

Educational Links (English):

- ❖ <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/anorexiaandbulimia.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/eatingdisorderskeyfacts.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/partnersincarecampaign/eatingdisorders.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/parentsandcarers/eatingdisorders.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/youngpeople/worriesaboutweight.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/eatingwellandmentalhealth.aspx>
- ❖ <http://www.rcpsych.ac.uk/healthadvice/treatmentswellbeing/physicalactivity.aspx>
- ❖ <https://www.nimh.nih.gov/health/topics/eating-disorders/index.shtml>
- ❖ <http://www.nationaleatingdisorders.org/general-information>
- ❖ <http://www.mayoclinic.org/diseases-conditions/binge-eating-disorder/home/ovc-20182926>
- ❖ <https://www1.bingeeatingdisorder.com/>



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Lumos Psychiatric Services



Educational Booklet: Eating Disorders

Eating disorders are characterized by an abnormal attitude toward food that causes someone to change their eating habits and behaviors. A person with an eating disorder can focus too much on their weight and form, leading to unhealthy choices about foods with health-damaging outcomes.

Types of eating disorders:

- ❖ **Anorexia Nervosa** - when a person tries to keep their weight as low as possible; for example, go hungry or exercise too much
- ❖ **Bulimia Nervosa** - when a person goes through periods of overeating and deliberately vomits or uses laxatives (medicines to help empty the intestines) to try to control their weight
- ❖ **Binge Eating Disorder** - when a person feels compelled to overeat large amounts of food in a short period of time

Women are more likely than men to have eating disorders. They usually begin in adolescence and often occur with depression, anxiety disorders and drug abuse. Eating disorders can cause heart, kidney and even death problems. It's important to get help on time. Treatment includes supervision, psychological therapy, nutritional counseling and sometimes medicines.

What is the origin of eating disorders?

There are many factors that predispose the possibility of eating disorders: biological predisposition that includes genetics, society (pressure for thinness as a symbol of beauty and success), the family environment (tense, distant climate, unduly affectionate, overprotective,

low communication, high family expectations, excessive concern for the weight and diets of a family member, or personal character (fear of ripening, perfectionism and self-control or low self-esteem and personal dissatisfaction).

How are eating disorders treated?

Adequate nutrition, reducing excess exercise and discontinuation of vomiting-inducing behaviors, form the basis of treatment. Certain forms of psychotherapy or dialogue therapy, and some medications are also effective for many eating disorders. However, for the most chronic cases, no specific treatments have yet been identified. Treatment plans are often tailored to individual needs and may include one or more of the following:

- ❖ Individual, group and/or family psychotherapy
- ❖ Health care and monitoring
- ❖ Nutritional advice
- ❖ Medications.

Some patients may need to be hospitalized to treat complications from malnutrition or to ensure adequate nutrition in cases of extreme thinness.

Treating anorexia nervosa:

Treatment of anorexia nervosa includes three components:

- ❖ Regaining a healthy weight
- ❖ Treating psychological problems related to eating disorder
- ❖ Decrease or eliminate behaviors or thoughts that led to poor feeding and prevent relapse.

Treating bulimia nervosa:

As with anorexia nervosa, treatment for bulimia involves a combination of options and depends on the needs of the individual. To decrease or eliminate the behavior of overeating and vomiting, the patient is likely to receive nutritional counseling and psychotherapy, especially cognitive behavioral therapy, or be prescribed medication. Cognitive behavioral therapy helps a person focus on their current problems and how to solve them. The therapist helps the patient learn to identify patterns of distorted or useless thoughts, recognize and change wrong beliefs, relate to others more positively, and consequently changes behaviors.

Treating Binge Eating Disorder:

The options for treating compulsive eating disorder are similar to those used to treat bulimia. Psychotherapy, especially cognitive behavioral therapy tailored to the individual, has been shown to be effective. Again, this type of therapy can be offered individually or as a group. Finally, antidepressants can reduce compulsive eating episodes and help relieve depression in some patients.

How to Detect a Food Disorder in Others?

It can often be very difficult to identify that a loved one or friend has developed an eating disorder.

Warning signs to consider include:

- ❖ Meals skipped
- ❖ They complain of being fat, despite having their ideal weight or being underweight
- ❖ They are constantly weighed and looked at each other all the time in the mirror
- ❖ They say they've already eaten, or they're going out to eat somewhere else and avoid eating at home
- ❖ They cook for other people big meals or complicated, but they eat very little or nothing of them
- ❖ They only eat certain low-calorie foods in your presence, such as lettuce or celery
- ❖ They feel uncomfortable or refuse to eat in public places, such as in restaurants
- ❖ They use websites that are "pro-anorexia"

For questions or concerns, discuss it with your doctor.