Anorexia nervosa is a potentially life threatening eating disorder characterized by self-starvation and excessive weight loss. While men do succumb to anorexia nervosa, (5 percent to 10 percent of sufferers) women are more likely to develop the disorder in adolescence or young adulthood. Researchers have estimated .5 percent to 3.7 percent of all women, and 1 percent of female adolescents, suffer from anorexia.

There are different types of anorexia including restricting and binge-purge types. Restricting type is essentially self-induced starvation by eating very few calories or consuming just water in a day. Binge-purge type is characterized by an individual who may have a small amount of food but then, to compensate, may vomit or exercise the calories off.

Why is this such a problem among women? Researchers believe the development of an eating disorder is due to a complex interaction of genetic, biological, behavioral, psychological and social factors. Adolescence is a rapidly changing time in a woman's life, and often, she may feel that she has little control in the outcome of events around her. Control over her body and eating patterns (or lack thereof) is one way to exert power over the forces around her. Unfortunately, many become obsessive about it and develop eating disorders that distort and confuse their sense of how their body should and does look.

Here are the defining features of this disorder: (a) an intense and irrational fear of body fat and weight gain; (b) a determination to become thinner and thinner; and (c) a misperception of body weight and shape to the extent that the person may feel or see “fat” even when starvation is clear to others.

These psychological characteristics contribute to drastic weight loss and inability to maintain a healthy weight for age and height. Food, calories, fat grams, weight and weight management dominate the person's life, and attempts to help are often ignored or met with denial or anger.

The symptoms of anorexia nervosa include the following:

- Extreme thinness or emaciation due to restricted eating typically considered 15 percent below ideal body weight for age and height.
- Intense fear of weight gain. Anorexia does not mean a loss of appetite, but rather, individuals suffering from anorexia are starving. They are just too afraid to eat.
- Distorted body image and extreme concern with body weight and shape. Most individuals with anorexia look in the mirror and see a fat person, even though they may be dangerously thin.

Feelings of inadequacy, depression, anxiety and loneliness, as well as troubled family and personal relationships, may contribute to the development of an eating disorder. Our cultural idealization of thinness is often a contributing factor.

What are the warning signs?

- Dramatic weight loss in a relatively short period of time.
- Wearing big or baggy clothes, or dressing in layers to hide body shape and/or weight loss.
- Obsession with calories and fat content of foods.
- Obsession with continuous exercise.
- Visible food restriction and self-starvation.
- Use of diet pills, laxatives, ipecac syrup (which can cause immediate death) or enemas.
- Isolation. Fear of eating around and with others.
- Unusual food rituals such as shifting the food around on the plate to look eaten; cutting food into tiny pieces; making sure the fork avoids contact with the lips (using teeth to scrape food off the fork or spoon); chewing food and spitting it out, but not swallowing; dropping food into napkin on lap to throw away later.
• Hiding food in strange places such as closets, cabinets, suitcases, under the bed, etc., to avoid eating it.
• Flushing uneaten food down the toilet.
• Vague or secretive eating patterns.
• Preoccupied thoughts of food, weight and cooking.
• Self-defeating statements after food consumption.
• Hair loss. Pale or "grey" appearance to the skin.
• Dizziness and headaches.
• Low self-esteem. Feeling worthless. Often putting themselves down and complaining of being "too stupid" or "too fat" and saying they don't matter. Need for acceptance and approval from others.
• Complaints of feeling cold often.
• Low blood pressure.
• Loss of menstrual cycle.
• Constipation or incontinence.
• Bruised or callused knuckles; bloodshot or bleeding in the eyes; light bruising under the eyes and on the cheeks from induced vomiting.
• Perfectionist personality.
• Mood swings. Depression. Fatigue.
• Insomnia. Poor sleeping habits.

What is the treatment?

There are four main components for the treatment of anorexia. These include the following:
• Restoring the affected individual to a healthy body weight.
• Identifying and treating psychological issues associated with the eating disorder.
• Reducing or eliminating the behaviors and thoughts that foster development of disordered eating.
• Preventing relapse.

Treatment may include medications such as antidepressants; however, individual, group and family psychotherapy can better address the underlying reasons for the disorder. Effective treatment may include one of these methods or a combination of the two. Medical care and monitoring as well as nutritional counseling will also benefit an individual who is seeking treatment for anorexia.

It is important to recognize anorexia nervosa as a serious, possibly life-threatening illness. It has one of the highest death rates of any mental health condition, with 5 percent to 20 percent of those with the illness dying from its complications.

Treatment has shown to be most effective when the illness is identified and treated early. However, anorexia nervosa does have a very high relapse rate, and continued care should be taken even after symptoms may appear under control.

Resources


