Rumination Disorder

Rumination disorder involves the regular regurgitation of food that occurs for at least one month. Regurgitated food may be re-chewed, re-swallowed, or spit out. Typically, when someone regurgitates their food, they do not appear to be making an effort, nor do they appear to be stressed, upset, or disgusted.

DIAGNOSTIC CRITERIA

The DSM-5 criteria for rumination disorder are:

- Repeated regurgitation of food for a period of at least one month. Regurgitated food may be re-chewed, re-swallowed, or spit out.
- The repeated regurgitation is not due to a medication condition (e.g., gastrointestinal condition).
- The behavior does not occur exclusively in the course of anorexia nervosa, bulimia nervosa, BED, or avoidant/restrictive food intake disorder.
- If occurring in the presence of another mental disorder (e.g., intellectual developmental disorder), it is severe enough to warrant independent clinical attention.

TREATMENT

Once a physical cause for rumination disorder has been ruled out, the most common way rumination disorder is treated involves a combination of breathing exercises and habit reversal. A child with rumination disorder is taught to recognize the signs and situations when rumination is likely, and then they learn diaphragmatic breathing techniques to use after eating that prevent them from regurgitating their food. They eventually learn to prevent the rumination habit by replacing it with deep breathing techniques.

**These statistics have been taken from www.nationaleatingdisorder.org

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