

Eating, Feeding & Swallowing for children on the Autism Spectrum: Getting the info and figuring out what to do with it

Part 2: Treatment

Ellen Robertson, R.Psych, M.ED

Rebecca Perlin, M.Cl.Sc. SLP(C) reg. CASLPO

Terra Ward, MSc. SLP



Holland Bloorview
Kids Rehabilitation Hospital

Welcome & Learning Objectives

- Utilize techniques from multiple approaches to target appropriate areas of concern
- Write goals that facilitate strategy use and skill development
- Engage family in the goal setting process and implementation stages of treatment burst



Associate Chief Medical Officer

Dr. Sharron Spicer

LAND ACKNOWLEDGEMENT



We acknowledge that what we call Alberta is the land of Treaties 6, 7 and 8. We are living and working on the traditional and ancestral territory of many peoples.

We acknowledge the many First Nations, Métis Settlements and Inuit who have lived in and cared for these lands for generations. We are grateful for the traditional Knowledge Keepers and Elders who are still with us today and those who have gone before us. We make this acknowledgement as an act of reconciliation and gratitude to those whose territory we reside on or are visiting.



We are currently working on the traditional territories of the Missasaugas of the Credit First Nation, the Wendat Nation, the Petun Nation, and the Seneca Nation, also a part of the Haudenosaunee Confederacy.

When we think of our commitment to reconciliation, we think of Indigenous communities with food insecurity, health inequities and limited access to medical services. We do a Land acknowledgement to renew our personal and professional commitment to work towards dismantling health inequities within these communities and other marginalized communities.

The image shows a screenshot of a Zoom Webinar Chat window. The window title is "Zoom Webinar Chat". The chat area is currently empty. Below the chat area, there is a dropdown menu for "To:" set to "All panelists and attendees" and a note that says "Your text can be seen by panelists and other attendees". At the bottom of the Zoom interface, there are three icons: "Chat", "Raise Hand", and "Q&A". Two callout boxes provide instructions: one for "For Comments" pointing to the Chat icon, and one for "For Questions" pointing to the Q&A icon.

For Comments
Use the **Chat** and select “All panelists and attendees” for public comments.

For Questions
Use the **Q&A or Raise Hand**. We will address them at the end of the presentation

Zoom Webinar Chat

To: All panelists and attendees ▾

Your text can be seen by panelists and other attendees

Audio Settings ^

Chat Raise Hand Q&A



CERTIFICATE OF ATTENDANCE

Name

Attended the 1 hour webinar

Part 2: Treatment

**Eating, Feeding & Swallowing for children on the Autism
Spectrum: Getting the info and figuring out what to do with it**

offered on Nov 2, 2022

Dr. Justine Turner, MD PhD
On behalf of the PEAS Project



PEAS.Project@ahs.ca

Project Scope

The Pediatric Eating And Swallowing (PEAS) Project is a provincial **quality improvement** initiative with the purpose of developing a provincial eating, feeding, and swallowing **clinical pathway** to standardize and improve care for children with a **pediatric feeding disorder**.¹

Target population: Patients receiving care from provincial Outpatient Clinics, Home Care, or Community Rehabilitation

¹ Goday PS et al. *Pediatric Feeding Disorder: Consensus Definition and Conceptual Framework*. J Pediatr Gastroenterol Nutr. 2019 Jan;68(1):124-129.

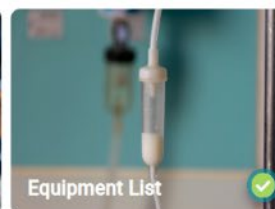
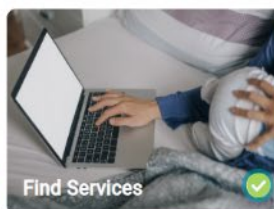
Find relevant information

For families and care providers of children with an eating, feeding and swallowing disorder

FOR FAMILIES

FOR PROVIDERS

Popular Resources for Families



peas.ahs.ca

Eating, Feeding & Swallowing for children on the Autism Spectrum: Getting the info and figuring out what to do with it

Part 2: Treatment

Ellen Robertson, R.Psych, M.ED

Rebecca Perlin, M.Cl.Sc. SLP(C) reg. CASLPO

Terra Ward, MSc. SLP



Holland Bloorview
Kids Rehabilitation Hospital

The logo for Holland Bloorview Kids Rehabilitation Hospital, with "Holland Bloorview" in bold green and "Kids Rehabilitation Hospital" in blue below it.

