



Eating Disorders

It is no small thing to say that adolescence is a time in our lives when some drastic changes take place. Probably the single most important thing that happens is what is called *maturation*. Simply put, we grow up. We mature in several major areas of our lives, including mentally, emotionally and physically. While some of this maturation process is totally out of our control, we do have some power to establish patterns of change that can affect us well into adulthood and for the rest of our lives.

We live in a culture that sometimes values physical appearance above all else. There is more pressure than ever to look a “certain way” and that “way” can be defined by self, friends, family, and all kinds of media. It is normal for teenagers to feel self conscious and awkward about their physical appearance. It is also normal to not like the way one looks based on personal preference or other socially defined norms. In recent years, however, many teens have resorted to controlling their eating as a way of maintaining an ideal physical image. In order to accomplish this, they resort to unhealthy and risky behaviors that can lead to more serious eating disorders. Choosing to engage in more risky behaviors can push someone over the edge into a full blown eating disorder which can have long term physical and psychological consequences. Some examples of “normal” and “risky” behaviors are listed below.



Normal behaviors might include:

- ✚ Short-term diet to reach a reasonable weight goal
- ✚ Learning the nutritional value of various foods and controlling calorie intake in line with recommended daily allowances
- ✚ Stop eating when feeling moderately full
- ✚ Avoid swings in eating habits like skipping meals or over-eating
- ✚ Choosing snacks that are low in saturated fat
- ✚ Avoiding foods with high sugar content
- ✚ Exercising to burn excess calories and maintain muscle tone
- ✚ Making sure you eat regular, balanced meals
- ✚ Resist the urge to eat junk food
- ✚ Learn and understand what a realistic body shape and size is for you
- ✚ Resist various pressures to look a certain way other than what is usually normal for you
- ✚ Take opportunities to learn self-acceptance in the face of perceived physical imperfections

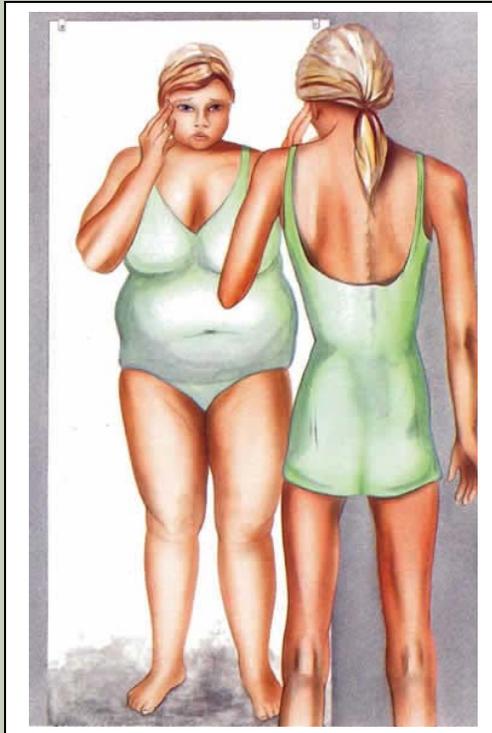
Risky behaviors would include

- ✚ Strict dieting that ignores healthy nutritional intake
- ✚ Rapid weight loss through exercise, calorie restriction or not eating
- ✚ Going without regular meals and then “catching up” by over-eating
- ✚ Occasional vomiting to control calorie intake
- ✚ Making weight goals for yourself that are unrealistic and not in keeping with your age, body type or genetic make up
- ✚ Excessive or compulsive exercising with the sole purpose of managing physical appearance
- ✚ Denying yourself pleasure through eating
- ✚ Over eating or under eating to deal with emotional stresses
- ✚ Refusal to accept perceived physical imperfections as normal

While actual eating disorders are considered a psychiatric illness, engaging in risky behaviors related to eating can begin a psychological process that develops into an eating disorder. The causes are often not that clear, but at some point the urge to eat less or more can spiral out of control. By that time, the behaviors are firmly connected to thoughts and feelings about weight and body image and become very difficult to change. Eating disorders also develop alongside other psychological problems like depression, anxiety and substance abuse. The person may begin to

feel like their eating is the only thing they can control when everything else feels out of control. Obviously, eating disorders can be caused by a complex interaction of genetic, biological, behavioral, psychological, and social factors. However, engaging in the risky behaviors *can* move the person closer to losing control over their eating habits.

Main Types of eating Disorders



Anorexia is a disorder characterized by the following:

- Extreme thinness (emaciation)
- A relentless pursuit of thinness and unwillingness to maintain a normal or healthy weight
- Intense fear of gaining weight
- Distorted body image, a self-esteem that is heavily influenced by perceptions of body weight and shape, or a denial of the seriousness of low body weight
- Lack of menstruation among girls and women
- Extremely restricted eating.

