



50 Shades of Eating Disorders

Eating disorders are serious conditions related to eating behaviors that negatively impact your health, your emotions and your ability to function. There are over 25 types of eating disorders with the most common being anorexia nervosa, bulimia nervosa and binge-eating disorder.

People with eating disorders focus mostly on their weight, body shape and food, leading to dangerous eating behaviors. These behaviors can impact their body's ability to get appropriate nutrition. Eating disorders can harm the heart, digestive system, bones, and teeth and mouth and other body systems.

Eating disorders can occur at any age even though they usually develop during teenage and young adult years.

It is estimated that millions of people suffer from eating disorders at any given time. Women between the ages of 12 and 35 years old are those who are mainly affected, however there has been an increase in the incidence of both children and males.

With proper treatment, one can return to healthier eating habits and sometimes reverse serious complications caused by the eating disorder. If left untreated it can be life threatening. So if you have an eating disorder or know someone that might have one, seek help from a health professional.

What Causes Disordered Eating

There are no specific causes for eating disorders but rather some causes that can increase the risk of developing one like:

- Genetic: factors such as predispositions to medical and mental illness.
- Psychological: co-occurring diagnosis of another disorder, specific personality traits or types like perfectionism, low self-worth, distorted body image, or impulsivity, experiencing a past or present trauma
- Environmental: include the dynamics that surround an individual including family dynamics, beliefs regarding weight, social media, television/movies, and consumer culture.
- Stress





Signs of an Eating Disorder

Behavioral

The behavioral signs vary depending on the disorder. You may notice someone with one of these conditions:

- Restricting food intake severely
- Refusing to eat certain food groups
- Following extreme diets to loose weight
- Excessive chewing
- Talking about the nutritional content of food
- Saying that they feel or look fat
- Cycling between eating a lot or very little
- Visiting the bathroom immediately after meals on a frequent basis
- Checking their appearance frequently for perceived physical flaws
- Avoiding eating around others
- Around the home, people may notice other potential signs like large amounts of food going missing, food that is hidden in strange places and signs of vomiting

Emotional

Eating disorders also affect how someone feels about food, eating, and their body. You may notice someone who has:

- Preoccupation with body shape, size, and weight
- Intense fear of gaining weight
- Extreme mood swings
- Low self-esteem
- Extremely negative view of their appearance, which may be out of sync with reality
- Feelings of disgust, shame, or guilt associated with eating
- distress if they cannot control their food or exercise routine
- Withdraw from their family and friends and not attending social activities.

Physical

- Weight fluctuation, however, this is not a reliable sign, as it does not occur in everyone and it is also possible for people to hide weight loss to an extent by wearing layered clothing.
- Feeling cold a lot
- Dry skin and hair
- Brittle nails
- Digestive system symptoms: Stomach cramps, acid reflux. Diarrhea.
- Dizziness, tiredness, or weakness
- Difficulty concentrating
- Difficulty sleeping
- Irregular or missed periods
- Muscle cramps
- Slow wound healing
- Growth of fine hair all over the body
- Fainting
- Signs apparent in medical tests: Low levels of thyroid hormones or other hormones, Anemia
Low potassium, Low red or white blood cell counts
- Specific to bulimia nervosa resulting from frequent vomiting: Calluses or cuts on the ends of the fingers
Sensitive or discolored teeth, cavities, enamel erosion





Types of Eating Disorders

There are many types and combinations of eating disorders, below are some of the most common:

1. Anorexia Nervosa

Considered to be the most severe eating disorder, it has the highest mortality rate. Typical behaviors are: limiting, restricting, sometimes extreme exercise and purging. Also intense fear of gaining weight, even when severely underweight.

2. Bulimia Nervosa

Typically it involves eating large amounts of food in short periods of time, then purging. Fear gaining weight despite being at a normal weight. Purging behaviors include forcing oneself to throw up, over-exercising, and using diet pills and laxatives. Both bingeing and purging behaviors are dangerous.

3. Muscle Dysmorphia

The disorder is characterized by an obsession with musculature and physique. The individual will fixate on obtaining the 'perfect' form of musculature even if they are lean and fit. More common with men than women.

4. Binge Eating Disorder (BED)

Consuming large amounts of food in short periods of time, to the point of feeling uncomfortably full, even when not hungry. They usually feel shame and disgust with themselves. Unlike people with other eating disorders, they do not purge.

5. Pregorexia

A term coined by the media, where women attempt to control their normal weight gain in pregnancy with unhealthy. Pregorexia can lead to adverse health outcomes for mother and baby.