Feeding Difficulties are challenging to address



Efficacy of interventions to improve feeding difficulties in children with autism spectrum disorders: a systematic review and meta-analysis

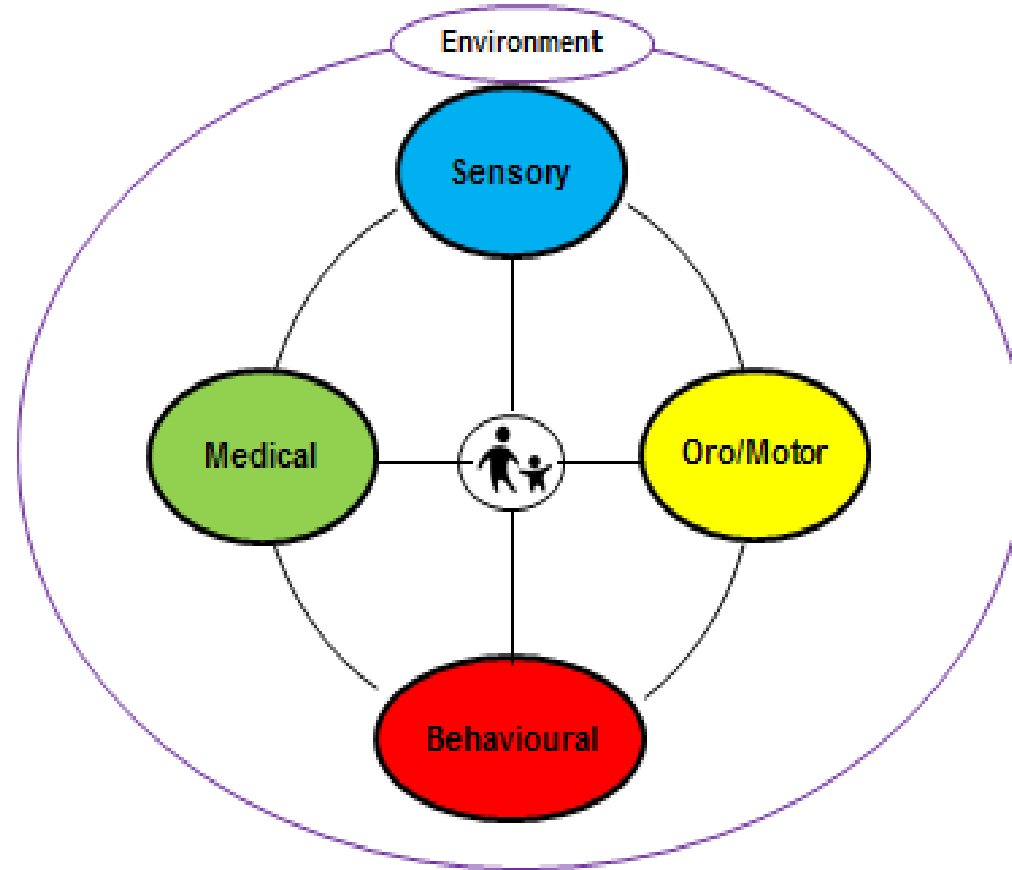
J. Marshall,^{*} R. Ware,^{†‡} J. Ziviani,^{†§¶} R.J. Hill^{*} and P. Dodrill[¶]



Never paint everyone
with the same brush

We need to think differently about neurodiverse children who present with feeding challenges as we know they are **different** than their neurotypical peers.

Medico-oral-behavioural-sensory approach – MOBS^E approach ©



Conceptualized by Smile, S., Raffaele, C., Perlin R.

Medical/ Nutrition Based Treatments-Examples

- Treat constipation
- Treat GERD
- Treat oesophagitis
- Treat nutritional deficiencies
- No medications approved for treatment of food selectivity

Oral-Motor Based Treatments-Examples



- Suzanne Evans Morris
- “Talk Tools” Sara Rosenfeld Johnson
 - Oral Placement Therapy
- Tongue Strengthening
- Oral Stimulation (Beckman)
- Myofunctional Therapy

Journal of Pediatric Rehabilitation Medicine: An Interdisciplinary Approach 10 (2017) 95–105
DOI 10.3233/PRM-170435
IOS Press

