

Eating Disorders

Overview

What eating disorders are, how to recognize their warning signs, and where to explore treatment options.

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Popular culture, particularly our children's exposure to an array of TV programs, magazine ads, and billboards emphasizing the slim look and shape of young women and men alike, sends a clear message. The desirable body image is thin and pretty. For some people, especially adolescent girls, the desire to be thin can become an obsession, leading to serious eating disorders like anorexia and bulimia. Although boys, men, and older women can be affected similarly, most patients with eating disorders are women. All are individuals who are aspiring to an unattainable body through unhealthy eating and exercise habits.

Eating disorders are serious problems and should never be ignored or treated lightly. Eating disorders can have serious physical consequences and can even be life-threatening. Although eating disorders can affect anyone at any age, preteens and teenagers of both sexes are especially vulnerable. If the eating disorder is addressed early, treatment is often successful. In this article, you'll find information about eating disorders, how to recognize them, and what treatments can help someone with an eating disorder.

What is an eating disorder?

An eating disorder is an emotional health condition with potentially life-threatening consequences. People with eating disorders use food -- and, sometimes, exercise or other kinds of behavior -- to cope with problems that they would otherwise find overwhelming. They tend to have distorted images of their own bodies that often lead to dramatic weight losses or gains.

Someone with an eating disorder takes normal attitudes and behaviors to extremes that damage his or her body. While it's normal to diet, it's not normal to keep dieting once the body's excess fat is gone. And while it's normal to fluctuate between dieting and giving in to the occasional temptation, it's not normal to fluctuate in ways that result in extreme weight losses and gains.

A person with an eating disorder may:

- exhibit extreme behavior around eating, such as intense dieting, extreme indulgence in food, and major weight loss or gain

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- use unhealthy weight-management practices, which can include binge eating, near-starvation dieting, self-induced vomiting, excessive exercising, and the use of laxatives and diuretics
- have an irrational fear of fat and an intense desire to be thinner
- have a distorted view of healthy nutrition and eating habits

These attitudes and behaviors are often paired with other emotional and social problems, including:

- difficulty keeping up with obligations at school, at work, or at home
- unhappiness and a sense of hopelessness
- extreme mood swings, including depression
- withdrawal from friends and family

Eating disorders fall into three main categories:

- *Anorexia nervosa* is characterized by extreme weight loss and refusal to maintain adequate body weight.
- *Bulimia nervosa* combines binge eating with purging to control weight, through the use of laxatives, diuretics, enemas, or self-induced vomiting.
- *Binge-eating disorder* is characterized by frequent and large intakes of food and self-induced vomiting, always done in private or hidden from friends and family members.

Anorexia nervosa

People with anorexia nervosa may believe that being thin will solve all their problems and use weight loss as a way to deal with other emotional issues such as anger or fear. Typically, they see themselves as fat or unattractive, even when they are underweight or emaciated.

Anorexia often develops during or after a stressful life situation. Dieting and weight loss may be used as a way to regain a sense of control. Although anorexia most frequently affects adolescent girls, it also occurs among men and women of all ages, income groups, and ethnic backgrounds. The two most common ages for developing anorexia -- 14 and 18 -- coincide with times of great personal change and stress. A 14-year-old is moving from middle school to senior high school, while an 18-year-old is graduating from high school and beginning adult life. Sometimes more than one family member may have anorexia. Some researchers believe that genes may play a role in who develops the disease.

Warning signs of anorexia

People with anorexia are often unwilling to admit that they have a problem, even when faced with a serious health risk. Friends and family members should be aware of any or all of the following signs of a potential eating disorder:

- significant weight loss without any illness
- a refusal to eat even when feeling hungry
- a refusal to maintain healthy body weight, as determined by weight, height, and age
- strict dieting and a fear of gaining any weight, or sudden dietary restrictions (such as becoming a vegetarian)
- preoccupation with food, calories, nutrition, exercise, and cooking
- frequent trips to the bathroom to weigh him- or herself on the bathroom scale
- claiming to feel overweight when actually not
- unusual eating rituals, such as cutting food into tiny pieces, chewing every mouthful for a long time, or being a very “picky” eater
- excessive exercise or physical activity
- complaints of feeling bloated or nauseous after eating small amounts of food
- using laxatives or vomiting to lose weight
- increased irritability
- denial of being underweight or unhealthy
- decreased or nonexistent menstrual periods

Here are some of the medical problems that can result:

- loss of menstrual period (often the first visible sign of the illness)
- damage to vital organs like the kidneys
- low blood pressure
- lowered breathing rate, pulse, and thyroid functions
- anemia, swollen joints, reduced muscle mass, and light-headedness
- loss of calcium, which can lead to osteoporosis (in severe cases, bones become brittle and may break more easily)

Bulimia nervosa

Bulimia and anorexia have certain behaviors in common. Someone with either of these disorders fears becoming fat and tends to strive for perfection and success. The difference is that a person with bulimia eats large quantities of food and then purges or rids the body of the calories by vomiting; exercising excessively; or taking laxatives, diuretics, or enemas. It is important to recognize that some

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people will vomit or use laxatives to rid themselves of food and weight, while others will use fasting or excessive exercise.

People with bulimia may be of average weight, so family and friends may not notice a problem. Although bulimia usually affects females, between 5 and 10 percent of bulimics are male, according to the National Association of Anorexia Nervosa and Associated Disorders (ANAD). Many boys who develop bulimia are involved in sports such as wrestling, where weight matters for competition.

Warning signs of bulimia

You may not realize someone near you has bulimia because he or she “binges and purges” in secret, which can hide the problem for years. A bulimic may purge anywhere from once a week to several times a day.

Signs of bulimia include:

- disappearing after a meal to go to the bathroom
- strict dieting between episodes of bingeing and purging
- excessive concern about weight
- frequent overeating, especially sweet, high-calorie foods
- expressing guilt or shame about eating
- buying, saving up, or hiding large amounts of food and eating it quickly
- a puffy face, dryness, scabs, or swelling around lips and the jaw
- laxative or diuretic wrappers found frequently in the trash
- mood swings or anxiety
- excessive exercise

Bulimia is tough on the body. Here are some of the potential complications:

- tears in the lining of the throat, esophagus, and stomach
- urinary tract infections and kidney damage
- chronic indigestion and difficulty with normal bowel movements
- irregular menstrual periods
- sore throats
- osteoporosis
- dental problems (from erosion of the teeth’s enamel)
- at an extreme, heart failure from having lost potassium and other vital minerals

Binge-eating disorder

People with binge-eating disorder eat uncontrollably but do not purge their body of food. They are often overweight and feel that they lose control of themselves

when they're eating. They eat large quantities of food without stopping until they're uncomfortably full. Usually, they have more difficulty keeping weight off than others with weight problems. Many people with binge-eating disorder have a history of dramatic weight swings.

Warning signs of binge eating

A binge eater often eats large quantities of food or eats rapidly. Here are some other signs of the disorder:

- preferring to eat alone
- eating to the point of being uncomfortably full
- disgust and guilt regarding own eating habits
- eating to relieve feelings of stress
- hiding or hoarding food
- rapid changes in weight
- frequent promises to begin dieting
- depressed or feeling guilty after eating

Because they are often overweight, people with binge-eating disorder may be prone to the medical problems associated with obesity, including diabetes, high cholesterol, high blood pressure, and heart disease.

Prevention tips for parents

There is a lot that parents can do to help keep their children's weight worries from turning into eating disorders.

- *Accept your child for who she is*, whatever her appearance and weight.
- *Take note if your family has unusually high standards for performance, academic or otherwise.* Children who feel pressured or feel they can't meet such standards can be vulnerable to eating disorders. If your family has had significant challenges such as a disabled parent or a sibling who requires considerable attention, be sure that other family members, especially children, get sufficient time and care. A preteen or teenager with an eating disorder may hide his problem indefinitely, so as not to upset the family or "make things worse."
- *Help your child feel good about herself by giving her frequent and meaningful praise.* Let her know that what is special about her is who she is as a person, not what she looks like or what she accomplishes.
- *Help him understand that everyone's body is unique*, that there is no such thing as a perfect body.
- *Encourage your child to engage in activities that give her pleasure.* Encourage enjoyment of life.

- *Avoid using food as a punishment or a reward* -- for example, by saying, “If you’re good, you can have dessert.”
- *Offer a well-balanced selection of foods at home.* Prepare healthy and balanced meals.
- *Set an example by eating well-balanced meals yourself and by accepting your physical appearance.* Don’t limit your activities because of your appearance or dwell on your weight. Instead, emphasize a healthy lifestyle that includes good food choices and sensible amounts of exercise.
- *Help your child understand the negative consequences of excessive dieting* (he probably already knows the consequences of overeating) and help him stand up to any pressures to look a certain way.

