

Eating disorders

Overview

Eating disorders are serious health conditions that affect both your physical and mental health. These conditions include problems in how you think about food, eating, weight and shape, and in your eating behaviors. These symptoms can affect your health, your emotions and your ability to function in important areas of life.

If not treated effectively, eating disorders can become long-term problems and, in some cases, can cause death. The most common eating disorders are anorexia, bulimia and binge-eating disorder.

Most eating disorders involve focusing too much on weight, body shape and food. This can lead to dangerous eating behaviors. These behaviors can seriously affect the ability to get the nutrition your body needs. Eating disorders can harm the heart, digestive system, bones, teeth and mouth. They can lead to other diseases. They're also linked with depression, anxiety, self-harm, and suicidal thoughts and behaviors.

With proper treatment, you can return to healthier eating habits and learn healthier ways to think about food and your body. You also may be able to reverse or reduce serious problems caused by the eating disorder.

Symptoms

Symptoms vary, depending on the type of eating disorder. Anorexia, bulimia and binge-eating disorder are the most common eating disorders. People with eating disorders can have all different body types and sizes.

Anorexia

Anorexia (an-o-REK-see-uh), also called anorexia nervosa, can be a life-threatening eating disorder. It includes an unhealthy low body weight, intense fear of gaining weight, and a view of weight and shape that is not realistic. Anorexia often involves using extreme efforts to control weight and shape, which often seriously interfere with health and daily life.

Anorexia may include severely limiting calories or cutting out certain kinds of foods or food groups. It may involve other methods to lose weight, such as exercising too much, using laxatives or diet aids, or vomiting after eating. Efforts to reduce weight can cause severe health problems, even for those who continue eating throughout the day or whose weight isn't extremely low.

Bulimia

Bulimia (buh-LEE-me-uh), also called bulimia nervosa, is a serious, sometimes life-threatening eating disorder. Bulimia includes episodes of bingeing, commonly followed

by episodes of purging. Sometimes bulimia also includes severely limiting eating for periods of time. This often leads to stronger urges to binge eat and then purge.

Bingeing involves eating food — sometimes an extremely large amount — in a short period of time. During bingeing, people feel like they have no control over their eating and that they can't stop. After eating, due to guilt, shame or an intense fear of weight gain, purging is done to get rid of calories. Purging can include vomiting, exercising too much, not eating for a period of time, or using other methods, such as taking laxatives. Some people change medicine doses, such as changing insulin amounts, to try to lose weight.

Bulimia also involves being preoccupied with weight and body shape, with severe and harsh self-judgment of personal appearance.

Binge-eating disorder

Binge-eating disorder involves eating food in a short amount of time. When bingeing, it feels like there's no control over eating. But binge eating is not followed by purging. During a binge, people may eat food faster or eat more food than planned. Even when not hungry, eating may continue long past feeling uncomfortably full.

After a binge, people often feel a great deal of guilt, disgust or shame. They may fear gaining weight. They may try to severely limit eating for periods of time. This leads to increased urges to binge, setting up an unhealthy cycle. Embarrassment can lead to eating alone to hide bingeing. A new round of bingeing commonly occurs at least once a week.

Avoidant/restrictive food intake disorder

Avoidant/restrictive food intake disorder includes extremely limited eating or not eating certain foods. The pattern of eating often doesn't meet minimum daily nutrition needs. This may lead to problems with growth, development and functioning in daily life. But people with this disorder don't have fears about gaining weight or body size. Instead, they may not be interested in eating or may avoid food with a certain color, texture, smell or taste. Or they may worry about what can happen when eating. For example, they may have a fear of choking or vomiting, or they may worry about getting stomach problems.

Avoidant/restrictive food intake disorder can be diagnosed in all ages, but it's more common in younger children. The disorder can result in major weight loss or failure to gain weight in childhood. A lack of proper nutrition can lead to major health problems.

When to see a doctor

An eating disorder can be difficult to manage or overcome by yourself. The earlier you get treatment, the more likely you'll make a full recovery. Sometimes people can have

problem eating behaviors that are similar to some symptoms of an eating disorder, but the symptoms don't meet the guidelines for a diagnosis of an eating disorder. But these problem eating behaviors can still seriously affect health and well-being.

If you have problem eating behaviors that cause you distress or affect your life or health, or if you think you have an eating disorder, seek medical help.