Pediatric feeding and swallowing
rehabilitation: An overview

Lenie van den Engel-Hoek^{a,*}, Celia Harding^b, Marjo van Gerven^a and Helen Cockerill^c

Sensory Based Treatments-Examples



- Sensory Integration (Ayres)
- Systematic Desensitization
 - SOS (Toomey)
- Food Chaining (Walbert & Fraker)
- Interoception (Mahler)

Original Article

Ann Rehabil Med 2021;45(5):393-400
pISSN: 2234-0645 • eISSN: 2234-0653
<https://doi.org/10.5535/arm.21076>



Sensory Based Feeding Intervention for Toddlers With Food Refusal: A Randomized Controlled Trial

Ah-Ran Kim, MD¹, Jeong-Yi Kwon, MD, PhD¹, Sook-Hee Yi, MD², Eun-Hye Kim, MD³

Food Chaining: A Systematic Approach for the Treatment of Children With Feeding Aversion

Mark Fishbein, MD^{*}; Sibyl Cox, MS, RD^{*}; Cheryl Swenny, MA^{*}; Chris Mogren, RN^{*};
Laura Walbert, CCC/SLP[†]; and Cheri Fraker, CCC/SLP[†]

^{*}SIU School of Medicine, Department of Pediatrics, Springfield, Illinois; and [†]Preemtelink, Springfield, Illinois

Behaviour Based Treatments-Examples

- Applied Behaviour Analysis
- Intensive Behaviour Intervention
- Functional Behaviour Analysis
- Escape Extinction
- First/Then, Token system
- Cognitive Behaviour Therapy

Environment Based Interventions-Examples

- Meal structure
- Seating
- Family Meals
- Developmentally appropriate foods
- Timing between meals/snacks
- Distractions

Caregiver Based Interventions-Examples

- Parent/Caregiver Training Curriculum
- Responsive Parenting/Feeding
- “Get Permission Approach” (Dunn-Klein)
- “Division of Responsibility” (Satter)

Feeding Difficulties in ASD are challenging to address

- Limited data on effectiveness of therapies
- Which therapy/approach works for which child?
- Combination of therapies?
- Some interventions increase satisfaction but not intake
- Some interventions may increase volume, but not necessarily variety of foods (Marshall et al. 2015)
- Increased likelihood of improvement in toddlers under 3 (Caldwell et al. 2022) but we tend to see older
- Significant anxiety-has it been addressed?

Effectiveness/Feasibility of SOS approach (©Toomey) with children diagnosed with ASD-pilot study 2015

- Intervention group (following SOS protocol) vs. Comparison group (parent education group only)

Lessons learned:

- Using SOS techniques vs. completing SOS following protocol
- #foods gained/maintained
- How do you define “progress”?
- For which children does this approach work best?
- Initial medical work up/common medical concerns
- What else?

Project LEaH 2019/2020

Putting MOBSE into practice

- 15 preschoolers with diagnosis of ASD and reported food selectivity
- Completed multidisciplinary assessment (MD, SLP, OT, BT, RD)
- In collaboration with parents, set up to 3 goals
- 12 one hour treatment sessions delivered virtually (OTN platform)
- Pre/post measures
 - COPM, 24hr food diary, parent and therapist satisfaction questionnaires

Project LEaH 2019/2020

Results:

- delivery of virtual feeding intervention program, deemed feasible and satisfactory both by participants and therapists.
- Clinically significant change was seen on goals set by parents as measured by the Canadian Occupational Performance Measure (COPM)
- While total number of foods eaten did not change significantly during the study, 53% (8/15) of participants demonstrated increased intake of vegetables/grains/fruits by week 12.

Project LEaH 2019/2020

Lessons learned:

- Medical factors (e.g. constipation) impact feeding behaviours-address before intervention begins
- Importance of assessing a child's nutrition and hydration status and to intervene/monitor throughout intervention.
- Caregiver-Child interaction appeared to play an integral role in FS in ASD-focus on the family
- The child's primary feeder must play an active role in any FS intervention and will need to set goals and develop skills.
- Consider parent and child readiness for participating in a feeding intervention program and which prerequisite interventions should be considered.
- Behavior expertise as part of the multidisciplinary feeding team is critical in addressing FS in ASD
- Flexibility-what are "goals"?, define "progress"?, be ready to change direction as needed

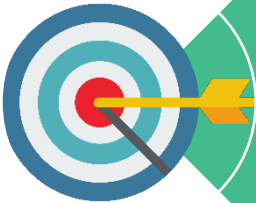
Eating, Feeding and Swallowing for Children on the Autism Spectrum

Part 2: Treatment
So now what...

