

changing the times the medication is administered can often alleviate this side effect. Another option is to ask Johnnie's physician to switch his medication to a sustained time-release form of methylphenidate that can be given once per day in the morning.

Anorexia Nervosa

1. Evidence: Using the clinical manifestations of anorexia nervosa (AN) (see [Box 16-6](#)), there is sufficient evidence to support the conclusion that Jane has AN.

2. Assumptions:

- a. Young adolescent girls with AN are often high achievers or excellent students. They have an abundance of energy, a distorted body image, and a fear of gaining weight.
- b. A family crisis can influence AN. Jane's parents are currently in the middle of a divorce, and in this type of situation, some teens feel they have no control over events in their life. Consequently, some adolescents take control by refusing to eat and developing AN.
- c. Jane is engaging in increased physical activity and is skipping lunch several days each week. On physical examination, she has a decreased body temperature (96.8° F [36° C]) and she has lost 20 pounds (9 kg) in the past year (she is at <85% of her expected weight). She also told the nurse practitioner that she has not had her menstrual period for 3 months. These manifestations are all congruent with AN.