

IPFDC VIRTUAL SCHEDULE AT-A-GLANCE

This conference has been endorsed by the North American Society for Pediatric Gastroenterology, Hepatology,

FRIDAY JANUARY 24TH, 2020

****ALL TIMES LISTED AS EASTERN STANDARD**

8:00 - 9:00 AM

Keynote Presentation: Development of a Pediatric Feeding Disorder Screening Instrument for Infants and Children

Alan Silverman, PhD; Julie Barkmeier Kraemer, PhD, CCC-SLP

9:00 - 10:00 AM

Concurrent Breakout Sessions

Instrumental Assessment: Focus on Videofluoroscopic Swallow Studies

Joan Arvedson, PhD, CCC-SLP, BCS-S, ASHA Fellow

Pediatric Feeding Disorder and Autism: It's About More than Compliance

Bethany C.F. Kortsha, MA, OTR/L

10:00 - 10:30 AM

Break

10:30 - 11:30 AM

Concurrent Breakout Sessions

Differentiating GERD from Oropharyngeal Dysphagia

Rachel Rosen, MD, MPH

Oral Feedings on Respiratory Devices: Picking Apart the Controversy

Louisa Ferrara, PhD, CCC-SLP, BCS-S, CNT

11:30 - 12:30 PM

Concurrent Breakout Sessions

Family Panel with an Expert

Tara Welker, PhD

Family Stress and Trauma in Feeding Disorders: How Can We Support the Whole Family?

Meghan Marsac, PhD

12:30 - 1:00 PM

Break

1:00 - 2:00 PM

Concurrent Breakout Sessions

A Practitioner's Guide to Homemade Tube Feedings

Megan Van Hoorn, MS, RD, CNSC, CD; Cassandra Walia, CD, CNSC, MS, RD

The Case for ARFID being a PFD

Richard J. Noel, MD, PhD

2:00 - 3:00 PM

Lightning Talks

SATURDAY JANUARY 25TH, 2020

8:00 - 9:00 AM

Keynote Presentation

PFD Alliance Annual Symposium: Our Focus, Our Future

Erin Ross, PhD, CCC-SLP; Hayley Estrem, PhD, RN; Pamela Dodrill, PhD, CCC-SLP

9:00 - 9:30 AM

Break

9:30 - 10:30 AM

Concurrent Breakout Sessions

Food Allergies: Feeding Issues, and EoE: The Devils in the Details

Dan Atkins, MD; Holly Knotowicz, MS, CCC-SLP

Mapping the Gaps: Scoping Review of Research on Pediatric Feeding Disorder

Hayley Henrikson Estrem PhD, RN; Suzanne Thoyre, PhD, RN, FAAN; Cara

McComish, PhD; Jinhee Park, Ph.D., RN

10:30 - 11:30 AM

Concurrent Breakout Sessions

Celebrating Success: Interprofessional Group Strategies for Expanding Food Choices for Children with Pediatric Feeding Disorder

Chantal Lessard, MHSc; Carrie Owen, OT

Coaching Parents using a Parent Implemented Intervention

Deirdre M. Muldoon, PhD, CCC-SLP, BCBA-D; Joanna Cosby, PhD, OTR/L

Accreditation and Designation Statements - 7th International Pediatric Feeding Disorder Conference

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of PeerPoint Medical Education Institute, LLC and Feeding Matters. The PeerPoint Medical Education Institute, LLC is accredited by the ACCME to provide continuing medical education for physicians. The PeerPoint Medical Education Institute, LLC designates this live activity for a maximum of 14 AMA PRA Category 1 Credit(s)[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity

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The 2-day group course is offered for up to 0.8 ASHA CEUs.
(Intermediate level, Professional area)

The 30-day individual course is offered for up to 1.4 ASHA CEUs.
(Intermediate level, Professional area)



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Learn more at feedingmattersconference.org

