**Anorexia Nervosa**

Anorexia nervosa (often called anorexia) is an eating disorder where you feel a need to keep your weight as low as possible.

[**Overview - Anorexia nervosa**](https://www.nhs.uk/mental-health/conditions/anorexia/overview/)

**Anorexia** **nervosa (often called anorexia) is an eating disorder and serious mental health condition.**

People who have anorexia try to keep their weight as low as possible. They may do this in different ways, such as not eating enough food, exercising too much, taking laxatives or making themselves sick (vomit). This can make them very ill because they start to starve.

They often have a distorted image of their bodies, thinking they're fat even when they're underweight.

Men and women of any age can get anorexia, but it's most common in young women and typically starts in the mid-teens.

**Signs and symptoms of anorexia**

Signs and symptoms of anorexia include:

* if you're under 18, your weight and height being lower than the minimum expected for your age
* if you're an adult, having an unusually low [body mass index (BMI)](https://www.nhs.uk/live-well/healthy-weight/bmi-calculator/)
* missing meals or eating very little
* thinking about food a lot and being very careful about what you eat, such as avoiding eating any foods you see as fattening
* believing you're fat when you're a healthy weight or underweight
* your periods stopping (in women who have not reached menopause) or not starting (in younger women and girls)
* physical problems, such as feeling [lightheaded or dizzy](https://www.nhs.uk/conditions/dizziness/), [hair loss](https://www.nhs.uk/conditions/hair-loss/) or dry skin

Some people may also make themselves sick or do an extreme amount of exercise.  
  
Some use medicines to reduce their hunger (appetite suppressants), help them poo (laxatives) or make them pee (diuretics) to try to stop themselves gaining weight from any food they do eat.

**Getting help for anorexia**

Getting help and support as soon as possible gives you the best chance of recovering from anorexia.

If you think you may have anorexia, even if you're not sure, see a GP as soon as you can.

They will ask you questions about your eating habits and how you're feeling. They will probably weigh you, and check your heart rate, blood pressure and temperature.

They may also want to do some blood tests and to check your overall physical health.

If they think you may have anorexia, or another eating disorder, they should refer you to an eating disorder specialist or team of specialists.

It can be very hard to admit you have a problem and to ask for help. It may make things easier if you bring a friend or loved one with you to your appointment.

You can also talk in confidence to an adviser from [eating disorders charity Beat](https://www.beateatingdisorders.org.uk/) by calling its helpline on 0808 801 0677.

**Getting help for someone else**

If you're concerned that a family member or friend may have anorexia, let them know you're worried about them and encourage them to see a GP. You could offer to go along with them.

Read more about [advice for parents on eating disorders](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/advice-for-parents/) and [how to help someone with an eating disorder](https://www.nhs.uk/mental-health/advice-for-life-situations-and-events/how-to-help-someone-with-eating-disorder/).

**Treatment for anorexia**

You can recover from anorexia, but it may take time and recovery will be different for everyone.

Your treatment plan will be tailored to you and should consider any other support you might need, such as for depression or anxiety.

If you're over 18, you should be offered a type of talking therapy to help you manage your feelings about food and eating so that you are able to eat enough to be healthy.

Talking therapies that are commonly used to treat anorexia in adults include:

* [cognitive behavioural therapy (CBT)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/cognitive-behavioural-therapy-cbt/overview/)
* Maudsley anorexia nervosa treatment for adults (MANTRA)
* specialist supportive clinical management (SSCM)

If you're under 18, you should be offered family therapy. You may also be offered another type of talking therapy, such as CBT or adolescent-focused psychotherapy.

Find out how to get [mental health support for children and young people.](https://www.nhs.uk/mental-health/children-and-young-adults/mental-health-support/)

**Health risks of anorexia**

Long-term anorexia can lead to severe health problems associated with [not getting the right nutrients (malnutrition)](https://www.nhs.uk/conditions/malnutrition/). But these will usually begin to get better once your food intake starts improving.

