

Childhood abdominal pain may be linked to disordered eating in teenagers

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New research shows that people who suffer from recurrent abdominal pain in childhood may be more likely to have disordered eating as teenagers.

This is the first study to provide prospective evidence of an association

between recurrent abdominal pain at aged 7-9 years and fasting to control weight at aged 16 years. The study, published in the *International Journal of Eating Disorders*, suggests that recurrent abdominal pain, the most common gastro-intestinal complaint of [childhood](#), may be an [independent risk factor](#) for later fasting to control weight.

Researchers at the University of Oxford, Duke University U.S., and the University of Bristol, used the "Children of the 90s" population cohort of 14,000 children in the UK, to explore this association.

Dr. Kate Stein, lead author on the study, Department of Psychiatry, University Oxford, said, "Record numbers of young people are being referred to NHS eating disorder services with more than twice as many referrals in 2020 as there were in 2017. The factors behind eating [disorders](#) are complex, but our findings suggest that for some patients, recurrent abdominal pain in childhood may precede and contribute to later problems.

"While we cannot confirm that childhood recurrent abdominal pain increases the risk of developing an [eating disorder](#), we suspect that some children become fearful of their pain and start to avoid foods which they associate with the pain. This could then set them on a trajectory which leads to unhelpful fasting behaviors in adolescence."

The authors of the study outline three specific recommendations for clinicians:

- Enquire about a history of childhood recurrent abdominal pain in patients with eating disorders
- Assess disordered eating in patients with gastro-intestinal disorders, such as childhood recurrent abdominal pain
- Address patients' anxiety associated with their gastro-intestinal sensations when treating eating disorders

Dr. Stein continues, "By enquiring about a history of childhood recurrent abdominal pain in all patients with eating disorders, we would be able to identify patients whose childhood pain may have contributed to their food avoidance and tailor their treatment plan accordingly. Similarly, by assessing disordered eating in patients with gastro-intestinal problems, we may be able to prevent unhelpful eating patterns as they grow up."

The study findings show an association between a child suffering from abdominal pain three or more times a year and later fasting for weight control at aged 16 years. However, there was no association found between childhood abdominal pain suffered five or more times a year and later adolescent [fasting](#) for weight control at aged 16 years.

Dr. Stein, explains, "It could be that for childhood recurrent abdominal pain, the frequency of pain may be less important to long term outcomes than the severity of the pain, the distress caused and/or the child's functional impairment resulting from the pain. As a doctor, I have noticed that a number of our teenage patients with anorexia nervosa suffered from painful gastro-intestinal (GI) problems in childhood (such as abdominal [pain](#) or constipation). Thus, a child's early GI experiences could provide a key into our understanding of the disordered eating seen in so many young people today."

More information: Kate Stein et al. Do children with recurrent abdominal pain grow up to become adolescents who control their weight by fasting? Results from a UK population-based cohort, *International Journal of Eating Disorders* (2021). [DOI: 10.1002/eat.23513](https://doi.org/10.1002/eat.23513)

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