Eating Disorders

Introduction

Eating disorders involve extreme emotions, behaviors, and attitudes surrounding food and weight issues. They involve a severe disturbance in eating behaviors and intense fear of weight gain. The most commonly talked of eating disorders are <u>anorexia</u>, <u>bulimia</u>, and <u>binge eating</u>. Remember that if someone displays a few of the following signs or symptoms, it does not necessarily mean that they suffer from a disorder. It may be a problem if they show several signs and symptoms. The following will define the basics of these three disorders and will provide some information on what you can do for yourself or someone you know that needs help.

Definitions:

- 1). **Anorexia** is characterized by deliberate and obsessive starvation in pursuit of thinness. Individuals are usually significantly underweight.
- 2). **Bulimia** is characterized by eating excessive amounts of food in short periods of time, usually in secret, and is followed by some form of purging behavior. Most individuals suffering with bulimia realize that their behavior is abnormal and try to keep it a secret. Individuals are either slightly over, or at average body weight.
- 3). **Binge Eating (or Compulsive Overeating)** is characterized by periods of uncontrolled, impulsive, or continuous eating beyond feeling comfortably full. It is usually not followed by purging. Individuals range from overweight to obese.

Signs and Symptoms:

| Anorexia | |
|-----------------|---|
| ☐ Physiological | |
| | Significant weight loss |
| | Fatigue |
| | Loss of menstrual cycle |
| | Low body temperature and extreme sensitivity to cold |
| | Hair loss |
| | Bone and muscle loss |
| | Dry skin |
| | Severe dehydration |
| ☐ Behavioral | |
| • | Refusal to maintain normal body weight |
| | Restrictive eating |
| | Excessive exercise |
| | Use of laxatives, diet pills, or diuretics |
| | Ritualistic eating |
| | Delight in preparing food for others, but not eating it |
| | Isolation and withdrawal |
| | Dressing in layers to hide weight loss |
| | Binging, in some cases |
| □ Cogn | |
| _ 00gm | Self-worth determined by food intake |
| • | Intense fear of gaining weight |

■ Feel "fat" even after extreme weight loss

- Extreme concern with body size and shape, might make repeated selfdisparaging comments ■ Distortions in body-image Perfectionistic beliefs and behaviors □ Physiological ■ Weight fluctuation ■ Tooth decay and/or staining of teeth ■ Tooth marks or redness on knuckles from self-induced vomiting ■ Swollen glands and puffiness around cheeks ■ Fatigue ■ Abdominal pain associated with overeating ■ Heart and kidney problems ■ Irregular bowel movements and/or constipation ☐ Behavioral ■ Eating large quantities of food in short period of time, usually in secret ■ Self-induced vomiting and/or use of laxatives, diuretics, diet pills for purging ■ Episodic binge eating and purging ■ Rigid or harsh exercise/fasting ■ Frequent trips to bathroom after meals ■ Some isolation and/or avoidance of social eating □ Cognitive ■ Self-worth determined by weight ■ Depression/Anxiety ■ Disgust with self, guilt Feeling out of control and powerless when binging ■ Feelings of loneliness and isolation ■ Intense fear of being fat **Binge-Eating (or Compulsive Overeating)** □ Physiology ■ Fatigue or hypertension ■ Weight gain ■ High Cholesterol Heart disease Diabetes □ Behavioral ■ Binging, without regard to fullness or feelings of hunger ■ Restriction of activities due to embarrassment about weight gain ■ Sporadic dieting or "diet-hopping" ■ Eating small amounts of food in public and binging in private
 - □ Cognitive ■ Self-worth determined by weight and control of eating
 - Depression

Bulimia

- Guilt/Shame
- Feel out of control and powerless when binging

- Disgust with self and inability to control eating
- Preoccupation with food
- Use of food as comfort, often eat after an emotional stressor

Things you can do for yourself:

- Seek professional help. Telling someone in the early stages increases your chances of working through your problems and getting healthy. There is always hope in overcoming an eating disorder, no matter what stage you are in.
- Tell a trusted friend or family member.
- Journal. Identify "triggers" to your behavior and develop better ways of managing it.
- Develop a meal plan and remain consistent with it.

Things you can do for someone you are concerned about:

- Talk openly and honestly. Do not avoid the issue if you feel that someone is suffering from an eating disorder.
- Listen attentively and take it seriously. Avoid simplistic solutions. Recognize that the person is taking a risk by opening up to you.
- Be gentle and supportive. Do not approach the person in an accusatory way.
- Gently suggest counseling; and remember that you cannot force someone to get help. You may be faced with resentment, anger, and denial of a problem from the person with an eating disorder. What you can do is voice your concerns, remain supportive, and help the person understand the types of help available. Keep at it!
- If you feel that the problem is severe and needs immediate attention, consider telling a professional counselor, a doctor, your friend's parents or loved ones, or someone else you trust. Get help for your friend and for yourself. You don't have to face this alone.

Getting help

If you are concerned about yourself or someone that is presenting these symptoms or behaviors, one should be aware that there are many facilities and a variety of counselors to help individuals deal with eating disorders and weight issues. If you are a University of Lafayette student, and are concerned and would like to speak to a counselor, please contact the Counseling and Testing Center at 337 482-6480 for more information. The center offers unlimited confidential sessions, free of charge to all students and university faculty/staff members.