Possible complications include:

* problems with muscles and bones – including feeling tired and weak, [osteoporosis](https://www.nhs.uk/conditions/osteoporosis/), and problems with physical development in children and young adults
* fertility problems
* loss of sex drive
* problems with the heart and blood vessels – including poor circulation, an irregular heartbeat, [low blood pressure](https://www.nhs.uk/conditions/low-blood-pressure-hypotension/), heart valve disease, [heart failure](https://www.nhs.uk/conditions/heart-failure/), and [swollen ankles, feet and legs (oedema)](https://www.nhs.uk/conditions/oedema/)
* problems with the brain and nerves – including difficulties with concentration and memory or, less often, fits (seizures)
* kidney or bowel problems
* having a weakened immune system or [anaemia](https://www.nhs.uk/conditions/iron-deficiency-anaemia/)

Anorexia can also put your life at risk. It's one of the leading causes of deaths related to mental health problems. Deaths from anorexia may be due to physical complications or suicide.

**Causes of anorexia**

We do not know exactly what causes anorexia and other eating disorders. You may be more likely to get an eating disorder if:

* you or a member of your family has a history of eating disorders, depression, or alcohol or drug addiction
* you have been criticised for your eating habits, body shape or weight
* you're overly concerned with being slim, particularly if you also feel pressure from society or your job – for example, ballet dancers, jockeys, models or athletes
* you have anxiety, low self-esteem, an obsessive personality or are a perfectionist
* you have been emotionally, physically or sexually abused

Page last reviewed: 18 January 2024  
Next review due: 18 January 2027

[**Symptoms - Anorexia nervosa**](https://www.nhs.uk/mental-health/conditions/anorexia/symptoms/)

**The main symptom of anorexia nervosa (often called anorexia) is deliberately losing a lot of weight or keeping your body weight much lower than is healthy for your age and height.**

Signs and symptoms include:

* missing meals, eating very little or avoiding eating any foods you see as fattening
* lying about what and when you've eaten, and avoiding eating with others
* wearing baggy clothes to hide your body shape and lying about your weight
* taking medicines to reduce your hunger (appetite suppressants), or to help you poo (laxatives) or to make you pee (diuretics)
* exercising excessively or making yourself sick to try to avoid putting on weight
* an overwhelming fear of gaining weight
* strict rituals around eating and thinking about food a lot
* weighing yourself frequently and seeing losing a lot of weight as a positive thing
* believing you're fat when you're a healthy weight or underweight
* not admitting your weight loss is serious

You may also notice physical signs and symptoms such as:

* if you're under 18, your weight and height being lower than the minimum expected for your age
* if you're an adult, having an unusually low [body mass index (BMI)](https://www.nhs.uk/live-well/healthy-weight/bmi-calculator/)
* your periods stopping (in women who have not reached menopause) or not starting (in younger women and girls)
* bloating, [constipation](https://www.nhs.uk/conditions/constipation/) and [abdominal pain](https://www.nhs.uk/conditions/stomach-ache/)
* [headaches](https://www.nhs.uk/conditions/headache/) or [problems sleeping](https://www.nhs.uk/conditions/insomnia/)
* feeling cold, [dizzy](https://www.nhs.uk/conditions/dizziness/) or very tired
* poor circulation in hands and feet
* dry skin, hair loss from the scalp, or fine downy hair growing on the body
* reduced sex drive

People with anorexia often have other mental health problems, such as [depression](https://www.nhs.uk/mental-health/conditions/depression-in-adults/overview/) or [anxiety](https://www.nhs.uk/mental-health/conditions/generalised-anxiety-disorder/overview/).

**Warning signs of anorexia in someone else**

The following warning signs could indicate that someone you care about has an eating disorder:

* dramatic weight loss
* lying about how much and when they've eaten, or how much they weigh
* avoiding eating with others
* cutting their food into small pieces or eating very slowly to disguise how little they're eating
* trying to hide how thin they are by wearing loose or baggy clothes

In children with anorexia, [puberty](https://www.nhs.uk/conditions/early-or-delayed-puberty/) and the associated growth spurt may be delayed. Young people with anorexia may gain less weight than expected and may be smaller than children of the same age.

**Getting help**

Getting help and support as soon as possible gives you the best chance of recovering from anorexia.

If you think you may have anorexia, even if you're not sure, see a GP as soon as you can.

If you're concerned that a family member or friend may have anorexia, let them know you're worried about them and encourage them to see a GP. You could offer to go along with them.