Many people with anorexia see themselves as overweight, even when they are clearly underweight. They become obsessed with

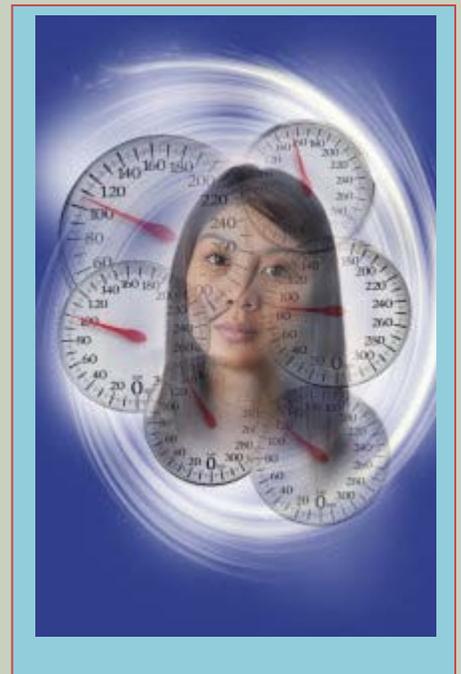
eating, food, and weight control. Typically, they weigh themselves repeatedly, portion food carefully, and eat very small quantities of only certain foods. An early stage symptom is often how the person arranges food on their plate. Small quantities of each type of food are kept in small piles separate from each other and arranged so that the person can be constantly aware of how much is there and how much is left after ingestion. They may eat only one or two pieces of food. Leaving the rest of the already small amount on the plate makes them feel like they are not over-eating. They leave the table feeling like they have accomplished something but still worry that what they did eat will contribute to weight gain. In some instances the person may engage in self-induced vomiting to rid themselves of what little food they did eat. This behavior relieves the anxiety over the possibility of gaining any weight from the food they just consumed. Anorexics may also engage in binge-eating followed by extreme dieting, excessive exercise and use or

misuse of laxatives, diuretics or enemas. Some people who develop Anorexia can recover with one treatment episode. The key is to get treatment as early as possible. The longer the irrational eating behavior continues, the more damage it does psychologically. Over time, a denial system develops that becomes very hard to challenge. The person will continue to deny that they have a problem or that their weight is a concern. This can keep them from admitting the need for help and getting treatment early. Without early identification of risky eating behaviors and early treatment, Anorexia can become a chronic, long-lasting disorder with severe consequences. Some of these are listed below.

Long term consequences for Anorexia

- Thinning of the bones
- Brittle hair and nails
- Dry yellowish skin
- Growth of fine hair all over the body
- Mild anemia and muscle wasting and weakness
- Severe constipation
- Low blood pressure, slowed breathing and pulse
- Damage to the structure and function of the heart
- Brain damage
- Multi-organ failure
- Drop in internal body temperature
- Lethargy, sluggishness, feeling tired all the time
- Infertility

Bulimia is a disorder characterized by recurrent and frequent episodes of eating unusually large amounts of food and feeling a lack of control over these episodes. This binge-eating is followed by behavior that compensates for the overeating such as forced vomiting (purging), excessive use of laxatives or diuretics, fasting, excessive exercise, or a combination of these behaviors. People with Bulimia usually maintain what appears to be a normal and healthy weight. Some may be only slightly overweight. However, they still fear gaining weight, want desperately to lose weight, and are intensely unhappy with their body size and shape. That is why much of the compensatory behavior



(purging = exercising, or vomiting) is done in secret. The person experiences strong feelings of guilt, shame and disgust at how they perceive their physical appearance. This results in a preoccupation with food and weight loss that causes intense feelings of unhappiness. The binge-eating and purging cycle can happen anywhere from several times a week to many times a day. Other symptoms of Bulimia would include the following:



- Chronically inflamed and sore throat
- Swollen salivary glands in the neck and jaw area
- Worn tooth enamel, increasingly sensitive and decaying teeth as a result of exposure to stomach acid
- Acid reflux disorder and other gastrointestinal problems
- Intestinal distress and irritation from laxative abuse
- Severe dehydration from purging of fluids
- Electrolyte imbalance (too low or too high levels of sodium, calcium, potassium and other minerals) which may lead to heart attack

