An Audit of Paediatric Restrictive Eaters seen by Primary Care Dietitians in Dublin North City and County.

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Background

Primary Care (PC) Dietitians in Dublin North County and City (DNCC) have seen an increased number of paediatric cases presenting with **severe restrictive eating including suspected ARFID**. These children present with very limited dietary intake, significant risk of nutritional deficiency and a notable need for psychological support as well as other therapies.

Recent research acknowledges the **need for an MDT approach** (Psychology, OT, SLT), in the assessment and treatment of this patient group – a service which is not available in PC.

(2023) Archibald, T., & Bryant-Waugh, R.

Aims and Objectives

- To demonstrate the number and complexity of Restrictive Eaters in our caseload.
- To highlight the need for a specialised Feeding Clinic for this patient group.

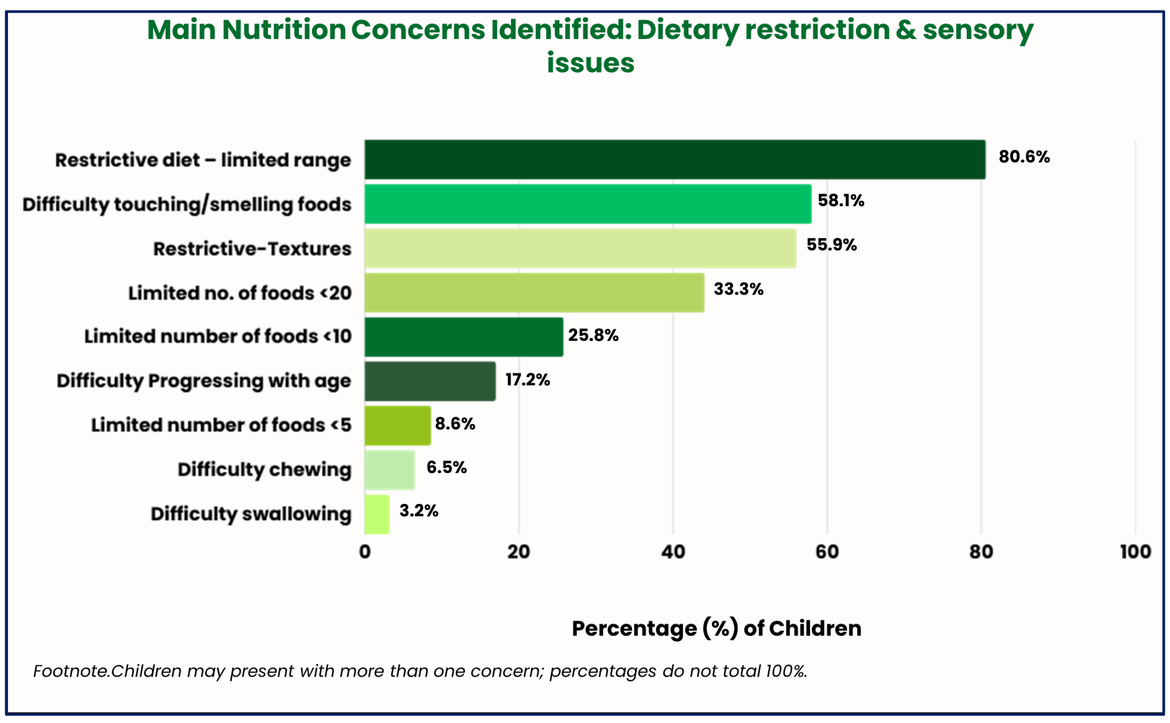
Methods

A Google Forms Audit, comprising of 15 questions, was circulated to all PC Dietitians who work with Paediatrics in DNCC.

The Audit included all Restrictive Eater cases discharged in 2025. Responses were analysed using Excel and SPSS Statistics package.