Part II: Objectives



Parent Engagement



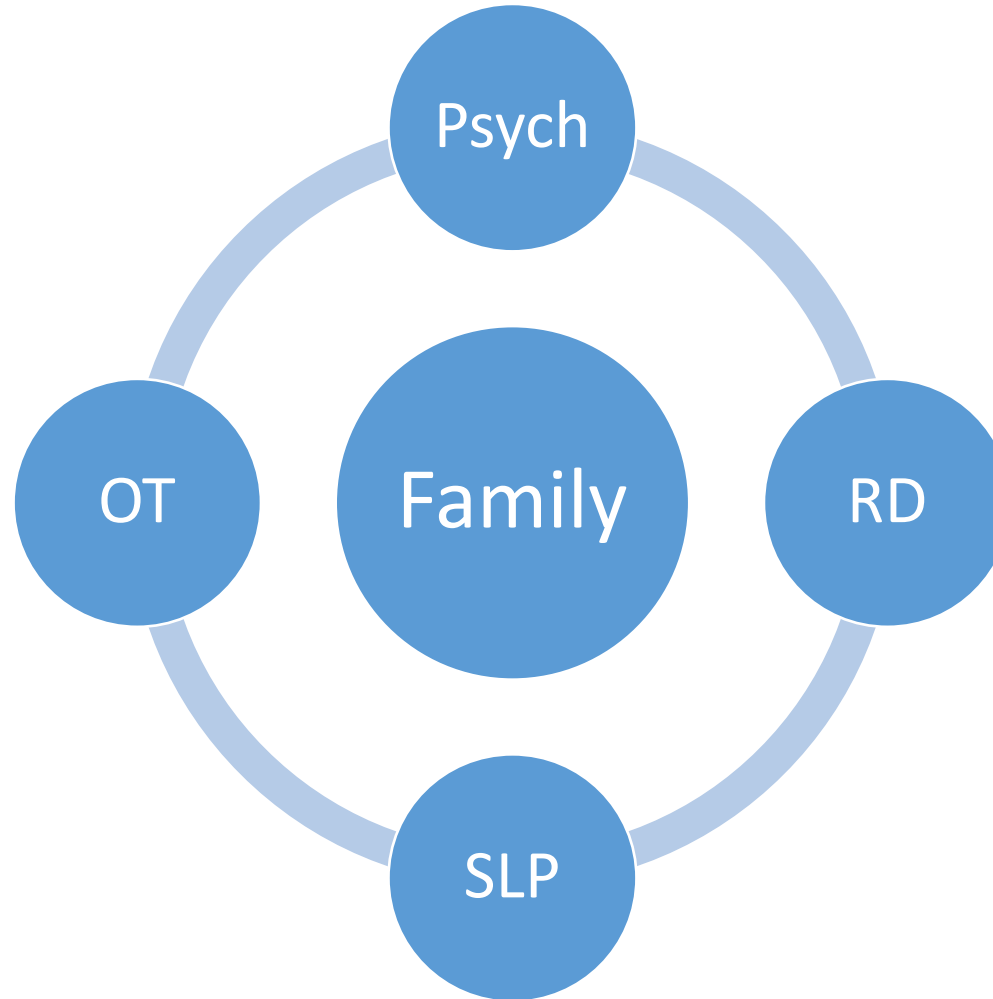
Goals for strategy use and skill development



