Picky eating vs. Problem Feeding
Mary Louise Kennedy, OTR/L
April 29, 2015
Everyone likes to eat, right?

- We need to eat to stay alive.
- Eating should be fun and enjoyable.
- There are many cultural differences.
- Meals enrich family and social experiences.
- It is particularly important with infants.
Life with a Picky Eater is:

- Stressful, especially if there is concern for the child’s overall health
- Chaotic
- Embarrassing
- Affects the whole family
Common beliefs:

- Children will eat when they are hungry.
- Children will not starve themselves.
- There is no need to worry, she will outgrow this.
The complexity of eating

- The most complicated process our bodies do
- Involves all organs
- 26 muscles and 6 Cranial Nerves to chew and swallow
Involves 8 sensory systems

- Vision
- Hearing
- Taste
- Smell
- Touch
- Vestibular
- Proprioception
- Kinesthesia
Picky eaters:

- Have a decreased range/variety of foods eaten, usually at least 30 foods.
- Tolerate new foods on plate and usually can touch or taste them.
- Eat at least one food from most all food texture groups.
Picky eaters cont:

- Eat at least one food from most all food groups.
- May tire of a food and stop eating it but usually will accept it again after taking a break.
- Usually don’t have an underlying medical condition.
Picky eaters cont:

- May have had gastro-esophageal reflux (GER) as a baby.
- May have a mild sensory issue.
- Will add new foods to repertoire in 15-23 steps.
Resistant eaters or problem eaters:

- Have a restricted range or variety of foods, usually 20 or less.
- Will often refuse one or more food groups.
- Will often refuse entire categories of food textures.
Resistant eaters cont:

- Will not re-acquire foods that are lost.
- Will display anxiety and/or tantrum when non preferred foods are presented.
- Will gag or vomit when presented w/new foods.
Resistant eaters cont:

- May require one or more foods be present at every meal prepared in the same manner.
- May not be able to tolerate presence of certain foods on plate, touch or smell them.
- Will add new foods in >25 steps.
Resistant eaters cont:

- May be diagnosed with a developmental delay such as Autism, Asperger’s Syndrome or Pervasive Developmental Disorders-Not Otherwise Specified.
- May have cognitive impairments.
- May have history of difficulty feeding in newborn and infancy period.
Diagnostic group data

- Estimated 33% of children with special needs have some sort of eating problem.
- Severe Cognitive Impairment: nearly 80% have feeding difficulties and inadequate diets (e.g. William, Coe, & Snyder, 1998)
- ASD: 75% of children have atypical feeding patterns and limited food preferences (e.g. Mayes & Calhoun, 1999)
Other underlying factors:

- Medical issues
- Physical impairments
- Developmental delays
- Sensory based issues
- Environmental issues
- Unknown etiology
Early history:

- Complications with pregnancy, labor or delivery
- Difficulty with breast or bottle feeding
- Difficulty with weight gain
- Difficulty advancing texture
Early history cont:

- Medical issues, especially GERD
- Frequent ear infections
- Slow or atypical acquisition of developmental skills, including sensory skills
Evaluating Problem Eaters:

- Identify any underlying medical conditions
- Refer to a specialist if necessary
- Review or recommend any additional tests or evaluations
Nutritional status:

- Growth history
- Is current diet providing adequate nutrition?
- Is current diet providing adequate calories?
- Refer for blood work if necessary
Oral Motor Skills:

- Suck/swallow/breathe triad as an infant
- Ability to bite, chew, and swallow
- Functionally use tongue, lips, jaw, cheeks to eat and drink
- Assess strength, range of motion, coordination, endurance
Oral Sensory Skills:

- Ability to process and manage various textures, tastes of food
- Develops from birth
- Difficulties can be nutritive or non-nutritive, hyper or hypo sensitive
- May or may not be related to global sensory processing problems
Environmental Factors:

- Cultural, family beliefs regarding meals
- Family schedules, demands on caregivers time as well as child’s needs
- Stress of having a picky or resistant eater
- Role picky eater assumes within family dynamics
Steps to Eating Food:

- Tolerate
- Interact With
- Smell
- Touch
- Taste
- Eat
Steps to eating, cont:

- It can take between 10-15 presentations before a new food can be accepted!!
Where do we start?

- (Tools we can do tomorrow)
Prioritize areas to address

- Self feeding
- Drinking
- Volume of food eaten
- Variety of foods eaten
- Texture
- Behavior
- Environment
Next....

- Set a clear overall objective/goal
- Set a clear short term objective
- Determine how much time and energy can be devoted to a plan over the course of a day
Establishing a routine:

- Determine when to work on introducing new foods
- Determine the best setting and seating
- Can be during a meal or at a snack time
- Can use a picture schedule or bite chart
- Child does get some choices and control!
Routine cont:

- Use of a helper food
- Rewards: sticker chart, token system, praise for meeting desired objective
- Consequences
- Draining energy/intense focus for family on the child’s lack of eating.
When to seek professional help:

- Child’s health in compromised (wt, ht, nutritional status, learning)
- Attempts at home to address in a variety of ways have not been successful.
- Child continues to drop foods from diet without adding new ones.
- There are problems with oral motor and/or oral sensory skills.
Treatment options:

- Out-patient therapy: psychology, occupational therapy, speech-language therapy, registered dietician
- Feeding clinics: Cleveland Clinic, Children’s Hospital for Rehabilitation
- Out patient options: Cleveland Clinic, RB&C, ACC, UCPA
Resources

- Just Take A Bite: Easy, Effective Answers to Food Aversions and Eating Challenges!

- by Lori Ernsperger, Ph.D. and Tania Stegen-Hanson, OTR/L
Resources cont.

- [www.new-vis.com](http://www.new-vis.com)
- [www.sosapproach-conferences.com](http://www.sosapproach-conferences.com)
Food for thought:

- It’s not easy and it’s not always pretty but it can be done.
Questions???