

Eating disorders

The main eating disorders are anorexia nervosa, bulimia nervosa and binge eating. At least 5 in 100 Western women have an eating disorder, with 1 in 200 having anorexia nervosa, at least 1 in 100 bulimia nervosa and about 4 in 100 binge-eating disorder.

Anorexia nervosa

Anorexia nervosa is a condition of obsessive desire for thinness through dieting, leading to extreme weight loss. There is a refusal to eat adequately and to have a normal body weight. The cause is unknown but a deep-seated emotional problem based on past experiences may be a significant factor.

Typical features of anorexia nervosa

- females—adolescents and young adults
- a refusal to eat
- poor body image
- intense fear of becoming fat
- loss of body fat
- no or very scant periods
- dry and scaly skin
- high mortality rate

Who gets it?

It is a disorder of adolescent girls with an incidence of 1 in every 200 16-year-old school girls. Occasionally it can affect young men. There are two common age groups when it comes on: 13 to 14 and 17 to 18.

Bulimia nervosa

Known as 'binge-purge' syndrome, bulimia is recurrent episodes of binge eating in secret, followed by self-induced vomiting, fasting or the use of laxatives and fluid tablets (diuretics). The cause is unknown but is probably due to a deep-seated emotional problem.

Typical features of bulimia nervosa

- a disorder of young females
- begins later than anorexia nervosa—usually 17-25 years
- binges of high calorie, easily digested food
- fluctuations in body weight
- repeated attempts to lose weight

- irregular periods
- depressed mood with guilt after a binge
- a sense of lack of control during an eating episode

Risks

- complications of frequent vomiting, e.g. dental decay, salt and fluid loss

Binge-eating disorders

This is the eating of larger amounts of food than would a normal person in a given period. Some people may binge once a day while others many times a day. It is similar to bulimia except that self-induced vomiting and the use of laxatives to reduce weight does not occur.

Typical features of binge-eating disorders

- secretive and impulsive eating
- eating foods easy to swallow, high in calories and usually forbidden at other times
- most patients are obese
- eating episodes occur in the absence of hunger
- fear of loss of control
- binges triggered by feelings of sadness, anger, anxiety or paranoia
- binges average 2 days a week for 6 months

What is the management of eating disorders?

Early detection followed by action to help is the best approach. Problems with family relationships are often behind the disorder, so it is important to talk through any underlying problems such as a conflict or crisis at home, sexual abuse, physical abuse or drug dependency (including alcohol). Feelings of insecurity, rejection or guilt are common, so it is therapeutic to bring out these personal problems into the open. There is often a history of being teased at school about weight.

If there is severe anorexia nervosa (e.g. severe emaciation, risk of suicide), special care in hospital is needed. Patients need a balanced diet with at least 3000 calories a day for those with anorexia nervosa. An expert, such as a dietician, can educate the patient about an appropriate diet.