Unexplained outpatient electrolyte abnormality may signal eating disorder

Nearly one in five individuals diagnosed with an eating disorder had a preceding outpatient electrolyte abnormality, according to a study published online Nov. 8 in JAMA Network Open.

Gregory L. Hundemer, M.D., from Ottawa Hospital-Riverside Campus in Canada, and colleagues assessed whether outpatient electrolyte abnormalities are associated with the future diagnosis of an eating disorder. The analysis included provincial administrative health data for residents of Ontario (aged 13 years and older) from 2008 to 2020, with incident eating disorder cases (6,970 patients) matched by age and sex to controls (27,878 residents).

The researchers found that 18.4 percent of individuals with an eating disorder had a preceding electrolyte abnormality versus 7.5 percent of individuals without an eating disorder (adjusted odds ratio [aOR], 2.12). A median (interquartile range) time of 386 days was observed from the earliest electrolyte abnormality to eating disorder diagnosis. A higher risk for an eating disorder was associated with hypokalemia (aOR, 1.98), hyperkalemia (aOR, 1.97), hyponatremia (aOR, 5.26), hypernatremia (aOR, 3.09), hypophosphatemia (aOR, 2.83), and metabolic alkalosis (aOR, 2.60).

"These results suggest that otherwise unexplained outpatient electrolyte abnormalities may serve to identify individuals who should be screened for an underlying eating disorder," the authors write.

One author disclosed financial ties to the pharmaceutical industry.


Copyright © 2022 HealthDay. All rights reserved.

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.