You can also talk in confidence to an adviser from eating disorders charity Beat by calling its helpline on 0808 801 0677.

If someone needs urgent medical help, go to [111.nhs.uk](https://111.nhs.uk/) or call 111 for advice.

Page last reviewed: 18 January 2024  
Next review due: 18 January 2027

[**Treatment - Anorexia nervosa**](https://www.nhs.uk/mental-health/conditions/anorexia/treatment/)

**Treatment for anorexia nervosa (often called anorexia) usually involves a combination of talking therapy and supervised weight gain.**

It's important to start treatment as early as possible to reduce the risk of serious complications, particularly if you've already lost a lot of weight.

If a GP thinks you may have anorexia, or another eating disorder, they’ll usually refer you to a specialist eating disorder team or community mental health team.

Treatment for anorexia is slightly different for those under 18 years old. Young people are usually referred to children and young people’s mental health (CYPMH) services, or to a children’s health team in hospital (paediatrics).

If you’re very unwell, you may need hospital treatment.

**Treatment for adults**

A number of different talking therapies are available to treat anorexia. The aim of these treatments is to help you understand your eating problems and feel more comfortable with food so you can begin to eat more and reach a healthy weight.

You may be offered any of the following types of talking therapy. If you feel one is not right for you or is not helping, you can talk to your doctors about trying a different kind of therapy.

**Cognitive behavioural therapy (CBT)**

If you are offered [CBT](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/cognitive-behavioural-therapy-cbt/overview/), it'll usually involve weekly sessions for up to 40 weeks (9 to 10 months), and 2 sessions a week in the first 2 to 3 weeks.

CBT involves talking to a therapist who'll work with you to create a personalised treatment plan.

They'll help you to:

* cope with your feelings
* understand nutrition and the effects of starvation
* make healthy food choices

They'll ask you to practise these techniques on your own, measure your progress, and show you ways to manage difficult feelings and situations so you stick with your new eating habits.

**Maudsley anorexia nervosa treatment for adults (MANTRA)**

MANTRA involves talking to a therapist in order to understand your eating disorder and its effects.

It focuses on what's important to you and helps you to change your behaviour when you're ready.

You can involve your family or carers if you think it would be helpful.

You should be offered 20 sessions. The first 10 should be weekly, with the next 10 scheduled to suit you.

**Specialist supportive clinical management (SSCM)**

SSCM involves talking to a therapist who'll help you understand your eating disorder, any problems it's causing and what to do about them. You'll learn about nutrition and how your eating habits cause your symptoms.

You should be offered 20 or more weekly sessions. Your therapist will set you a target weight and, over the course of the 20 weeks, will help you reach it.

**Focal psychodynamic therapy**

Focal psychodynamic therapy is usually offered if you do not feel any of the above therapies are right for you or if they do not work.

Focal psychodynamic therapy should include trying to understand how your eating habits are related to what you think, and to how you feel about yourself and other people in your life.

You should be offered weekly sessions for up to 40 weeks (9 to 10 months).

**Nutritional support**

During your treatment you'll get specialist dietary advice and a meal plan to help you get to a healthy weight.

However, this advice alone will not help you recover from anorexia, so you'll need to have talking therapy as well as a meal plan.

Your doctors will probably also advise you to take vitamin and mineral supplements, so you get all the nutrients you need to be healthy.

You'll usually have regular check-ups to see how you're getting on.

If you’re very unwell, your meal plan may need to be supervised more closely. For some people this might mean a stay in hospital.

**Treatment for children and young people**

Children and young people will usually be offered family therapy.

You may also be offered adolescent-focused psychotherapy or [cognitive behavioural therapy (CBT)](https://www.nhs.uk/mental-health/talking-therapies-medicine-treatments/talking-therapies-and-counselling/cognitive-behavioural-therapy-cbt/). CBT will be very similar to the CBT offered to adults but also includes some family sessions.

**Family therapy**

Family therapy involves you and your family talking to a therapist, exploring how anorexia has affected you and how your family can support you to get better.

Your therapist will also help you find ways to manage difficult feelings and situations to stop you from relapsing into unhealthy eating habits once your therapy ends.

You'll have sessions together with your family, and the option to have some sessions on your own with the therapist. Family therapy is sometimes offered in a group with other families.