Helping someone with an eating disorder

Treatment can save the life of someone with an eating disorder. Friends, relatives, teachers, and physicians all play an important role in helping a person with an eating disorder start -- and stick with -- a treatment program.

Here are some ways to reach out to someone you suspect has an eating disorder:

- *Express your concern.* Talk to the person privately, rather than voicing your worries in front of other people, and listen to what she has to say. Speak with compassion and try to avoid criticism.
- *Be clear about what you see.* Tell why you think there’s a problem, giving specific examples. Avoid focusing on the person’s looks, which can reinforce an obsession with body image. Focus instead on behaviors or other aspects of the person’s life. (For example, “I’ve noticed that you are not eating breakfast and that you’re eating much less for supper. And I can tell that you’re losing a lot of weight. I’m worried about your health.”) Be prepared for your loved one to deny he has a problem.
- *Contact a doctor immediately if you notice the warning signs of an eating disorder.* Keep in mind that some people hide their disorders for a long time, so the condition may be advanced by the time you notice it.
- *If you don’t see clear warning signs but are concerned that there’s a problem, ask the person to agree to see a doctor for an evaluation.* If the person you’re concerned about is an adolescent or a teenager and refuses to seek help, consider linking other privileges to this evaluation.
- *Find out about helpful resources in your area.* Local hospitals and university medical centers can tell you about eating disorders and how they are treated. You can also ask your health care provider for referrals to therapists and physicians who have experience with eating disorders.

- *Learn more about eating disorders.* The more you know, the more helpful you will be to someone with an eating disorder. Ask a librarian to recommend books on the subject or look for resources on the Internet.

Don't expect someone with an eating disorder to acknowledge the problem. She may feel threatened rather than comforted by your concern and won't easily give up the problem behavior.

Treatment options

No matter what type of eating disorder or how extreme the problem seems, treatment is critically important -- and the sooner the better. The longer a person keeps up abnormal eating behaviors, the more difficult it will be to break the cycle and the more serious become the overall health consequences. If you suspect that someone close to you has an eating disorder, the first step is to acknowledge the problem with him and to arrange for a complete physical exam to rule out other illnesses. With a clear medical diagnosis, a doctor can help you develop a treatment plan or refer you to a specialist.

Because eating disorders involve both emotional and physiological problems, optimal treatment should involve specialists who can address the many facets of this disease. It may include individual psychotherapy or behavior therapy, family or group therapy, peer support groups, medication such as antidepressants, and nutritional counseling. Many people with eating disorders have a distorted knowledge of nutrition, and it is particularly helpful to educate them so that they may let go of inaccurate or unhealthy ideas or beliefs. Depending on the person's need and the programs available, treatment may be done in an outpatient setting, in a hospital, or in an intensive full-day program at a clinic or in a residential program.

Successful therapy and treatment must be sensitive to the patient's special circumstances and needs. Look for doctors or counselors who have experience treating people with eating disorders. Try to find a program that takes a comprehensive approach -- including therapy, support groups, and nutritional counseling -- and provides information and support for family and friends.

Taking care of your own needs

If a family member or someone close to you has an eating disorder, don't blame yourself. You may feel anxious, angry, and confused by what is happening to your loved one. Families alone don't cause eating disorders, and they don't cure them. Professional help is needed, and the greatest support you can offer is to convince the person to seek professional help. If you are the parent of a minor with an eating disorder, use your authority to get your child the treatment she needs.

Don't allow the person to disrupt your life through manipulation, blame, threats, or arguments. Help the person acknowledge his problem, if you can, and find the help he needs. But don't take on the problem as your own.

Seek help and support yourself. Attend a support group. Ask for advice from people who know about and understand the problem. And take care of yourself so that you can be available for support when you are needed.

Resources

Web resources

National Association of Anorexia Nervosa and Associated Disorders

P.O. Box 7
Highland Park, IL 60035
847-831-3438
www.anad.org

National Eating Disorders Association

603 Stewart Street, Suite 803
Seattle, WA 98101
800-931 2237
www.nationaleatingdisorders.org

Books

Help Your Teenager Beat an Eating Disorder, by James Lock, M.D., Ph.D., and Daniel Le Grange, Ph.D. (The Guildford Press, 2005).

When Dieting Becomes Dangerous, by Deborah M. Michel and Susan G. Willard. (Yale University Press, 2003).

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