

HOUSE BILL REPORT

SSB 6663

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to dual diagnoses of eating disorder and diabetes mellitus type 1.

Brief Description: Concerning dual diagnoses of eating disorder and diabetes mellitus type 1.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Brown, Becker and Walsh).

Brief History:

Committee Activity:

Health Care & Wellness: 2/25/20, 2/26/20 [DP].

Brief Summary of Substitute Bill

- Requires the Department of Health's website to include links to existing information on diabulimia, an eating disorder associated with individuals with type 1 diabetes, by December 1, 2020.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 15 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Chambers, Chopp, Davis, DeBolt, Harris, Maycumber, Riccelli, Robinson, Stonier, Thai and Tharinger.

Staff: Nico Wedekind (786-7290) and Jim Morishima (786-7191).

Background:

"Diabulimia" is an eating disorder typically associated with individuals with type 1 diabetes in which the individual purposefully restricts insulin in order to lose weight. Diabulimia does not have a separate diagnostic code in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5), but the DSM-5 classifies insulin omission as a purging behavior. Some medical professionals have used the term ED-

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DMT1 (Eating Disorder-Diabetes Mellitus Type 1) to describe the disorder, as this term is used to refer to any type of eating disorder comorbid with type 1 diabetes.

Long term consequences of diabulimia can include kidney, liver, or heart disease.

Summary of Bill:

By December 1, 2020, the Department of Health's website must include links to existing information on diabulimia.

Appropriation: None.

Fiscal Note: Available. New fiscal note requested on February 21, 2020.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Typically, when people are diagnosed with type 1 diabetes, it is at a very young age. They spend years learning how to administer their insulin. When they get to be teenagers, the medical community has allowed them to continue with their insulin administration with more independence. However, young women struggle with body image issues, and in attempts to manage their weight, they may purposefully restrict their insulin intake. These younger people may not fully understand that doing so is a very dangerous weight loss strategy that can increase the likelihood of ketoacidosis, hospitalization, and potentially even death.

Families should be alerted and informed about the possibility of their child developing diabulimia. This information should also be shared with health care providers. This bill costs nothing and has the potential to save lives.

(Opposed) None.

Persons Testifying: Senator Brown, prime sponsor; and Amber Ulvenes, Washington Chapter of the American Academy of Pediatrics.

Persons Signed In To Testify But Not Testifying: None.