Combining approaches and techniques

Multi-Disciplinary Team

Feeding Therapists



Pathway to Care

Intake

Goal Setting

Active Treatment



Intake

Previous Treatment

Strengths and Interests

Mealtimes

Concerns

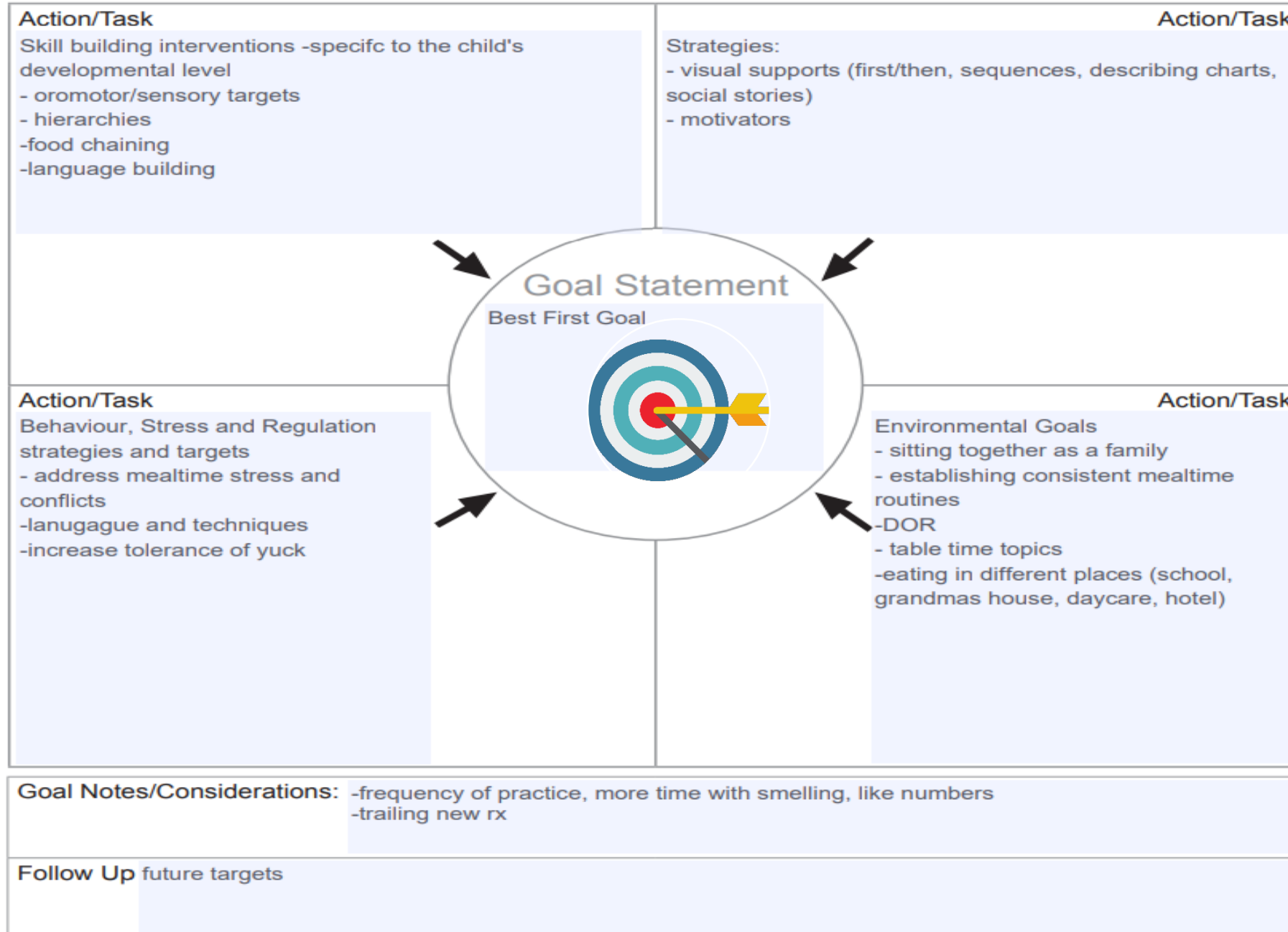


Goal Setting

Priorities

Strategies

Concerns/Considerations





Active Treatment

Individual Treatment – virtual or in person
Episodes of Care -6 sessions

Group Treatment – parent only, virtual
6 Sessions over 8 weeks

What We Work On and How



Targets

Skill development
Flexible thinking
Sustainable Mealtimes
Expanding repertoire
Nutritional goals



Approaches

Responsive Feeding
SOS
CBT-AR
Exposure Approach
(Food Challenge)
Parent Coaching

A-HA! Moments for the Team



Virtual Works!



Value of Parent-Led



Sustainable Mealtime Practices



What Else??



Different Child, Different Goals, Different Approaches

Case Study: Emil



Restricted Diet



Dropping foods, No progress in therapy so far



Dental Rehab Post Ax but prior to Tx



Oral Motor Update: dental surgery



Mealtimes: Offered Preferred and Non-preferred with prompts to “try it”

“I am done with food play”

“He does well for rewards in other areas”



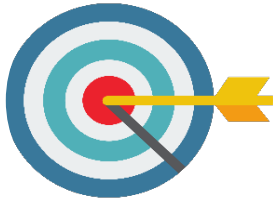
Action/Task

At home:
Food Jag Prevention

During Mealtimes implement DOR

Action/Task

In-Person Visits:
Establish use of food exploration sequence using visuals
1. easy task then immediate reward
2. Focus on interaction level .



