**For Immediate Release**

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**Medical journal publishes Pediatric Feeding Disorder Consensus Definition and Framework**

The January *Journal of Pediatric Gastroenterology and Nutrition* features unifying term and diagnostic criteria

PHOENIX, Ariz. (January 8, 2019) – The *Journal of Pediatric Gastroenterology and Nutrition* has published a field-leading consensus paper proposing a unifying term and diagnostic criteria for the broad spectrum of pediatric feeding struggles. Unlike previous diagnostic paradigms that have typically defined feeding disorders from the perspective of a single medical discipline, “[Pediatric Feeding Disorder — Consensus Definition and Conceptual Framework](http://bit.ly/PFDPaper)” uses the framework of the World Health Organization’s *International Classification of Functioning, Disability, and Health* to define pediatric feeding disorder (PFD) as impaired oral intake that is not age-appropriate, and is associated with medical, nutritional, feeding skill, and/or psychosocial dysfunction.

The paper’s central theme, proposed diagnostic criteria for pediatric feeding disorder, is concisely conveyed in Table 1. - representing a multidisciplinary diagnostic framework for acute and chronic pediatric feeding disorder.

“Pediatric feeding disorder has historically been significantly underserved and misunderstood, leaving families desperate for answers when they can’t feed their child(ren),” said Dr. Praveen S. Goday, lead author of the consensus paper and director of the Feeding, Swallowing and Nutrition Center at Children’s Hospital of Wisconsin. “By incorporating associated functional limitations, the proposed diagnostic criteria for PFD should enable the healthcare community to better characterize the needs of this diverse population of patients; facilitate collaborative care among the relevant disciplines; and promote the use of common, precise, terminology necessary to advance clinical practice, research, and health-care policy.”

Facilitated by [Feeding Matters](https://www.feedingmatters.org/), as conceived by its founder Shannon Goldwater, the consensus paper was written by an international panel of 18 pediatric feeding experts to address the lack of a universally accepted medical definition or stand-alone diagnostic code. Applying the US Census Bureau’s 2017 population estimates, early findings estimate that more than 2.3 million children under the age of 5 experience severe pediatric feeding disorder in the United States1 annually.

The complete consensus paper, “Pediatric Feeding Disorder — Consensus Definition and Conceptual Framework,” is available online at <http://bit.ly/PFDPaper>. See the paper for a full list of authors and disclosures.

**About Feeding Matters**

For kids with pediatric feeding disorder (PFD), every bite of food can be painful, scary, or impossible, potentially impeding nutrition, development, growth, and overall well-being. Yet, there is no functional system of care for PFD locally, nationally, or internationally. That’s why Feeding Matters is dedicated to creating a world where children with pediatric feeding disorder will thrive. Established in 2006, Feeding Matters is the first organization in the world uniting the concerns of families with the field’s leading advocates, experts, and allied healthcare professionals to ignite unprecedented change to the system of care through advocacy, education, support, and research – including a stand-alone diagnosis, the International Pediatric Feeding Disorder Conference, and the Infant and Child Feeding Questionnaire.

To learn more about Feeding Matters or pediatric feeding disorder, visit [feedingmatters.org](http://www.feedingmatters.org) or follow us on Facebook, Twitter, Instagram, LinkedIn, and YouTube at [@FeedingMatters](http://www.twitter.com/feedingmatters).

1.*Manikam R, Perman JA. Pediatric feeding disorders. J Clin Gastroenterol. 2000;30(1):34-46. Reau NR, Senturia YD, Lebailly SA, Christoffel KK. Infant and toddler feeding patterns and problems: normative data and a new direction. Pediatric Practice Research Group. J Dev Behav Pediatr. 1996;17(3):149-153.*