LEARNING OBJECTIVES AND DESCRIPTION OF SESSIONS

FRIDAY, JANUARY 24TH

Keynote: 8:00am-9:00am (Eastern Standard Time)

Development of a Pediatric Feeding Disorder Screening Instrument for Infants and Children

Alan Silverman, PhD; Julie Barkmeier Kramer, PhD, CCC-SLP

Severe pediatric feeding disorders (PFDs) occur in 2-29% (i.e. 478,000-8.7 million) of typically developing children. Approximately 3-5% of children in the US experience severe PFDs that require medical attention accounting for 3% of pediatric hospital admissions. Unfortunately, children with PFDs commonly go undiagnosed until there is an escalation of condition severity, complexity, and cost of treatment. This presentation will describe and define PFDs and describe research we have conducted to develop a screening tool extracting items from the ICFQ©, and future goals for creating a screening instrument for use in infants and children up to 4 years of age. We will also describe our vision for implementation of such a tool in pediatric primary care settings that would lead to earlier identification and referral of children with PFDs to appropriate specialists for treatment. We believe that such a tool would reduce current PFD medical and nutritional complication rates that reduce the need for invasive treatments in affected children.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe the impact of delaying identification and referral of infants and young children with pediatric feeding disorders.
2. Identify and describe the caregiver responses on the Infant and Child Feeding Questionnaire.
3. Define future directions for developing and incorporating screening tools into primary care provider practice.

Concurrent Session 1

9:00am-10:00am

Instrumental Assessment: Focus on Videofluoroscopic Swallow Studies (VFSS)

Joan Arvedson, PhD, CCC-SLP, BCS-S, CNT

This seminar will provide participants with opportunities to gain knowledge and skills related to the Videofluoroscopic Swallow Study (VFSS) used to define oral, pharyngeal and upper esophageal swallowing function. Experience will include identification of anatomy and physiology of normal and abnormal swallowing when reading x-ray swallow studies in infants and children. A range of ages and types of swallowing problems will be presented to expand participant knowledge, along with incorporating findings as “one piece of the puzzle” to make management and therapy recommendations. Discussion will include concerns related to radiation exposure, evidence-based treatments, neurodevelopmental status, and physiologic issues as critical factors in management decision making. Treatment planning topics will include nipple feeding, postural adjustments, oral sensorimotor factors, texture changes, electrical stimulation, and ways to include “tastes” when risks for aspiration appear high. Considerations for report writing will be discussed.

Learning Objectives

By the end of this session, attendees will be able to:

1. Identify anatomic structures visible in lateral view on VFSS.

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2. Make management recommendations based on findings with VFSS as one piece of a puzzle.
3. Describe differences between findings and interpretation focused on VFSS.

Pediatric Feeding Disorder and Autism: It's About More than Compliance

Bethany C.F. Kortsha, MA, OTR/L

This workshop will focus on the feeding skills that significantly influence feeding difficulties in children with Autism Spectrum Disorder (ASD), and will specifically highlight research in the areas of medical, nutritional, skill deficit and psychosocial domains. Practical strategies to address skill deficits and improve mealtime experiences are provided.

We will break down the relationship between skill-based deficits in these areas and a child's food type and texture preferences as well as their behaviors during a mealtime. Mealtime behaviors will be described as a communication of foundational skill deficits that need to be assessed and addressed in order for the child to develop a lifelong healthy relationship with food and mealtimes. Through the use of case studies, practical strategies to help a child have successful mealtime experiences and build the skills required to eat a wide variety of nutritionally dense foods will be offered.

Learning Objectives

By the end of this session, attendees will be able to:

1. Identify 5 feeding skill deficits potentially influencing a child's feeding behaviors.
2. Describe 3 strategies to facilitate improved feeding skills during mealtimes.
3. List 4 domains potentially impacting Pediatric Feeding Disorders.

