

Eating Disorders in Military Personnel and Veterans

Eating disorders are serious complex mental illnesses related to biological psychological and social factors that affect people of all demographic backgrounds. In general eating disorders involve severe disturbances in eating behaviors and related thoughts and emotions. People with eating disorders often become preoccupied with food and their body weight.

Types of Eating Disorders

Anorexia nervosa (AN) involves an obsession with thinness that is pursued by unhealthy food restriction and often excessive exercise. AN is the most fatal mental disorder.¹

Bulimia nervosa (BN) is characterized by binge eating episodes which involve eating a large amount of food, more than most people would eat under the same circumstances (e.g., three main courses, a quart of ice cream, etc) and a sense of loss of control, followed by behavior that compensates for the overeating like vomiting or using laxatives.¹

Binge eating disorder (BED) is associated with consuming large amounts of food in short periods of time due to loss of control. BED is the most common eating disorder in the U.S..¹ Most eating disorders in adults fall into these three diagnostic categories, but it is important to note that there is no universal presentation of an eating disorder. Each individual struggling will have a unique set of symptoms and look different

Vulnerability in the Military Population

The emphasis on physical fitness, weight, and body shape in the military increases risk for developing an eating disorder. Exposure to trauma causes emotional distress that active duty military personnel and veterans may cope with in unhealthy ways, including disordered eating.

Men and women who experienced trauma are more likely to have an eating disorder than the general population.²

Veterans, especially males, who experienced military sexual trauma are at a two-fold higher risk for developing an eating disorder.³

Warning Signs

Physical symptoms.⁵

- Fluctuations in weight
- Gastrointestinal complaints
- Menstrual irregularities
- Dizziness or fainting
- Dental problems
- Dry skin and hair
- Fine hair on the body

Emotional and behavioral symptoms.⁵

- Preoccupation with weight, food, calories, and dieting
- Refusal to eat certain foods
- Discomfort eating around others
- Withdrawal from usual friends and activities
- Use food rituals
- Extreme concern with body size and shape
- Extreme mood swings

Getting Help

There are many treatment resources available and receiving a diagnosis in order to begin recovery as soon as possible is important.

Get screened for eating disorder risk. [NEDA](#).

Find help at [NEDA](#).

Access VA services for [mental health](#).

Treatment ideally will address the medical implications of eating disorder symptoms in addition to the psychological emotional and interpersonal factors that contribute to eating disorders through psychotherapy. Depending on the severity there are a variety of care levels available ranging from residential treatment to outpatient therapy.⁶

Giving Help

If you think that a friend or family member might be struggling with an eating disorder, it is important that you offer your support with care and compassion. In order to offer help:⁷

- Get informed and learn about eating disorders
- Reduce anxiety by rehearsing what you want to say and talking in a private place
- Use “I” statements to avoid sounding accusatory
- Avoid overly simplistic suggestions such as “just eat”
- Remind your loved one that there is no shame in seeking help in order to reduce stigma
- Encourage your loved one to seek professional help

References

1. National Institute of Mental Health (2016) [Eating Disorders](#).
2. Mitchell, K. S. et al., (2012). Comorbidity of partial and subthreshold PTSD among men and women with eating disorders in the national comorbidity survey-replication study. *International Journal of Eating Disorders*, 45(3), 307-315.
3. Blais, R. K. et al., (2017). Military sexual trauma is associated with post- deployment eating disorders among Afghanistan and Iraq veterans. *International Journal of Eating Disorders*, 50(7), 808-816.
4. Schvey, N. A. et al., (2017). Weight stigma among active duty US military personnel with overweight and obesity. *Stigma and Health*, 2(4), 281.
5. National Eating Disorders Association, [Warning Signs and Symptoms](#).
6. National Eating Disorders Association, [Treatment](#).
7. National Eating Disorders Association, [How to Help a Loved One](#).



For more information, visit the **Missouri Eating Disorders Council** [website](#)