Education and Resources for Providers

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Avoidant Restrictive Food Intake Disorder was added to the DSM-V in 2013 and is defined as an eating or feeding disturbance resulting in failure to meet appropriate energy and/or nutritional needs resulting in significant weight loss/failure to gain weight appropriately, nutritional deficiency, reliance on enteral feeding or supplements, and/or psychosocial impairment. Decreased or limited intake may be driven by general disinterest in food, fear of aversive consequences of feeding, and/or aversion to sensory characteristics of food. Sensory aversion is the most common; 63% of diagnosed children report issues with taste, texture, or smell. Current treatment recommendations include behavioral interventions, family-based treatment, and cognitive behavioral therapy, all of which do not focus on sensory needs of patients. A needs assessment conducted at the Medical University of South Carolina Health Center for Eating Disorders revealed a need for education and resources for practitioners pertaining to sensory processing and regulation. Resources created included presentations, symptom assessments, handouts, and a sensory toolkit. Effectiveness of resources was evaluated through pre and post Likert scale surveys. Post surveys showed that practitioners agreed that they felt more confident in their understanding of sensory processing and had the necessary resources to address the sensory needs of their patients. This resulted in increased implementation of sensory strategies in treatment. Further work in this area could focus on increasing carryover from the clinic into the home.