Concurrent Session 2

10:30am-11:30am

Differentiating GERD from Oropharyngeal Dysphagia

Rachel Rosen, MD, MPH

Oropharyngeal dysphagia presents with difficulty feeding, noisy breathing, arching, discomfort with feeding and growth issues. For years, these symptoms were felt to be related to gastroesophageal reflux disease but with the growth of aero digestive centers nationwide, novel data suggests that these patients are aspirating during swallowing and GERD is rarely the primary driver of symptoms. We will review the symptoms of oropharyngeal dysphagia relative to GERD. We will review the diagnostic testing options for these patients including the strengths and limitations of clinical feeding evaluations in infants and the high rate of silent aspiration in children. We will review the therapies for GERD and oropharyngeal dysphagia including the potential harms to treating for GERD when the diagnosis is oropharyngeal dysphagia. Finally, we will review the natural history of both GERD and oropharyngeal dysphagia and the implications for feeding and growth.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe the indications for diagnostic testing in infants with feeding difficulties.
2. Summarize the therapeutic implications when treating for GERD versus dysphagia.
3. Tell the clinical clues that differentiate aspiration from GERD.

Oral Feedings on Respiratory Devices: Picking Apart the Controversy

Louisa Ferrara, PhD., CCC-SLP, BCS-S, CNT

This lecture will aim to educate the audience about the finely coordinated, rhythmical and reciprocal

interrelationship between the swallowing and breathing processes. Videos and pictures will emphasize how these two processes are physiologically and biomechanically reciprocal events, due to shared anatomic structures, muscular components, sensory receptors and brain stem control. This lecture will discuss how respiratory illness can negatively affect swallowing function from a physiological standpoint, but also how respiratory illness can affect a general mealtime from a synactive theory approach. A brief overview of various respiratory devices will be provided to increase the audience's understanding of how their use may create a challenge for neonatal therapist who must juggle medical with developmental outcomes. Evidence-based recommendations will be offered, along with interprofessional strategies to elicit change within a NICU.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe the anatomy, physiology, and interconnection between the swallowing and breathing mechanisms.
2. Through video-fluoroscopic analysis, summarize how various sensory input can alter the swallowing movements in neonates.
3. Report on recent research findings related to safety of neonates swallowing while on respiratory devices.

Concurrent Session 3 11:30am-12:30pm

Family Panel with an Expert

Tara Welker, PhD

This panel discussion will consist of 3 caretakers with children who have varying types of pediatric feeding disorder (PFD). Dr. Tara Welker will moderate this session that will focus on educating individuals on the collaborative care model and allow participants to hear first-hand experience of what these families face on a day to day basis.

Learning Objectives:

By the end of this session, attendees will be able to:

1. Participants will be able to describe family concerns around treatment implementation in the home.
2. Discuss how families can be supported to have optimal feeding relationships with their children.

Family Stress and Trauma in Feeding Disorders: How Can We Support the Whole Family?

Meghan Marsac, PhD

Millions of children will struggle with a feeding disorder at some point in their development. Approximately 30% of children and their family members experience significant posttraumatic stress symptoms (PTSS) as the result of a medical condition, yet many of these reactions go undetected and therefore, untreated. It is well-recognized that there is a strong connection between feeding disorders and emotional health and many programs include behavioral health professionals as key members of their interdisciplinary feeding teams. This presentation will educate participants on how to recognize emotional health symptoms in children, caregivers, and other family members and will offer strategies on how to integrate trauma-informed medical care into daily practice with a goal of maximizing patient health outcomes and supporting all family members.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe how trauma exposure and trauma reactions impact patients, families, and healthcare professionals.
2. Recognize 3 signs or symptoms of emotional stress.

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3. List 3 trauma-informed care techniques to integrate into daily medical practice.

