Provisional monthly topic of interest: Eating disorders

NHS Choices states:

“Eating disorders are characterised by an abnormal attitude towards food that causes someone to change their eating habits and behaviour. A person with an eating disorder may focus excessively on their weight and shape, leading them to make unhealthy choices about food with damaging results to their health.

Eating disorders include a range of conditions that can affect someone physically, psychologically and socially. The most common eating disorders are:

* **anorexia nervosa**, when someone tries to keep their weight as low as possible, for example by starving themselves or exercising excessively

* **bulimia**, when someone tries to control their weight by binge eating and then deliberately being sick or using laxatives (medication to help empty their bowels)

* **binge eating disorder (BED)** – when a person feels compelled to overeat large amounts of food in a short space of time.”

For the purpose of this report eating disorders have been classified by the ICD-10 Code F50 - Eating Disorders.

Eating disorders may be dealt with in primary care, however this report focuses on those which resulted in hospital admissions.

**Key Facts**

In the period between February 2015 to January 2016:

* There were a total of 2,703 finished admission episodes (FAEs) for an eating disorder. This is a 8 per cent decrease from 2,951 for the previous 12 months. In the same time period, total FAEs for all conditions increased by 2%.

* 2,060 (76%) of the FAEs were for anorexia, 136 (5%) were for bulimia and 507 (19%) were for other eating disorders.

* 2,454 (91%) of the FAEs were female and 247 (9%) were male. These are similar proportions to the previous 12 months where 2,717 (92%) FAEs were female and 234 (8%) FAEs were males.

* The most common age for a patient being admitted to hospital for an eating disorder was 15 years old for both females (308 FAEs) and males (29 FAEs).

* Of eating disorder admissions where length of stay in hospital is known, 415 FAEs (19%) were admitted and discharged on the same day, 1,461 (66%) spent between one day and 3 months in hospital, 243 (11%) spent between three and six months in hospital, while 105 (5%) spent six months or longer as an inpatient. Eating disorder admissions had longer hospital stays (mean = 39 days) compared to admissions overall (mean = 2 days).
2,526 (93%) of the eating disorder FAEs had no recorded main procedure compared to 35 per cent of FAEs for all conditions. For the 177 (7%) FAEs where a procedure was performed there were a total of 35 different main procedures with the three most common being OPCS 'G47 - Intubation of stomach' (this involves the introduction of a plastic tube into the stomach, commonly used for feeding or administering drugs) (34, 1.3% of FAEs), 'U13 - Diagnostic imaging of musculoskeletal system' (16, 0.6% of FAEs), and 'U05 - Diagnostic imaging of central nervous system' (15, 0.6% of FAEs).

The graph below shows the number of patients admitted to hospital for an 'eating disorder' over the last 10 years. Between February 2006 and January 2015 the graph shows an overall increase in the number of admissions however, for the most recent year between February 2015 and January 2016 there has been a decrease in admissions.

Chart 1: Finished admission episodes with a primary diagnosis of an eating disorder, February 2006 to January 2016

[Graph showing an overall increase in admissions between February 2006 and January 2015, followed by a decrease between February 2015 and January 2016]

Chart 2: Number of finished admission episodes with a primary diagnosis of an eating disorder by month, February 2014 to January 2016

[Graph showing the number of admissions by month with provisional data for the most recent period]

The graph below shows that the most common age groups to be admitted to hospital for an eating disorder for all genders are 10 to 14 years and 15 to 19 years.

Between the periods February 2014 to January 2015 and February 2015 to January 2016, the biggest decrease in FAEs with a primary diagnosis of an eating disorder was in the 15-19 age group.

**Chart 3: Number of finished admission episodes with a primary diagnosis of an eating disorder by age group, February 2014 to January 2015 and February 2015 to January 2016**

The graph below shows that the most common age to be admitted to hospital for an eating disorder is 15 years old for both males and females.

**Chart 4: Number of finished admission episodes with a primary diagnosis of an eating disorder for 10 to 24 year olds by age and gender February 2015 to January 2016**
The graph below shows that the majority (1,937 of 2,703 or 72%) of admissions to hospital for eating disorders are for females with anorexia.