Goal Statement

Establish use of visual
schedule and contingent
reward system

Action/Task

Develop language with repeated
exposures at home and GRH.

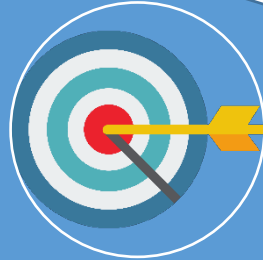
Action/Task

Medical/Pharmacy follow up





Individual Treatment Parent and Child



Goals

- Expand Vocabulary and visuals
- Introduce Contingency
- Tolerance of Yuck
- Mealtime Peace



Approaches

Individual

- Responsive Feeding
- SOS
- Exposure

Parent Led - Group



Goals



- Increase volume and variety

Approaches



Group

- Exposure (CBT)
(Food Challenge)



Questions & Comments?

The image shows a Zoom Webinar Chat window. The window title is "Zoom Webinar Chat". The chat area is currently empty. Below the chat area, there is a "To:" dropdown menu set to "All panelists and attendees" and a note that says "Your text can be seen by panelists and other attendees". At the bottom of the Zoom interface, there are three icons: "Chat", "Raise Hand", and "Q&A".

For Comments
Use the **Chat** and select "All panelists and attendees" for public comments.

For Questions
Use the **Q&A** or **Raise Hand**. We will address them at the end of the presentation

Eating, Feeding & Swallowing for children on the Autism Spectrum: Getting the info and figuring out what to do with it

Part 2: Treatment

Nov 2, 2022 | 10:30-11:30AM + Percolator 11:30-12PM

Joint Presentation by:
Glenrose, and Holland-Bloorview Rehabilitation Hospitals



Holland Bloorview
Kids Rehabilitation Hospital

The logo for Holland Bloorview Kids Rehabilitation Hospital, featuring the text "Holland Bloorview" in a bold, green font, with "Kids Rehabilitation Hospital" in a blue font below it.



Contact Us

PEAS.Project@ahs.ca

[FOR PROVIDERS](#)[CLINICAL PRACTICE GUIDE](#)[CLINICAL TOOLS & FORMS](#)[COLLABORATIVE PRACTICE](#)[PROFESSIONAL DEVELOPMENT](#)[COMMUNITY OF PRACTICE](#)[FAMILY RESOURCES](#)

QUICK LINKS

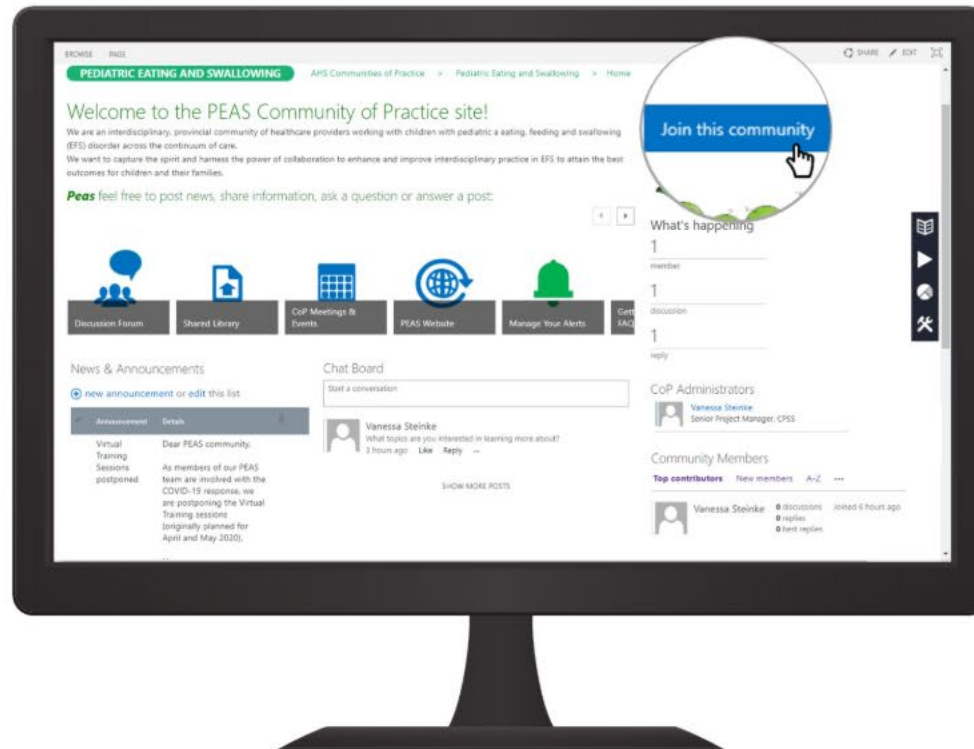
[✓ CPG QUICK REFERENCE](#)[✓ ORDER FORMS & HANDOUTS](#)[✓ FIND SERVICES](#)[✓ VIRTUAL HEALTH](#)[✓ EQUIPMENT & SUPPLIES](#)[✓ FUNDING INFORMATION](#)[✓ FOR FAMILIES](#)[✓ NEWS AND EVENTS](#)