Concurrent Session 4

1:00pm-2:00pm

A Practitioner's Guide to Homemade Tube Feedings

Megan Van Hoorn, MS, RD, CNSC, CD

Cassandra Walia, CD, CNSC, MS, RD

Homemade Tube Feeding (HTF), a tube feeding that includes smooth or liquid food, has increased in popularity. While many patient families are interested in HTF, not all patients are good candidates. Practitioners may also be hesitant in their ability to support families using HTF. We will discuss the advantages and disadvantages of HTF and describe patients that are more likely to be successful with HTF. After this presentation, practitioners of any discipline will feel more confident supporting patients using HTF.

Learning Objectives

By the end of this session, attendees will be able to:

1. Summarize why patients and families may choose Homemade Tube Feeding.
2. Review potential barriers of using Homemade Tube Feeding and explore alternatives to Homemade Tube Feeding.
3. Discuss initiation and assessment of Homemade Tube Feeding recipes.

The Case for ARFID being a PFD

Richard J. Noel, MD, PhD

In this session, we will review how the consensus definition of Pediatric Feeding Disorder (PFD) established a framework for diagnosis, care, and research that accommodates feeding problems and disturbances in children, including Avoidant/Restrictive Food Intake Disorder (ARFID), that were previously managed within a single discipline. Since its creation in 2013, understanding regarding the demographics and clinical presentation of ARFID has accrued; however, aspects of demographics and the natural history of ARFID remain unclear, and a consensus for best treatment setting or approach does not exist. We will also discuss the complexity in identifying and treating children with ARFID, and discerning of the feeding disorder is purely a mental health disorder with care successfully managed solely by mental health providers, or a medical condition, or a skill deficit affecting the mechanics of feeding. Finally, we will describe how interprofessional frameworks, such as PFD, establish a common vocabulary and enhance opportunities for diagnosis, care, and research, utilizing points of synergy to improve outcomes.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe the definitions and interrelations of ARFID and PFD.
2. Recognize the current state of diagnosis and treatment of ARFID.
3. Discuss the advantages of recognizing ARFID as a PFD.

SATURDAY, JANUARY 25TH, 2020

8:00am-9:00am

The PFD Alliance Annual Symposium: Our Focus, Our Future

Erin Ross, PhD, CCC-SLP

Hayley Estrem, RN, PhD

Pamela Dodrill, PhD, CCC-SLP

PFD is complex. Professionals and caregivers alike may struggle with how to best support children with PFD, especially if working within a siloed healthcare system. During The PFD Alliance Annual Symposium: Our Focus, Our Future we will explore ongoing barriers to optimizing care in order to plan for a brighter future. First the PFDA Pillar Chairs will update participants on our achievements to date. Next the results of the 2020 Digital Ideation will be presented. Participants will then engage in collaborative brainstorming on how education, research and advocacy actions can advance care for children with PFD. By analyzing past progress, we will be able to determine our direction for the future. This 1 hour interactive presentation will bring participants and Feeding Matters leadership together as we work towards a future where children with PFD thrive.

Learning Objectives

By the end of this session, attendees will be able to:

1. Describe the role/structure of the PFDA and the strategic planning process.
2. Summarize the community's priorities for future education, advocacy and research actions.
3. List at least 3 ways to contribute to advances in education, advocacy and research for PFD.

Concurrent Session 1

8:00am-9:00am

Food Allergies, Feeding Issues, and EoE: The Devils in the Details

Dan Atkins, MD

Holly Knotowicz, CCC-SLP

This session will review the different types of adverse reactions to foods, focusing on how they are diagnosed and managed in patients with eosinophilic esophagitis (EoE). The role of elimination diets in treating EoE will also be examined. In addition, the various feeding issues encountered in EoE patients and approaches to their management as a feeding specialist will be discussed.

Learning Objectives

By the end of this session, attendees will be able to:

1. Identify the differences between IgE-mediated food allergies and food intolerances in the patient with EoE.
2. Discuss how to support a patient with EoE on a food elimination or restricted diet as a feeding specialist.

