

## **Eating Disorders**

### **What are eating disorders?**

Eating disorders involve a disturbance of eating habits or weight-control behaviour which results in impairment to physical health or which affects the person's psychological and social functioning.

Eating disorders occur in people who over-evaluate their body shape and weight. Whereas most young people evaluate themselves by their achievement in various areas such as social relationships, school work or sporting ability, those with eating disorders see their selfworth largely in terms of their body shape and weight and their ability to control these.

Some young people with eating disorders lose weight, sometimes to the point of starvation. Although the young person is seriously underweight, they see this as success rather than a problem and have limited motivation to change. This is the pattern in the disorder anorexia nervosa.

Others' attempts to lose weight are undermined by periods of uncontrolled eating so that normal weight is maintained. This is the pattern in bulimia nervosa. Most young people with disturbance of eating habits or weight control behaviour don't fit the typical patterns of either anorexia or bulimia and are said to have atypical disorders.

### **Anorexia nervosa**

The main characteristics are:

- Self-induced weight loss through food avoidance, can include use of appetite suppressants, vomiting, laxatives and excessive exercise
- Distorted body image
- Hormonal changes (menstrual periods stopping and delayed/arrested puberty) □  
Very low body weight (15% below normal)

For some young people the disorder is only brief, but in others it becomes a long-term problem and there is a risk of death. Continued weight loss in children is potentially very dangerous. Children under the age of 16 are still growing and if they are losing weight (unless for medical reasons) there is a serious danger of immediate risk. The lower the BMI (Body Mass Index), the more resistant anorexia is to treatment.

Young people who get help early in the course of anorexia tend to have a better outcome. Below are some early signs of anorexia.

#### **Physical signs:**

- In young women, loss of periods (or not starting to menstruate in young girls)
- Weight loss without any other illness that would account for it
- In young men, a lack of sexual interest or potency
- In prepubescent children puberty is delayed and growth and physical development are usually stunted

**Emotional and psychological signs:**

- Changes in character
- Obsessive concern about body weight, shape and dieting
- Extreme fear of gaining weight or of eating
- Unrealistic belief about being fat
- Marked distress around meal times
- Evidence of depression, anxiety and thoughts of self-harm
- Rigid 'black and white' thinking about food; labelling foods as 'good' and 'bad'

**Behavioural signs:**

- Preoccupation with food, cooking for others
- Becoming withdrawn
- Cutting out foods that were once enjoyed
- Excessive exercising
- Inducing vomiting (anorexia with purging)
- Avoiding meal times with others
- Excessively analysing food labels or counting calories □ Lying or evading questions about:
  - Types and amounts of food consumed
  - Exercising
  - Body shape and weight

**Bulimia nervosa**

The main characteristics are:

- Binge eating accompanied by subjective feelings of loss of control
- Self-induced vomiting and excessive exercise, as well as the misuse of laxatives, diuretics, thyroxine, amphetamine or other medication
- Self-evaluation is unduly influenced by body shape and weight, and there may indeed have been an earlier episode of anorexia nervosa
- Mood disturbance is extremely common in bulimia nervosa and symptoms of anxiety and tension are frequently experienced
- Physical signs: sores on knuckles, swollen salivary glands, tooth decay, throat infections, heart palpitations, epileptic fits

Bulimia usually starts in the same way as anorexia but episodes of binge eating prevent the severe weight loss seen in anorexia. As a result, people with bulimia are most often at near or normal weight for age and height.

There is often a delay of many years before people with bulimia get professional help.

## **Atypical eating disorders**

Atypical eating disorders involve over-evaluation of body shape or weight but do not fit the full pattern of either anorexia or bulimia.

### **Food avoidance emotional disorder (FAED)**

This is a disorder where emotional issues such as anxiety and depression interfere with eating, so that the sufferer eats very little and loses a lot of weight. It can therefore be confused with anorexia and it can take time for the correct diagnosis to be made. FAED usually affects children between about 5 and 16.

There are usually other signs of their emotional struggle that are not focussed around food, and they may also exhibit concerns such as issues with sleeping, phobias or extreme anxiety and other signs of depression such as tearfulness. The main factor that separates FAED from anorexia is that sufferers are generally aware that they are underweight.

They often wish they could eat more and maybe concerned about being too thin, for example not liking the way they look. This is very different from anorexia. Treatment for FAED therefore focuses on the emotional difficulties underlying the eating problem, and on maintaining weight within healthy levels.