Community of Practice

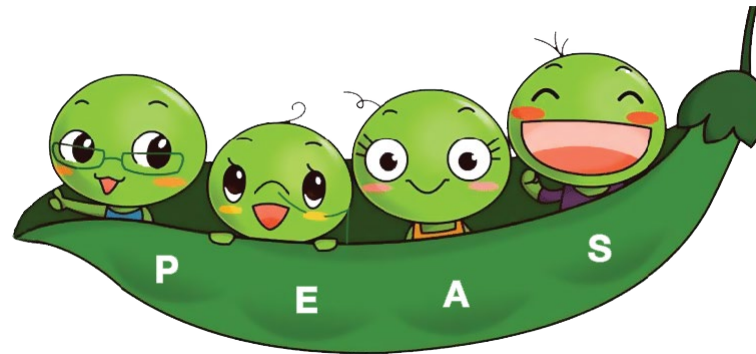
We have just launched the Pediatric Eating And Swallowing Community of Practice (CoP) for healthcare providers who work with children with a pediatric eating, feeding and swallowing (EFS) disorder. This virtual CoP is an interdisciplinary community of healthcare providers across the continuum of care in Alberta. The goal of this CoP is to capture the spirit and harness the power of collaboration to enhance and improve interdisciplinary practice in EFS to attain the best outcomes for children and their families.

To join the PEAS Community of Practice:

1. You must be a healthcare provider with an AHS account.
*See below for information on how to obtain an AHS account.
2. Go to the PEAS CoP website here: <https://extranet.ahsnet.ca/teams/CoP/PEAS/SitePages/Home.aspx>
If prompted, enter your AHS account name and password.
3. Click "Join this community" as shown below. That's it!



Thank you!



PEAS.Project@ahs.ca

<https://survey.ahs.ca/peas.autism2>

30 Min Percolator (optional)

Eating, Feeding & Swallowing for children on the
Autism Spectrum: Getting the info and figuring out
what to do with it

Part 2: Treatment

Ellen Robertson, R.Psych, M.ED

Rebecca Perlin, M.Cl.Sc. SLP(C) reg. CASLPO

Terra Ward, MSc. SLP



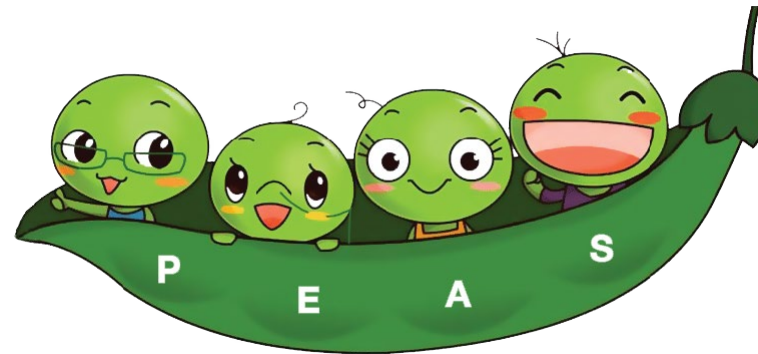
Holland Bloorview
Kids Rehabilitation Hospital



Contact Us

PEAS.Project@ahs.ca

Thank you!



PEAS.Project@ahs.ca

<https://survey.ahs.ca/peas.autism2>