Urging a loved one to seek treatment

Many people with eating disorders may not think they need treatment. One of the main features of many eating disorders is not realizing how severe the symptoms are. Also, guilt and shame often prevent people from getting help.

If you're worried about a friend or family member, urge the person to talk to a health care provider. Even if that person isn't ready to admit to having an issue with food, you can start the discussion by expressing concern and a desire to listen.

Red flags that may suggest an eating disorder include:

- Skipping meals or snacks or making excuses for not eating.
- Having a very limited diet that hasn't been prescribed by a trained medical professional.
- Too much focus on food or healthy eating, especially if it means not participating in usual events, such as sports banquets, eating birthday cake or dining out.
- Making own meals rather than eating what the family eats.
- Withdrawing from usual social activities.
- Frequent and ongoing worry or complaints about being unhealthy or overweight and talk of losing weight.
- Frequent checking in the mirror for what are thought to be flaws.
- Repeatedly eating large amounts of foods.
- Using dietary supplements, laxatives or herbal products for weight loss.
- Exercising much more than the average person. This includes not taking rest days or days off for injury or illness or refusing to attend social events or other life events because of wanting to exercise.
- Calluses on the knuckles from reaching fingers into the mouth to cause vomiting.
- Problems with loss of tooth enamel that may be a sign of repeated vomiting.
- Leaving during meals or right after a meal to use the toilet.
- Talk of depression, disgust, shame or guilt about eating habits.

- Eating in secret.

If you're worried that you or your child may have an eating disorder, contact a health care provider to talk about your concerns. If needed, get a referral to a mental health provider with expertise in eating disorders. Or if your insurance permits it, contact an expert directly.

Causes

The exact cause of eating disorders is not known. As with other mental health conditions, there may be different causes, such as:

- **Genetics.** Some people may have genes that increase their risk of developing eating disorders.
- **Biology.** Biological factors, such as changes in brain chemicals, may play a role in eating disorders.

Risk factors

Anyone can develop an eating disorder. Eating disorders often start in the teen and young adult years. But they can occur at any age.

Certain factors may increase the risk of developing an eating disorder, including:

- **Family history.** Eating disorders are more likely to occur in people who have parents or siblings who've had an eating disorder.
- **Other mental health issues.** Trauma, anxiety, depression, obsessive-compulsive disorder and other mental health issues can increase the likelihood of an eating disorder.
- **Dieting and starvation.** Frequent dieting is a risk factor for an eating disorder, especially with weight that is constantly going up and down when getting on and off new diets. There is strong evidence that many of the symptoms of an eating disorder are symptoms of starvation. Starvation affects the brain and can lead to mood changes, rigid thinking, anxiety and reduced appetite. This may cause severely limited eating or problem eating behaviors to continue and make it difficult to return to healthy eating habits.
- **A history of weight bullying.** People who have been teased or bullied for their weight are more likely to develop problems with eating and eating disorders. This includes people who have been made to feel ashamed of their weight by peers, health care professionals, coaches, teachers or family members.
- **Stress.** Whether it's heading off to college, moving, landing a new job, or a family or relationship issue, change can bring stress. And stress may increase the risk of an eating disorder.

Complications

Eating disorders cause a wide variety of complications, some of them life-threatening. The more severe or long lasting the eating disorder, the more likely it is that serious complications may occur. These may include:

- Serious health problems.
- Depression and anxiety.
- Suicidal thoughts or behavior.
- Problems with growth and development.
- Social and relationship problems.
- Substance use disorders.
- Work and school issues.
- Death.

Prevention

There's no sure way to prevent eating disorders, but you can take steps to develop healthy eating habits. If you have a child, you can help your child lower the risk of developing eating disorders.

Adults

To develop healthy eating habits and lifestyle behaviors:


- **Choose a healthy diet** rich in whole grains, fruits and vegetables. Limit salt, sugar, alcohol, saturated fat and trans fats. Avoid extreme dieting. If you need to lose weight, talk to your health care provider or a dietitian to create a plan that meets your needs.
- **Don't use dietary supplements**, laxatives or herbal products for weight loss.
- **Get enough physical activity.** Each week, get at least 150 minutes of aerobic activity, such as brisk walking. Choose activities that you enjoy, so you're more likely to do them.
- **Seek help for mental health issues**, such as depression, anxiety, or issues with self-esteem and body image.