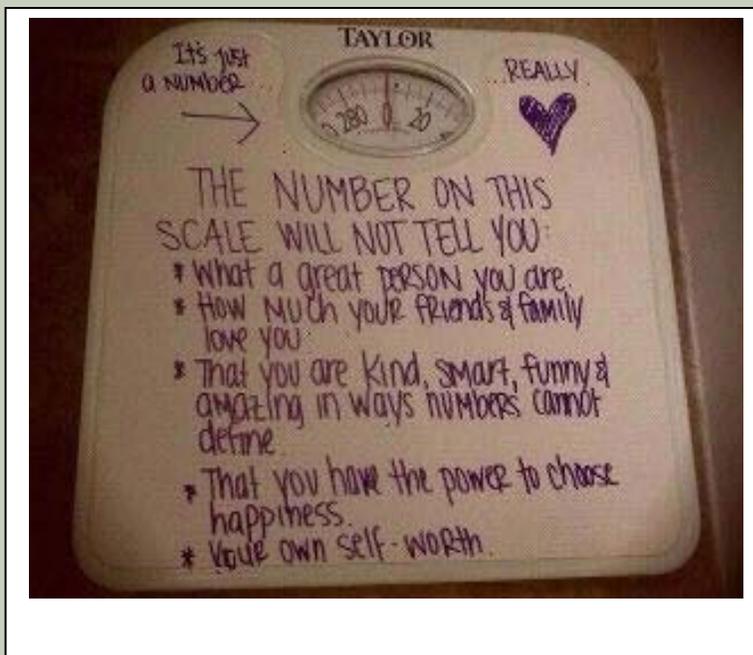
Binge-eating Disorder is where a person loses control over their eating. Unlike bulimia, periods of binge-eating are not followed by purging, excessive exercise, or fasting. As a result, people with binge-eating disorder are often overweight or obese. They also experience guilt, shame, and distress about their binge-eating, which can lead to more binge-eating. As in other eating disorders, the actual eating is both the blessing and the curse. The eating may relieve feelings of stress, anxiety, depression, but the eating is then followed by



feelings of guilt and shame. And the best way the person knows how to relieve the guilt and shame is with more food, so the binge-eating cycle perpetuates itself. People who are binge-eaters are at much higher risk for developing cardiovascular disease and high blood pressure.

Get help early!

The key to treating eating disorders is to get help early. Because denial is a symptom of this illness most people do not get help until the dysfunctional eating patterns are well established and more resistant to change. The person's inability or unwillingness to examine their eating behavior in an honest and open manner is the biggest hindrance to getting help. Other people may notice that the person has a problem long before the person is willing to recognize their behavior as destructive. Because eating disorders affect the person on both a psychological and physical level, the consequences can be more severe and long-term. Risky eating behaviors are dangerous. They may help deal with worrisome feelings about weight and body image, but they establish patterns of thinking that lead to biological changes in the brain that are highly resistant to change and often cannot be reversed.



In some cases, risky eating behaviors and eating disorders are seen as a perfectly acceptable way to deal with feelings of loneliness, despair, anxiety, depression and frustration. A survey of websites dedicated to people who blog about their risky eating behaviors can show that some actually see an eating disorder as their “friend”; someone who is always there for them no matter what. They may

suspect they have Anorexia but call the disease “Anna” and blog about how faithful and true this “friend” is in helping them deal with the turbulence in their lives. While this is certainly part of the denial process, it is also a sad commentary

on how distorted a person's thinking can become in a relatively short time. Most of the blogs are from teens who have engaged in risky eating behaviors for only a few months. It is testimony to the fact that thinking and brain chemistry can change very quickly and cause the person to have a blind spot to the reality they are now creating for themselves. At some point, the only way out is to face the truth about themselves. And the truth is that they are a worthy person just the way they are.

Getting Help

- ✚ Talk to friends about your eating habits and body image. Good friends give healthy feedback.
- ✚ Talk to your parents. Parents do not see eating problems as a “shame” issue. They see it as a medical issue. They are always glad to help you figure out what is going on and are almost always willing to get you to a doctor to talk about it and see if anything more needs to be done. They are even open to getting some counseling. Really. Parents do care and won't go crazy on you!!!! (In my 13 years at IMSA I have never had a parent angry at a student for anything related to stress and eating.... They just want the best for their child.... And that's you.)
- ✚ See the school counselor for a confidential conversation. They can tell you if things are serious enough to get further help. It always helps to talk about what is going on with you. The first step in avoiding risky eating behaviors is to talk about the feelings or situations that are provoking the need to engage in them. The longer you wait.... The harder it is to change.
- ✚ Educate yourself. There are more than enough on-line resources about eating disorders. If you fit the profile or symptoms, implement the above. Talk to someone!!
- ✚ Early treatment is the key. People who go on to develop severe eating disorders that are resistant to treatment are people who engage in risky eating behaviors for years. They suffer in silence. Unfortunately, by that time most everyone knows they have had a problem for a long time. Don't wait. Be the one to break the silence. Start talking.

