

POS-252

Meeting Child's Needs through Music: A Music Therapy Case Study of a Girl with Binge Eating Disorder

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Abstract

Background

Binge eating disorder (BED) used to be categorized under eating disorder not otherwise specified, EDNOS, formerly called atypical eating disorder by the Diagnostic and Statistical Manual of Mental Disorder (DSM) Version 4 so far. Therefore, BED had been only listed in Appendix B in the DSM-4, but the DSM-5 added it as a separate diagnosis.

Although there might have been certain people who suffered from BED, the information and the features of BED are still unclear at the moment, as the diagnostic criteria have not been established and people with BED have been treated as a part of atypical case. Therefore, each case study of BED should be precisely described, which enables us to gather the detailed data and the prognosis.

The number of people who are treated as BED properly has been unknown, but the specific treatment for BED, not as one of the clinical features of EDNOS, is expected as soon as possible.

Aim

The purpose of this study is to provide a case report on music therapy with a girl who appears to be suffering from BED but has been treated as another disorder. This study will introduce the process that the girl, who has been mistaken for autism due to jargon, violent behaviour, lack of communication and so on, expresses her difficult feelings through music and musical activities. It will also be reported how she expressed through music the real reason why she had to keep eating badly.

Case material and method

The child was one of the fraternal twins. The diagnosis of this client had not been BED in her involved clinic, as it is operated on the basis of the former diagnostic systems. Her initial diagnosis was borderline and was changed to mental retardation. Subsequently, she was diagnosed as Autism and Mental retardation. She was referred to music therapy at 35 months of age.

The frequency of the music therapy was initially once a week and shifted to twice a month. After the referral and assessment sessions, music therapy started in an individual setting.

Result

The fact that the client was suffered from BED and the causation was found throughout 122 music therapy sessions conducted during 7 years. At the initial examination or at the beginning of the therapy, the BED aspect of this client was entirely unknown. However, in the course of the time, the suspicion of BED was getting clear. Furthermore, the client started to play and comment on how she feels about her handicapped situation through music and finally gained the sound weight control.

Discussion

Thus, not only pointing out the weight and nutrition problem in a physical way but meeting child's needs should be significant. It is clinically evidenced that music helped her to recognize and understand what she really needs.