For more guidelines on food and nutrition, as well as physical activity, go to [health.gov](https://www.health.gov).

Talk to a health care provider if you have concerns about your eating behaviors. Getting treatment early can prevent the problem from getting worse.

Children

Here are some ways to help your child develop healthy-eating behaviors:

- **Avoid dieting around your child.** Family dining habits may influence the relationships children develop with food. Eating meals together gives you an opportunity to teach your child about the pitfalls of dieting. It also allows you to see whether your child is eating enough food and enough variety.
- **Talk to your child.** There are many websites and other social media sites that promote dangerous ideas, such as viewing anorexia as a lifestyle choice rather than an eating disorder. Some sites encourage teens to start dieting. It's important to correct any wrong ideas like this. Talk to your child about the risks of making unhealthy eating choices.
- **Encourage and reinforce a healthy body image** in your child, whatever their shape or size. Talk to your child about self-image and offer reassurance that body shapes can vary. Don't criticize your own body in front of your child. Messages of acceptance and respect can help build healthy self-esteem. They also can build resilience  the ability to recover quickly from difficult events. These skills can help children get through the challenging times of the teen and young adult years.
- **Ask your child's health care provider for help.** At well-child visits, health care providers may be able to identify early signs of an eating disorder. They can ask children questions about their eating habits. These visits can include checks of height and weight percentiles and body mass index, which can alert you and your child's provider to any big changes.

Diagnosis

Eating disorders are diagnosed based on symptoms and a review of eating habits and behaviors. You may see both your health care provider and a mental health professional for a diagnosis.

To get a diagnosis, you may need:

- **A physical exam.** Your health care provider will likely examine you to rule out other medical causes for your eating issues. The provider also may order lab tests.
- **A mental health evaluation.** A mental health professional asks about your thoughts, feelings, and eating habits and behaviors. You also may be asked to answer a series of questions to help with the diagnosis.

- **Other studies.** Other medical tests may be done to check for any complications related to your eating issues.

Treatment

The best treatment for an eating disorder involves a team approach. The team commonly includes your primary health care provider, a mental health professional and sometimes a registered dietitian. Look for professionals with experience in treating eating disorders.

Treatment depends on your specific type of eating disorder. But in general, it includes:

- Learning about proper nutrition.
- Learning how to develop healthy eating habits.
- Guidance in reaching a healthy weight if you're underweight.
- Behavioral therapy, sometimes called talk therapy.
- Medicine, if needed.

If your life is at risk, you may need to go into a hospital right away.

Behavioral therapy

Certain behavioral therapies can be effective in treating eating disorders. These include:

- **Family-based treatment (FBT).** FBT is an outpatient treatment for children and teenagers with anorexia. It also is likely effective for bulimia and other problem eating behaviors. The family is involved in making sure that the child or other family member follows healthy-eating patterns and maintains a healthy weight.
- **Cognitive behavioral therapy (CBT).** CBT is commonly used in eating disorder treatment, especially for bulimia, binge-eating disorder and some other problem eating behaviors. A type of CBT called enhanced CBT is used most often. You learn how to monitor and improve your eating habits and moods, develop problem-solving skills, and explore healthy ways to cope with stressful situations.

Lifestyle and home remedies

To improve the chances of success in overcoming an eating disorder:

- **Find a mental health provider with expertise in eating disorders.** Treatment is most effective when delivered by a provider with specialty training in eating disorders. Look for a provider with experience in treatments shown to be effective, such as FBT and CBT.

- **Follow your treatment plan.** Don't skip therapy sessions and try not to stray from meal plans. Follow your health care provider's instructions on physical activity and exercise.
- **Talk to your health care provider about appropriate vitamin and mineral supplements.** If you're not eating well, chances are your body isn't getting all the nutrients it needs, such as vitamin D or iron. For healthy people, health care providers commonly recommend getting most vitamins and minerals from food.
- **Resist urges to weigh yourself.** And don't check yourself in the mirror often. This may simply increase your drive to maintain habits that aren't healthy.
- **Don't isolate yourself from others.** Caring family members and friends who have your best interests at heart want to see you get healthy.

Coping and support

It's difficult to manage an eating disorder when you get mixed messages from the media, culture, and sometimes family or friends. Whether you or your loved one has an eating disorder, ask your health care provider or a mental health professional for advice on coping and emotional support.

Learning effective coping strategies and getting the support you need from family and friends are vital to successful treatment.