6. Compulsive Over Eating (COE)

This disorder is similar to binge eating disorder. What makes COE unique is that the individual doesn't binge in spurts, but rather eats large and small amounts of food all day long.

7. Prader Willi Syndrome

This syndrome, which leads to compulsive eating and obesity, is caused by a rare inherited genetic disease. It begins with weak muscles, poor feeding, and slow development in babies. Then, in childhood, the disease causes insatiable hunger. Children with Prader Willi Syndrome often develop diabetes and struggle to adapt to a normal lifestyle.

8. Diabulimia

This occurs when someone who is diabetic reduces or stops using their prescription insulin to try to induce weight loss.

9. Orthorexia Nervosa (a term coined by the writer and medical doctor, Steven Bratman)

This syndrome involves an unhealthy obsession with healthy eating and planning a healthy diet to the point where it disrupts their life. The

10. Avoidant Restrictive Food Intake Disorder (ARFID)

This disorder involves limiting the amount and/or types of food consumed due to apparent lack of interest in eating or food; avoidance based on the sensory characteristics of food; concern about aversive consequences of eating resulting in failure to meet appropriate nutritional and/or energy needs.

11. Drunkorexia

Slang, non-medical term used to describe the act of restricting food calories in order to drink alcohol. It may be associated with anorexia and bulimia. Severe malnutrition can develop when drunkorexia goes untreated.

12. Other Specified Feeding or Eating Disorder (OSFED)

OSFED is a "catch-all" for types of eating disorders that don't fit into the above categories. Doctors and psychologists will often diagnose those with atypical anorexia or bulimia, as well as the following 7 unofficial diagnoses, with OSFED.





Treatment

Psychotherapy is the most common form of treating eating disorders. The form of psychotherapy is always adapted to the needs of the individual and should be offered by an experienced and qualified therapist. Some forms of psychotherapy that are proven to work better are family therapy (Systemic Psychotherapy) and psychotherapy based on cognitive and behavioral principles (Cognitive Behavioral Psychotherapy). Some patients will need medication to treat potentially coexisting conditions, such as depression or anxiety, and should be carefully monitored by a psychiatrist.

An eating disorder affects one's mind, body and daily life and must be addressed by the proper professional: psychiatrist, medical doctor, dietician, social workers, etc. In some cases, particularly when the BMI is low, or in cases where the person's health is at immediate risk, hospitalization may be required. A proper assessment by the health professional can determine the type of care required. The patient's physical health and weight must have been restored, at least to some degree, preferably before or at the same time with the psychological intervention.

Treatments that can support eating disorders are:

- Cognitive Behavioral Therapy (CBT)
- Dialectical Behavior Therapy (DBT)
- Family-Based Treatment (The Maudsley Method).





Scan and find out if you or a loved one is at risk



Where to get Help

On campus

- ACG Counseling Center

<http://www.acg.edu/current-students/student-services/acg-counseling-center>

- ACG Health & Wellness Center

<https://www.acg.edu/current-students/student-services/acg-health-wellness/wellness-coaching/>

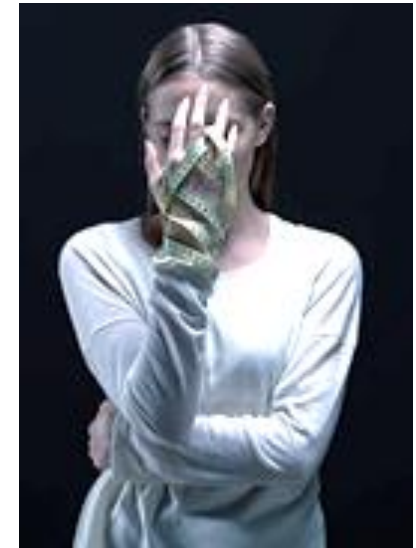
Off campus

- "ANASA" Center for people with eating disorders

<https://www.anasa.com.gr> or call at 210-9234904

Words for the Wise

- Eating disorders are psychological and can be life-threatening illnesses.
- People with an eating disorder may not recognise their problem.
- Treatment should focus on the underlying causes of this behavior.
- It's difficult for someone with an eating disorder to help themselves on their own.
- It is important to seek professional help for yourself or a loved one as soon as possible.
- It is usually very difficult for people suffering from an eating disorder to get over it on their own.
- It takes a lot of courage to speak out and look for support.
- Talk about your problem with your family, friends and a health professional.



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Sources & further reading: www.eatingdisorderhope.com , www.eating-disorders.org.uk , www.nationaleatingdisorders.org/ , www.freepik.com ;
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