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The importance of psychological intervention in emergencies for patients with anorexia nervosa

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Dear Editor,

We consider it appropriate to highlight the importance of early psychological intervention in emergencies for patients with eating disorders. In the contemporary age, characterized by incessant socio-cultural pressures and aesthetic ideals, eating disorders emerge as a complex and critical challenge to mental and physical health in individuals during developmental age. This psychiatric condition can have fatal outcomes. Approximately one-fifth to one-third of adolescent patients with Anorexia Nervosa (AN) require intensive care during the course of the illness. Access to critical care areas in healthcare facilities due to significant emaciation-related organic decompensation is increasing significantly, particularly after the COVID-19 pandemic. Typically, emergency room access for these patients is ensured by family members or caregivers who can recognize the critical developments of the eating disorder. However, many patients, despite being in clinically severe conditions, are unable to recognize the seriousness of their clinical condition. The treatment proposed by healthcare personnel often encounters opposition from the patient, who may refuse initial care, thereby risking their own life. Clinical emergency conditions related to anorexia nervosa include electrolyte imbalances with cardiac arrhythmias, dysproteinemia with the potential for pericardial effusion, and multi-organ functional compromise. Recent systematic reviews highlight a lack of criteria, objectives, and treatment modalities, sometimes providing an ambiguous account of hospitalization practices. We believe that a consensus conference should be initiated to outline a systematic, shared approach to the emergency treatment of critically ill patients with eating disorders. In this context, the role of an expert clinical psychologist can be fundamental, even in critical care settings. The presence of such professionals could: i) better facilitate the proposed therapeutic approach, which is often life-saving; ii) interact with the family and caregiver; iii) liaise with emergency personnel treating the patient. This collaboration aims at a more rapid clinical treatment, reducing possible oppositional attitudes that hinder care. The presence of an expert psychologist could optimize the assistance and treatment times for patients with AN in critical care.

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