



# Eating Disorders

A combination of factors contribute to the development of anorexia nervosa and bulimia. Some of these include a person's psychological vulnerability; abnormal family attitudes about eating and food; a national mania for idealizing thinness, which distorts women's perceptions of their bodies; society's taboo against fatness and a trend of conformity; and the current value placed upon exercise and fitness.

## Symptoms of Eating Disorders

Eating disorders are characterized by a disturbed sense of body image and a morbid fear of obesity that show up as abnormal patterns of handling food (binge eating and vomiting), self-induced marked weight loss and irregular menstruation.

Eating disorders predominantly affect females, with about 5 to 10 percent of the cases being male. A high percentage of patients are from middle and upper income families.

One of the first signs of an eating disorder is a person's exaggerated concern, anxiety or preoccupation about obesity. They are preoccupied with food. They study diets and calories and start restricting food intake. They may hoard, conceal and waste food.

Even people whose bodies seem to be wasting away tend to remain very active, including pursuing rigorous exercise programs. In men and women, often there is a loss of interest in sex. Commonly, depression is present. Patients tend to be very manipulative and often lie about food intake and conceal behavior such as induced vomiting.

## Types of Eating Disorders

**Anorexia nervosa** and **bulimia** are the two major eating disorders.

**Anorexia nervosa** is usually associated with a 25 percent or more loss of body weight. The person fears obesity, denies the illness and continues to fear obesity even when they experience marked weight loss.

**Bulimia** is a syndrome characterized by a variety of types of abnormal eating-related behaviors and weight management techniques. Bulimia is characterized by recurring episodes of binge eating - the rapid eating of food, especially high calorie food within a few hours. To overcome the effects of the binges, bulimics either self-induce vomiting, use laxatives and/or diuretics or strict dieting. Depression is commonly seen in patients with bulimia.



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## Treating Eating Disorders

**Anorexia nervosa** is usually treated in two phases - short-term intervention to restore body weight, stabilize the person's condition and save their life; and long-term therapy to improve personality and family problems. A combination of family therapy, group therapy, individual psychotherapy, assertiveness training, dietary counseling and antidepressant medications may also be recommended.

Treatments for **bulimia** are relatively new. More severe cases have generally been treated by psychiatrists with antidepressant medications. Less severe cases have been treated by psychologists using behavior therapy. A combination of family therapy, group therapy, individual psychotherapy, assertiveness training, dietary counseling and antidepressant medications may also be recommended.