



27th May, 2024

Deputy Martin Browne, TD
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

RE: PQ 19809/24

To ask the Minister for Health to outline the approach that parents of children with ARFID can take to secure the services needed to address the condition; how parents of children with ARFID are advised to secure the services needed in the absence of the condition not being included in the NICE guidelines for Eating Disorders (2017 or 2020 update); if he plans to identify and develop specific pathways for the treatment of children with ARFID in the context of the HSE's assertion that management of children with ARFID in Ireland requires a collaborative working between professionals and would involve working between the acute hospital sector and HSE community healthcare divisions such as primary care, disability and mental health; how that management process can work efficiently in light of a lack of dietitians across primary care, outpatient paediatrics and community mental health services; and if he will make a statement on the matter

Dear Deputy Browne,

The Health Service Executive has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Advisor and Group Lead for Children and Young People (NCAGL C&YP) on your question and have been informed that the following outlines the position.

As set out in the response to PQ 13407/23 (attached for ease of reference), Avoidant/restrictive food intake disorder (ARFID) is an umbrella term that refers to a number of eating and feeding disorders. There is currently an absence of an evidence base for service models or formal treatments for ARFID.

Children and young people with ARFID currently present with a wide spectrum of needs across health care settings - including primary care, disability services, paediatrics, adult medicine, mental health services, feeding clinics and eating disorder services. Therapeutic intervention is best managed on an individual basis.

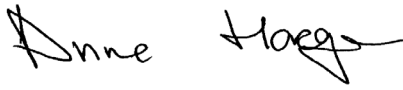
HSE Disability Regional Enhanced Services and Supports for Feeding, Eating, Drinking and Swallowing (FEDs) guidance has been developed by the HSE's National Clinical Programme for People with Disability (NCPD). The purpose of this FEDs guidance is to support Community Healthcare Organisations (CHOs) and Lead Agencies in implementing a consistent approach to the delivery and development of feeding, eating, drinking and swallowing management services and supports for children with complex disabilities.

As part of an interdisciplinary team, the role of the dietician is very important and it is acknowledged that there is a shortage of dietitians across primary care, outpatient paediatrics, community mental health services and community disability network teams for both children and young people.

As the HSE moves to a regionalised model, it is anticipated that each Health Region will work towards identifying and meeting its population needs, including those with neurodevelopmental and/or eating and feeding disorder requirements. A specialist tertiary ARFID clinic is in the process of being established currently, albeit with limited capacity. There is a proposal to develop this service further over the coming year.

I trust this information is of assistance to you, but should you have any further queries please do not hesitate to contact me.

Yours sincerely



Anne Horgan
General Manager