**Chart 5: Number of finished admission episodes with a primary diagnosis of an eating disorder by gender and type of eating disorder, February 2015 to January 2016**
Chart 6 shows the percentage of finished admission episodes (FAEs) with a known length of stay where the patient was still in hospital at specified time intervals after admission, for FAEs with a primary diagnosis of an eating disorder compared to all FAEs.

This graph shows that patients who are admitted to hospital for an eating disorder are more likely to stay in hospital for a longer period of time (spell duration)” when compared to all finished admission episodes with 30 per cent staying in hospital longer than 1 month compared to only 1 per cent of all FAEs. In 5 per cent of FAEs with a primary diagnosis of an eating disorder, the patient was still in hospital after 6 months.

**Chart 6: Percentage of finished admission episodes by length of stay, February 2015 to January 2016**

The length of stay in hospital was unknown for 18 per cent of FAEs with a primary diagnosis of an eating disorder and 11 per cent of FAEs for all conditions; these are not included in the graph above.

For the purpose of the graph above a month is taken to be 30 days, 2 months 60 days etc.
The graph below shows the total number of admissions to hospital for anorexia and for ‘other’ eating disorder by each deprivation decile in England, showing how admissions vary by socio-economic status.

The general trend shows an increase in the number of admissions for anorexia from the most deprived areas (138 FAEs) to the least deprived areas (265 FAEs) nationally. The number of admissions for ‘other eating disorder’ shows no pattern in admissions between the most deprived to the least deprived areas nationally.

Chart 7: A count of finished admission episodes with a primary diagnosis of an eating disorder within each deprivation decile, February 2015 to January 2016

1. Provisional data

The data are provisional and may be incomplete or contain errors for which no adjustments have yet been made. Counts produced from provisional data are likely to be lower than those generated for the same period in the final dataset. This shortfall will be most pronounced in the final month of the latest period, i.e. December from the (month 9) April to December extract. It is also probable that clinical data are not complete, which may in particular affect the last two months of any given period. There may also be errors due to coding inconsistencies that have not yet been investigated and corrected.

2. NHS Choices

http://www.nhs.uk/Conditions/Eating-disorders/Pages/Introduction.aspx

3. Primary diagnosis

The primary diagnosis is the first of up to 20 (14 from 2002-03 to 2006-07 and 7 prior to 2002-03) diagnosis fields in the Hospital Episode Statistics (HES) data set and provides the main reason why the patient was admitted to hospital.
ICD-10 F50 Eating Disorders - 4 character diagnosis codes:

Anorexia
F50.0 Anorexia nervosa
F50.1 Atypical anorexia nervosa

Bulimia
F50.2 Bulimia nervosa
F50.3 Atypical bulimia nervosa

Other eating disorders
F50.4 Overeating associated with other psychological disturbances
F50.5 Vomiting associated with other psychological disturbances
F50.8 Other eating disorders
F50.9 Eating disorder, unspecified

4. Finished admission episodes

A finished admission episode (FAE) is the first period of admitted patient care under one consultant within one healthcare provider. FAEs are counted against the year in which the admission episode finishes. Admissions do not represent the number of patients, as a person may have more than one admission within the period.

5. Main procedure

The first recorded procedure or intervention in each episode, usually the most resource intensive procedure or intervention performed during the episode.

6. Length of stay (duration of spell)

The difference in days between the admission date and discharge date (duration of spell), where both dates are given.

7. Indices of Multiple Deprivation calculations


The population denominator is the population in each IMD decile. This was calculated by linking ONS 2010 population data to IMD 2010 data via Lower Super Output Area (LSOA) and aggregating to IMD deciles. Please note that population estimates for IMD deciles are linked to ONS population data from 2010 as this is the latest data available within HES that can be mapped to the corresponding LSOAs.

8. Data quality

Hospital Episode Statistics (HES) are compiled from data sent by more than 300 NHS trusts and Clinical Commissioning Groups (CCG) in England and from some independent sector organisations for activity commissioned by the English NHS. The Health and Social Care Information Centre liaises
closely with these organisations to encourage submission of complete and valid data and seeks to
minimise inaccuracies. While this brings about improvement over time, some shortcomings remain.

Source statement

Source: Hospital Episode Statistics (HES), Health and Social Care Information Centre

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