

# PICA

Pica is an eating disorder that involves eating items that are not typically thought of as food and that do not contain significant nutritional value, such as hair, dirt, and paint chips.

## EVALUATION & DIAGNOSIS

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- There are no laboratory tests for pica. Instead, the diagnosis is made from a clinical history of the patient.
- Diagnosing pica should be accompanied by tests for anemia, potential intestinal blockages, and toxic side effects of substances consumed (i.e., lead in paint, bacteria or parasites from dirt).

## WARNING SIGNS & SYMPTOMS OF PICA

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- The persistent eating, over a period of at least one month, of substances that are not food and do not provide nutritional value.
- The ingestion of the substance(s) is not a part of culturally supported or socially normative practice (e.g., some cultures promote eating clay as part of a medicinal practice).
- Typical substances ingested tend to vary with age and availability. They may include paper, soap, cloth, hair, string, wool, soil, chalk, talcum powder, paint, gum, metal, pebbles, charcoal, ash, clay, starch, or ice.
- The eating of these substances must be developmentally inappropriate. In children under two years of age, mouthing objects—or putting small objects in their mouth—is a normal part of development, allowing the child to explore their senses. Mouthing may sometimes result in ingestion. In order to exclude developmentally normal mouthing, children under two years of age should not be diagnosed with pica.
- Generally, those with pica are not averse to ingesting food.

## RISK FACTORS

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- Pica often occurs with other mental health disorders associated with impaired functioning (e.g., intellectual disability, autism spectrum disorder, schizophrenia).
- Iron-deficiency anemia and malnutrition are two of the most common causes of pica, followed by pregnancy. In these individuals, pica is a sign that the body is trying to correct a significant nutrient deficiency. Treating this deficiency with medication or vitamins often resolves the problems.
- A medical professional should assess if the behavior is sufficiently severe to warrant independent clinical attention (e.g., some people may eat nonfood items during pregnancy, but their doctor may determine that their actions do not indicate the need for separate clinical care).

## ADDITIONAL INFORMATION

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- It is unclear how many people are affected by pica. It most likely is more prevalent in developing countries.
- Pica can affect children, adolescents, and adults of any genders.
- Those who are pregnant and craving nonfood items should only be diagnosed with pica when their cravings lead to ingesting nonfood items, and the ingestion of those items poses a potential medical risk (either due to the quantity or type of item being ingested).
- Pica can be associated with intellectual disability, trichotillomania (hair pulling disorder), and excoriation (skin picking) disorder.

## TREATMENT

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The first-line treatment for pica involves testing for mineral or nutrient deficiencies and correcting those. In many cases, concerning eating behaviors disappear as deficiencies are corrected. If the behaviors aren't caused by malnutrition or don't stop after nutritional treatment, a variety of behavioral interventions are available.

Scientists in the autism community have developed several different effective interventions, including redirecting the person's attention away from the desired object and rewarding them for discarding or setting down the non-food item.

\*\*These statistics have been taken from [www.nationaleatingdisorder.org](http://www.nationaleatingdisorder.org)