

# Avoidant-Restrictive Food Intake Disorder (ARFID)

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## Symptoms

- Persistent pattern of disordered eating or feeding characterized by:
  - Lack of interest in food or poor appetite.
  - Fears about negative consequences of eating (e.g., vomiting, choking, allergic reaction).
  - Selective or picky eating.
- The pattern of disordered eating is also accompanied by at least one of the following:
  - Significant weight loss or failure to gain weight/grow as expected.
  - Nutritional deficiency (e.g., anemia).
  - Dependence on nutritional supplements or tube feeding.
  - Impairment in psychosocial functioning.
- Disordered eating is not due to cultural practice or lack of available resources
- No significant body image distortion or fear of weight gain

## Warning Signs

- Restricted or reduced intake accompanied by frequent somatic (i.e., pertaining to bodily symptoms and discomfort) complaints with no organic cause
- Lack of appetite or interest in food
- Expressed fears of choking or vomiting associated with reduced intake or refusal to eat meals or snacks
- Inability or reluctance to eat in front of others (e.g., at school, at a friend's house, in a restaurant)
- Picky eating that is unresolved by late childhood
- Limited range of preferred foods that becomes narrower over time (i.e., picky eating that progressively worsens)

## Health Consequences

- Increased risk for Failure to Thrive (not meeting expected standards of growth) due to inadequate nutritional intake. Many individuals with ARFID have stunted growth or have fallen off their growth curves for weight and height.
- Nutritional deficiencies (e.g., anemia or iron deficiency) and malnutrition which may be characterized by fatigue, weakness, brittle nails, dry hair/hair loss, difficulty concentrating, and reduction in bone density.
- Weight loss or severe underweight.

## About ARFID

- ARFID is the second most common eating disorder in children 12 years and younger. Prevalence rates for ARFID range from 8% to 14% in an eating disorder treatment setting.
- ARFID can be diagnosed in children, adolescents, and adults.
- Individuals with ARFID are at high risk for other psychiatric disorders, in particular anxiety disorders and depression. In fact, individuals with ARFID have a higher rate of anxiety disorders than individuals with anorexia nervosa.
- Roughly 20% of individuals with ARFID are males.

## References

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