Mapping the Gaps: Scoping Review of Research on Pediatric Feeding Disorder

Hayley Henrikson Estrem PhD, RN

Suzanne Thoyre, PhD, RN, FAAN

Cara McComish, PhD

Jinhee Park, Ph.D., RN

The purpose of this scoping review is to examine the extent, range, and nature of research activities concerning feeding disorder among infants and children (up to 18 years) and to identify gaps in the literature. In the presentation, we will share the characteristics of the studies, including purpose, the sample/setting

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used, study design, and unit of study. We will share what is in the literature on several indicators, such as: how was the pediatric feeding disorder measured, and did the authors use a parent-report tool, clinical observation, medical provider identification, or a diagnostic test? If a study design is experimental, we will describe which outcomes were measured (i.e. family, feeding behaviors, skills). We will discuss how we used the PFD model of four components (medical, nutrition, skill, and psychosocial) to organize findings, the characteristics of the studies, and identify gaps in the published research on PFD.

Learning Objectives

By the end of this session, attendees will be able to:

1. State the three most commonly studied topics and age groups of PFD.
2. Recall three areas of research gaps on PFD where studies are needed.
3. Identify at least one interdisciplinary partnership that could address a research need for PFD.

Concurrent Session 2

10:30am-11:30am

Coaching Parents using a Parent Implemented Intervention

Deirdre M. Muldoon, PhD, CCC-SLP, BCBA-D

Joanna Cosbey, PhD, OTR/L

Food refusal behaviors and the associated challenging mealtime behaviors are a major problem for children with autism spectrum disorder (ASD) and/or developmental disability (DD) and a source of stress on parents and families.

This presentation will link the evidence-based practices for addressing food refusal with the growing body of evidence related to the use of parent-implemented interventions for children with ASD. The presentation is based on an intervention model, called Easing Anxiety Together with Understanding and Perseverance (EAT-UP) that has been demonstrated to be effective (both via peer-reviewed research and clinically significant observations) in teaching professionals - and parents - how to support children with ASD and/or DD through a coaching model (Cosbey & Muldoon, 2017; Muldoon & Cosbey, 2018; Muldoon & Cosbey, submitted). The presentation will include information about four primary areas of intervention: food characteristics, social environment, physical environment, and communication. Information regarding evaluating the parents' acceptance of the intervention strategies and assessing progress will also be highlighted. Considerations for settings such as clinic, home, and school will be addressed throughout the presentation.

Learning Objectives

By the end of this session, attendees will be able to:

1. List four primary areas to address to promote mealtime participation of children with ASD and /or DD.
2. Describe how to facilitate parent empowerment to promote improved mealtime participation using evidence-based strategies.
3. Identify 3 challenges to and 3 strategies for effective professional-parent collaboration.

Celebrating Success: Interprofessional Group Strategies for Expanding Food Choices for Children with Pediatric Feeding Disorder

Chantal Lessard, M.H.Sc

Carrie Owen, OT

Feeding difficulties have been estimated to occur in 25-45% of normally developing children (Arvedson, 2008; Lindberg, Bohlin & Hagekull, 1991). In the area of pediatric feeding problems, clinicians and researchers emphasize the need for timely and effective treatment, since a proportion of children develop failure to thrive (FTT) with possible long-term growth and academic deficits (Drewett et al., 1999). However, available supports for families of young children with feeding challenges are often limited. This presentation will outline

the evaluation of the effectiveness of the interprofessional child and parent group therapy interventions for families with children aged 4-12 years with pediatric disorders offered at Children's Hospital of Eastern Ontario. It will review the steps and supports available, the professionals involved, and strategies taught.

Learning Objectives

By the end of this session, attendees will be able to:

1. Provide the participants with an understanding of the interprofessional group program for children four to 12 years of age with Pediatric Feeding Disorder.
2. Illustrate parental perceptions of an interprofessional feeding group treatment model.
3. Apply methods for providing online learning modules for families of children with feeding challenges.