You'll usually be offered 18 to 20 sessions over a year, and your therapist will regularly check that the schedule is still working for you.

**Adolescent-focused psychotherapy**

Adolescent-focused psychotherapy will usually involve up to 40 one-to-one sessions, and normally lasts between 12 and 18 months. You'll have sessions more often in the beginning to give you more support.

The therapist will help you:

* cope with your fears about gaining weight
* understand nutrition and healthy eating, and the effects of undereating
* understand your feelings about your identity and how you see yourself
* build your confidence and help you manage stressful situations

You can also have 8 to 12 therapy sessions with your family.

**Nutritional support**

If you have anorexia, you may not be getting all the vitamins and energy that your body needs to grow and develop properly, which is especially important as you reach puberty.

During your treatment, your doctor will give you advice about the best foods to eat to stay healthy. They'll probably also advise you to take vitamin and mineral supplements.

They'll also talk to your parents or carers about your diet so they can support you at home.

You’ll usually have regular check-ups to see how you’re getting on.

If you’re very unwell, your meal plan may need to be supervised more closely. For some people this might mean a stay in hospital.

**Bone health**

Anorexia can make your bones weaker, which can make you more likely to develop a condition called [osteoporosis](https://www.nhs.uk/conditions/osteoporosis/). This is more likely if your weight has been low for a year or more in children and young people, or 2 years or more in adults.

Because of this, your doctors may suggest you have a bone-density scan to check the health of your bones.

Girls and women are more at risk of getting weak bones than men, so your doctor may prescribe you medicine to help protect your bones against osteoporosis.

**Antidepressants**

Antidepressants are not used to treat anorexia. But you may be offered an antidepressant, such as fluoxetine (Prozac), in combination with therapy, to help you manage other mental health conditions such as:

* [anxiety](https://www.nhs.uk/mental-health/conditions/generalised-anxiety-disorder/overview/)
* [depression](https://www.nhs.uk/mental-health/conditions/depression-in-adults/overview/)
* [social phobia](https://www.nhs.uk/mental-health/conditions/social-anxiety/)

Antidepressants are very rarely prescribed for children or young people under 18.

**Where treatment will happen**

Most people with anorexia will be able to stay at home during their treatment. You'll usually have appointments at your clinic and then be able to go home.

However, you may be admitted to hospital, or have day care in a hospital or at home, if you have serious health complications. For example, if:

* you're very underweight and still losing weight
* you're very ill and your life is at risk
* you're under 18 and your doctors believe you do not have enough support at home
* doctors are worried that you might [harm yourself](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/self-harm/getting-help/) or are at risk of [suicide](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/help-for-suicidal-thoughts/)

Your doctors will keep a careful eye on your weight and health. They'll help you to reach a healthy weight gradually, and either start or continue any therapy.

Once they're happy with your weight, as well as your physical and mental health, you should be able to return home or to stop having day care.

**Compulsory treatment**

Occasionally, someone with anorexia may refuse treatment even though they're seriously ill and their life is at risk.

In these cases, doctors may decide, as a last resort, to admit the person to hospital for compulsory treatment under the Mental Health Act. This is sometimes known as "sectioning" or "being sectioned".

**Check-ups**

It's important that you receive ongoing support after your treatment is finished.

You should have checks of your weight at least once a year, as well as of your mental and physical health. This will usually be done by your GP, but it may be with an eating disorder specialist.

**Further support**

There are many organisations that support people with anorexia and their families, including:

* [Talk ED](https://www.talk-ed.org.uk/)
* [Beat](https://www.beateatingdisorders.org.uk/)
* [Mental Health Foundation](https://www.mentalhealth.org.uk/)
* [Mind](https://www.mind.org.uk/)

Joining a self-help support group, such as the [Beat online support groups (called swan groups)](https://www.beateatingdisorders.org.uk/get-information-and-support/get-help-for-myself/i-need-support-now/online-support-groups/swan-online-support-group/) for people with anorexia, may also be helpful.

Page last reviewed: 18 January 2024  
Next review due: 18 January 2027

[Anorexia nervosa - NHS (www.nhs.uk)](https://www.nhs.uk/mental-health/conditions/anorexia/)