Notes 11/16: Eating Disorders

Includes several components: physical psychological, spiritual and social

Disordered Eating: mild short term changes in eating patterns in response to a stressful event, illness or desire to modify diet. Rarely requires professional attention. May turn into an eating disorder

Eating disorders: anorexia, bulimia, binge eating, eating disorder NOS, muscle dysmorphia.

* Occurs frequently with other psychological disorders: depression, anxiety, substance abuse/dependence
* Affect five million people in north America
* Orthorexia: obsession with eating correctly. Restrictions similar to anorexia. Social life is impacted because they won’t eat out.

What causes eating disorders?

* Not just about food or weight
* Cause is not entirely understood
* How does someone cope with stress?

Warning signs:

* Drastic change in weight.
* Unusual rituals or behaviors around food
* Avoiding social situations where food is present
* Baggy clothing
* Restricted diet
* Preoccupation with calories, fat, weight or body shape
* Always on a diet
* Isolation
* Frequent trips to the bathroom
* Frequent showering
* Hoarding food
* Swollen cheeks (bulimia🡪electrolyte imbalance results in swollen glands), blood shot eyes
* Scars on knuckles
* Secretive about food and eating
* Visiting pro-eating disorder websites

Anorexia Nervosa:

* Intense fear of fat
* Severely restricted eating, rituals involving food
* 85% of natural body weight
* Two most common deaths: heart attack and suicide
* 78% over-exercise: reinforcing neurotransmitters are released in the reward pathway in your brain (dopamine, serotonin, norepinephrine).
* Central nervous system reward pathways are altered, food is no longer a positive reinforce, exercise and starvation become addictive
* Signs: food are permissible or not. Individuals may take an extremely long period of time to prepare and eat foods. Desire to eat meals alone. Have sole control over food preparation, give away food, compulsive exercise beyond normal training.
* Physical signs: significant weight loss, loss of menstrual period, dry skin and hair, loss of hair, growth of fine body hair, cold hands and feet, general fatigue and weakness, light headedness, inability to concentrate, constipation and digestive problems, insomnia, wearing layers of baggy clothing.
  + More severe: increased susceptibility to infections, stress fractures, ketosis (pH has changed), weakness of the heart muscles.

Bulimia:

* Binge eating followed by behaviors intended to undo the effects of the binge (vomiting, intense exercise, laxatives): concerned about body weight and shape. Preoccupied with food.
* Lack of control over binge eating
* May not affect weight
* Foods: usually high sugar high fat, hide food and evidence of binges, high food bills.
* Purging: vomiting leading to 33-75% of all energy is absorbed, laxatives: 90% is absorbed, diuretics, excessive exercise
* Cycle = guilt, depression and low self esteem
* Medical complications: digestive problems, dental problems, chemical imbalance sometimes resulting in irregular heart rate or heart failure
* Health related problems: fatigue, fainting spells, skin rashes and hair loss, amenorrhea, osteopenia, osteoporosis, fractures, inability to think clearly.
* Laxative abuse 🡪 constipation, cramping, nausea, allergic reactions to the laxative, decreased absorption of nutrients and medications

Binge eating disorder:

* Repeatedly consumes an usually large amount of food in a short period of time
* Feeling of lack of control over eating
* Triggered by stress, depression, anxiety, loneliness, anger, frustration
* Non consistent attempts to offset effects of the binge.
* Frequent binge eating may lead to obesity, so many of the medical complications are the same
* High cholesterol, high blood pressure, diabetes, heart disease, gall bladder disease

Muscle Dysmorphia:

* Most common in men
* See themselves as small, frail or out of shape when they have well developed muscles
* Associated with weight lifting, compulsive exercising, seroid use and supplements
* At increased risk for injury and harmful effects of steroid use
* Associated with depression
* Preoccupation with appearance
* Unlikely to seek treatment