Results

- 93 cases were included in the audit.
- GPs and PHNs were the main source of referral for this cohort (62%).
- In two thirds of cases, the dietitian is the first member of the Primary Care HSCP team to see the patient.
- A range of nutritional issues were identified amongst this cohort with 50% presenting with 4-6 feeding related concerns. Fig. 1



Footnote.Children may present with more than one concern; percentages do not total 100%.

- Consumption of a limited number of foods was identified in this group. Table 1.

	No. of Foods Consumed		
	< 20 Foods	<10 Foods	< 5 Foods
% of Cohort	33.8	25.8	8.6

Table 1.

- Anxiety around food and mealtimes was reported in both children and parents. Fig 2.

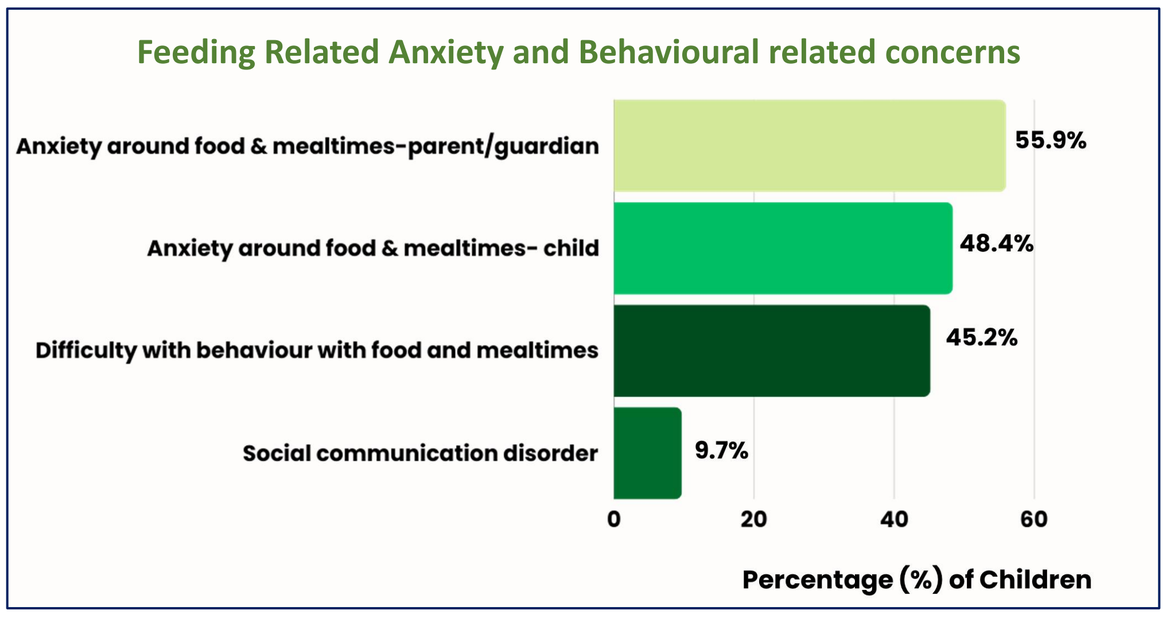


Fig. 2

66.6% of children were identified as requiring a referral to a specialist MDT feeding service.

57% of children were referred onward for additional services inc. Psychology, OT and CDNT

A multivitamin was recommended in 73% of cases. However 30% of these children did not accept this multivitamin.

68% demonstrated little or no progress in dietary variety despite almost 42% of these children receiving over 5 dietitian appointments.

Key learnings

- The significant increase in referrals for this patient cohort has helped identify a complex clinical issue which is not adequately addressed in the current primary care structure.
- This cohort of children present with **complex feeding needs** which involve a combination of nutritional, sensory, behavioural and emotional factors, highlighting the need for support beyond dietary advice alone.
- These needs fall outside the scope of the Primary Care episodic model. Currently long waiting times for other services within Primary Care prohibit a team based approach.
- There is a need for a **specialist community based MDT Feeding Clinic** comprising of Dietetics, Psychology, OT, SLT working concurrently to support these children and families.

References

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