

Centennial Spotlight:

Dr. Richard Katz and MWPH Lead the Way with Feeding Treatment



ABOUT DR. KATZ
Dr. Richard M. Katz
has been MWPH's
chief medical officer
and vice president of
medical affairs for
the past 19 years. A
board-certified pediatric gastroenterologist, Dr. Katz serves as
the medical director
of MWPH's feeding
disorders program

and is also an associate professor of pediatrics at Johns Hopkins University.

After earning his medical degree from Northwestern University, Dr. Katz completed residency training in pediatrics at the University of Chicago and the University of California, San Diego. He then completed a fellowship in pediatric gastroenterology and nutrition at the University of California, San Francisco. He holds a master's degree in business administration from Johns Hopkins University.

Dr. Katz is also the current president of the International Association of Pediatric Feeding and Swallowing (IAPFS).



On July 21 and 22, Mt. Washington Pediatric Hospital (MWPH)

hosted the annual meeting of the International Association of Pediatric Feeding and Swallowing (IAPFS). The hospital co-sponsored the meeting with IAPFS and the Kennedy Krieger Institute. It brought together an international group of professionals and hospitals who have multidisciplinary programs focused on pediatric feeding to share ideas and strategies about kids who won't or can't eat.

"MWPH is probably the smallest organization in the country with this type of quality program to treat pediatric feeding challenges," said Richard Katz, MD, MWPH's chief medical officer and vice president of medical affairs. Katz, who also serves as the medical director of the hospital's feeding program added, "That's why it's particularly noteworthy that MWPH was asked to co-sponsor this conference. Our leadership increases our standing in the international pediatric feeding community and helps us remain on the cutting-edge of care for these children."

Why pediatric feeding programs are important

Feeding challenges should not be confused with "picky" eating. "Our program treats children who, for a variety of reasons, missed a developmental stage and won't or can't eat," Dr. Katz said. "This program is not for pediatric anorexia, which is an entirely different condition."

Feeding issues have only become understood as a diagnosable medical condition within the last 25 years, and many providers don't understand how to treat it. Programs that house feeding specialists, organized in multidisciplinary clinics, can have great success helping children improve their feeding skills—and with those skills, open up new realms of independence and quality of life for themselves.

The Baltimore area has a high concentration of feeding programs and expertise. "I like to say that our region is home to more pediatric feeding specialists per capita than anywhere else in the country," Dr. Katz said.

The behavioral cornerstone of the program was pioneered in this region 25 years ago, and it has formed the model of many of the most successful programs today (including MWPH's). In contrast, although individual providers are scattered nationwide, some states have no multidisciplinary pediatric feeding programs at all.



The multidisciplinary approach is key for feeding program success. "I practiced in California for some time before coming to Baltimore, and although we all worked individually, no one worked together," Dr. Katz said. "When I came to Baltimore, I saw a program that worked better than anything I had seen—it was multidisciplinary, with everyone working together."

Programs like these meet a real need, Dr. Katz said. "Most of these kids are ignored—and most end up with a feeding tube. Typically, children with feeding issues don't get better without treatment, which means they'll have it for the majority of their lives."

Overview of MWPH's multidisciplinary feeding program

MWPH's program combines behavioral therapy and somatic therapy, delivered by a team that spans behavioral health specialists, dietitians, medical professionals, and both occupational and speech therapists. The team begins by undertaking a comprehensive evaluation of how the child is fed, how the child eats, and how the child chews. Then, the team develops a treatment plan designed to reestablish normal patterns of eating.

Although we tend to think of it as a single action—eating—it's actually a much more complex process. To eat

each bite, children must:

- 1. Touch the food
- 2. "Kiss" the food—have it touch the mouth
- 3. "Lick" the food—have it touch the tongue
- 4. Bite and chew the food with the teeth
- 5. Move the food to the side of the mouth
- 6. Move the food back to the center
- 7. Swallow the food

"We go slowly, breaking each step down and providing rewards for children when they accomplish each step involved in eating," Dr. Katz said. Rewards can include praise, a song, a short video, or time with one of MWPH's facility dogs.

Feeding program levels of care

MWPH's feeding program has several approaches to treatment, depending on the patient's needs:

The most common is a feeding evaluation, followed by weekly or biweekly **outpatient therapy**. Therapy can include oral motor therapy from a speech-language pathologist, behavioral therapy from a psychologist, or both.

For patients whose issues are a little more complicated, and if they're the right age, the hospital has two **online group programs:**



- The SPOONS program supports parents, helping them get their kids to come to the table.
- The FEAST program is a group program (currently held online) where a multidisciplinary group of providers from occupational therapy, speech therapy, and psychology meet with a group of children, all of whom are sitting at their own home tables with the same foods in front of them. While this happens, participants' parents meet together on another device with another therapist to gain strategies and support.

The most intensive level is the hospital's well-known **feeding day program**, which runs Monday through Friday at the hospital. Participants spend a half-day at MWPH with two meals, and they have a third meal at home with parents doing the feeding and a therapist supporting them virtually.

MWPH's evolving care meets evolving needs

The feeding program's innovative, multidisciplinary approach is a hallmark of MWPH's broader view toward caring for children with medically complex conditions. The hospital celebrates its centennial this year, and current strategies in care reflect a century of this same methodology.

"The hospital has responded to the community's needs, evolving every decade," Dr. Katz said. "It started by offering a regimen of sunshine and fresh air—in the 1920s, that was pretty much what they had—for kids who had left an inpatient hospital and had nowhere to go."

Over the decades, the hospital continued to pivot, caring for patients with rheumatic fever and serving as a long-term convalescent home, then caring for children with HIV/AIDS, intractable seizures, and other disor-

ders, to premature babies and kids on ventilators.

"Now, we've evolved to be a step-down ICU," Dr. Katz said. "We help kids transition to home ready for their families to manage complex medication regimens, traches, and vents, all of which was unheard of 25 years ago. MWPH also cares for children with severe burns and wounds, kids recovering from surgeries, and kids recovering from trauma."

DR. KATZ'S TOP FIVE PIECES OF ADVICE FOR PARENTS OF CHILDREN WITH FEEDING ISSUES

- HAVE PATIENCE AND CONFIDENCE that your child's condition will get better with the right approaches.
- GET HELP AND ENCOURAGEMENT for yourself as well as for your child. You're not alone.
- CARE FROM A MULTIDISCIPLINARY TEAM is key to success.
- DON'T LET ANYONE MAKE YOU FEEL GUILTY. It's not your fault, and you didn't do anything to cause these feeding issues.
- EMBRACE SMALL STEPS AND SMALL WINS—eating is a complex, multistep process.

For more information about the feeding services at MWPH, please visit mwph.org/feeding.