### **Binge eating (compulsive overeating)**

The most common atypical eating disorder is binge eating disorder. It is most common than either anorexia nervosa or bulimia nervosa, affecting about 1.4% of the population globally. Out of an estimated 725,000 people with EDs, 357,261 had binge eating disorder.

The main characteristics are:

- Preoccupation with body shape and weight
- Self-worth influenced by shape and weight
- Associated with being overweight and obese
- Purging not involved
- More responsive to treatment than anorexia nervosa and bulimia nervosa

## **Warning signs of eating disorders**

**At home, a young person developing an eating disorder may:**

- Avoid eating with the family, claiming that they have already eaten with friends, ate earlier in the day, or that they are not hungry
- Be increasingly preoccupied with exercising
- Obsessively count calories or examine food labels for nutritional information
- Complain that the food they have been given is fatty, disgusting or unhealthy
- Eat more than usual between meals or at meal times
- Be more interested in cooking for others but giving themselves smaller portions
- Be more secretive than usual
- Wear bigger clothes than usual

If the young person is binge-eating, large amounts of food may go missing (particularly snack foods such as crisps and chocolate).

**At school a young person developing an eating disorder may:**

- Avoid eating with friends, discard lunches or spend lunchtimes exercising
- Appear more lethargic or struggle to concentrate on their schoolwork
- Not want to be involved with PE classes or get changed in front of people or may focus on PE to the point of obsession

## Helpful Resources: Eating Disorder Organisations

Anorexia and Bulimia Care (ABC) [www.anorexiabulimiacare.org.uk](http://www.anorexiabulimiacare.org.uk) Telephone: 03000 11 12 13

ABC has 23 years of experience as a UK national eating disorder organisation. ABC provides personal advice and support to anyone affected by anorexia, bulimia, binge eating and all kinds of eating distress.

We support sufferers and their family and friends towards full recovery.

BoyAnorexia [www.boyanorexia.com](http://www.boyanorexia.com) Email: [jenny@boyanorexia.com](mailto:jenny@boyanorexia.com)

Informative website about anorexia in boys in association with the book 'Boys Get Anorexia Too' by Jennifer Langley.

Student Minds (formerly Student Run Self Help) [www.studentminds.org.uk](http://www.studentminds.org.uk)

A website about a project aiming to improve support available to students and young people with eating disorders by setting up a network of student run self-help groups. The website contains information about existing self-help groups, and information about how to get involved.

Men Get Eating Disorders Too [www.mengetedstoo.co.uk](http://www.mengetedstoo.co.uk)

A website for men who have been affected by anorexia, bulimia, binge eating disorder, compulsive eating and/or exercise. The website also provides a platform for which men can get their voices heard and a space for which they can offer and receive peer support through the forum and live chat services.

NICE (National Institute for Health and Clinical Excellence) [www.nice.org.uk](http://www.nice.org.uk)  
<http://guidance.nice.org.uk/CG9>

National Institute for Health and Clinical Excellence Guidelines on treating eating disorders: information for the public. This booklet tells you what treatment you can expect from the NHS.

beat (beating eating disorders) [www.b-eat.co.uk](http://www.b-eat.co.uk) Youth email: [fyp@b-eat.co.uk](mailto:fyp@b-eat.co.uk)

Youthline: 0808 801 0711

Adult email: [help@b-eat.co.uk](mailto:help@b-eat.co.uk)

Adult Helpline: 0808 801 0677

This website provides information on all aspects of eating disorders, including anorexia nervosa, bulimia nervosa, binge eating disorders and other related eating disorders.

## Useful publications

The Parent's Guide to Eating Disorders What Parents Need to Know, Jane Smith, (2011, Lion

Hudson) Useful Apps: **Eating disorders**

Recovery Record Eating Disorder Management App <https://www.recoveryrecord.com/>

Go-to app for eating disorder recovery for all eating disorders. Includes: meal logging, meal planning, coping skills, rewards for recovery wins, social and secure, can be used in conjunction with treatment teams. Great reviews.

Rise Up Recovery Warriors <https://www.recoverywarriors.com/app/>

Eating disorder recovery tools including meal logging, behaviour tracking, emotions and thought tracking. Also has information and activities around body image, mindfulness and relationships. Can be used in conjunction with treatment teams. Featured in Forbes magazine feature 'Technologies innovating mental health in 2016'. Extended features (podcasts, etc.) on website.