Episode: Author Interview: "A Life-Affirming Palliative Care Model for Severe and Enduring Anorexia Nervosa"

Guest: Jonathan Treem, MD Host: Tim Hoff Transcript by: Cheryl Green

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[bright theme music]

TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. Joining me on this episode is Dr Jonathan Treem, an assistant professor of hospice and palliative medicine in the Division of General Internal Medicine, University of Colorado School of Medicine in Aurora, Colorado. He's here to discuss his article, coauthored with Drs Joel Yager and Jennifer Gaudiani, "A Life-Affirming Palliative Care Model for Severe and Enduring Anorexia Nervosa," in the September 2023 issue of the Journal, <u>Palliative Psychiatry</u>. Dr Treem, thank you so much for joining me on the podcast today. [music fades]

DR JONATHAN TREEM: It's a real pleasure to be here. Thank you for having me.

HOFF: So, what's the main ethics point of your article?

TREEM: So, we wanted to make a point with my coauthors around concepts of palliative interventions in the eating disorder community that can exist or coexist alongside diseasedirected therapy interventions. There seems to be mostly conjecture that palliative care is specifically associated with end-of-life care, and that if somebody is going to engage a role of palliative care in care of their eating disorder, then they're necessarily going to embrace the concept of a shortened life and expedient death. And the point that we're really trying to make is that palliative care as a framework is really about honoring the life and values of the individual. And when it comes to eating disorders, that may be life shortening as a treatment philosophy, but it may actually be life extending as well. And so, the major ethical point that we're trying to make is that a palliative-focused eating disorder care model should exist alongside things like curative intent therapy and harm reduction therapy as essentially an alternative for people who have eating disorders and aren't aligned with those kinds of treatments.

HOFF: And so, what do you see as the most important thing for health professions students and trainees to take from your article?

TREEM: I think it's to think a little bit differently about the focus and the value of medical care and what the actual aim of medical care really is. I think that traditionally, medical care is very much focused as disease-directed therapy: "How are we going to try to treat it? How are we going to try to fix it?" But there are lots of people who live with essentially intractable illness, including intractable psychiatric illness, as in the eating disorder community, and medical care can be differently focused or differently directed. So, how do you live with this illness? How can we support somebody? How can we improve and specifically attend to their quality of life as the main goal for our medical intervention? Those are the kinds of things that we're thinking about actively when it comes to how to apply palliative care to the eating disorder population, and I think there's a role.

HOFF: And finally, if you could add a point to your article that you didn't have the time or space to fully explore, what would that be?

TREEM: I think that there is a misconception around what exactly palliative care is and how it is actively applied in the general psychiatric community and certainly in the eating disorder community. So, my coauthors, Jennifer Gaudiani and Joel Yager, had previously written an article on concepts of terminal anorexia, so, how that might be defined, how we might have a clinical set of criteria for somebody who's likely to die of their anorexia. And what that really did was it sort of focused or narrowed the content of this conversation into palliative interventions in the end-of-life phase of eating disorder care. And we probably, we didn't really have the time or the space in the article to try to extricate effectively, or really re-imagine, concepts of palliative interventions as not necessarily tied specifically to end-of-life care, but essentially sort of philosophically and practically applicable in their own right. So, it's just a way of saying I think we probably would have or would like to go into a little bit more detail around asking the eating disorder community to rethink the sort of concept of palliative interventions to reimagine their possibility in eating disorder care. [theme music returns] We didn't, we went into that a little bit in our article but didn't really have the space to explicate it.

HOFF: Dr Treem, thank you so much for your time on the podcast and for you and your coauthors' contribution to the Journal.

TREEM: We really appreciate the opportunity to submit and thank you so much for the conversation.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics.*