TITLE: Managing the Eating Habits of Autistic Children who are Resistant Eaters: Clinical Effectiveness and Guidelines

DATE: 25 April 2012

RESEARCH QUESTIONS

1. What is the clinical effectiveness of interventions to improve the eating habits of autistic children who are resistant eaters?

2. What are the evidence-based guidelines regarding interventions to manage the eating habits of autistic children who are resistant eaters?

KEY MESSAGE

Three studies and one evidence-based guideline were identified regarding interventions to manage the eating habits of autistic children who are resistant eaters.

METHODS

A limited literature search was conducted on key resources including PubMed, Ovid PsychINFO, The Cochrane Library (2012, Issue 4), University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2007 and April 10, 2012. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.
RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

Three non-randomized studies and one evidence-based guideline were identified regarding interventions to improve and manage the eating habits of autistic children who are resistant eaters. Additional references of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

Three non-randomized studies\(^1\)-\(^3\) were found regarding specific interventions for autistic children with food selectivity or eating difficulties. One study\(^1\) taught parents of three autistic children to implement a home-based treatment of taste exposure, escape extinction, and fading, and found that there were increases in the children’s acceptance of bites and increases in diet variety that were maintained at follow-up. Another study\(^2\) presented food to three autistic children 20 times for 30 seconds or until acceptance occurred, and used putative reinforcement after each acceptance. This study\(^2\) found that acceptance of food increased in all of the children and effects were maintained at follow-up. A third study\(^3\) evaluated the nutritional status and mealtime performance among a group of autistic children before and after admission to an intensive feeding day-treatment program that involved escape extinction, reinforcement, and stimulus fading procedures. Following treatment, there were significant improvements regarding food variety, consumption, and appropriate mealtime behaviors that were maintained.\(^3\)

One evidence based guideline\(^4\) suggests that family, health, sensory, and communication issues must all be considered when managing the diets of children with autism spectrum disorder. With regards to specific mealtime strategies, the guideline recommends the following:

- Establish a calm and comfortable environment
- Establish a routine to mealtimes
- Consider whether the child is more comfortable eating with others or unwatched
- Use seating that encourages staying at the table
- Consider the shape, colour, and material of the eating utensils
- Consider the addition of condiments and sauces to improve food intake

The guideline\(^4\) also describes the implementation of specific treatment methods to improve feeding in autistic children and emphasizes the importance of clear communication with the child and the setting of small attainable goals. Interim assessments and re-planning of treatment methods may also be necessary to see what the best approach is for the child.
REFERENCES SUMMARIZED

Health Technology Assessments
No literature identified.

Systematic Reviews and Meta-analyses
No literature identified.

Randomized Controlled Trials
No literature identified.

Non-Randomized Studies


Guidelines and Recommendations


PREPARED BY:
Canadian Agency for Drugs and Technologies in Health
Tel: 1-866-898-8439
www.cadth.ca
APPENDIX – FURTHER INFORMATION:

Non-Randomized Studies – Relationship between sensory processing and eating problems


Case Studies


Review Articles


Additional References

Book chapters
