

Eating Disorders

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### Eating Disorders

- Major types of DSM-IV eating disorders
  - **Anorexia nervosa** and **bulimia nervosa**
  - Both involve severe disruptions in eating behavior
  - Both can involve extreme fear and apprehension about gaining weight
  - Both have strong sociocultural origins
    - Westernized views
- Other Subtypes of DSM-IV Eating Disorders
  - Binge-eating disorder
  - Rumination disorder, pica, feeding disorder

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### Characteristics

- Large gender difference here – more with women
  - Although we see eating disorders increasing with men – why?

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## Characteristics

- common in young adolescents and the college population
- issues related to body image are culturally defined
  - the "ideal" weight in the U.S. is 15-20% below average weight

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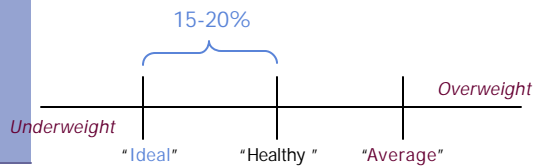
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## Healthy, Average, & Ideal Weights



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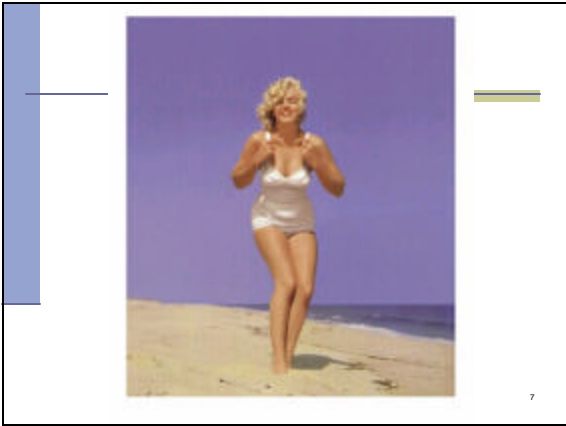
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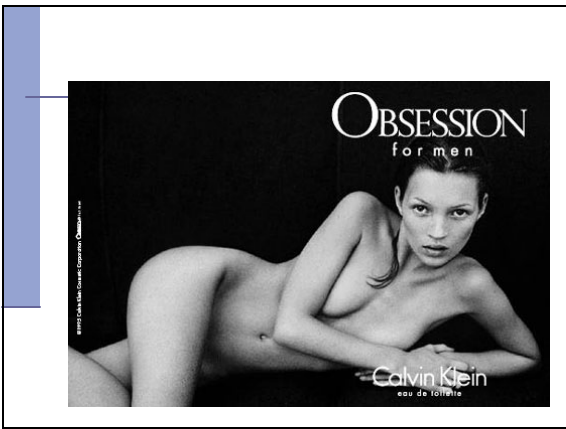
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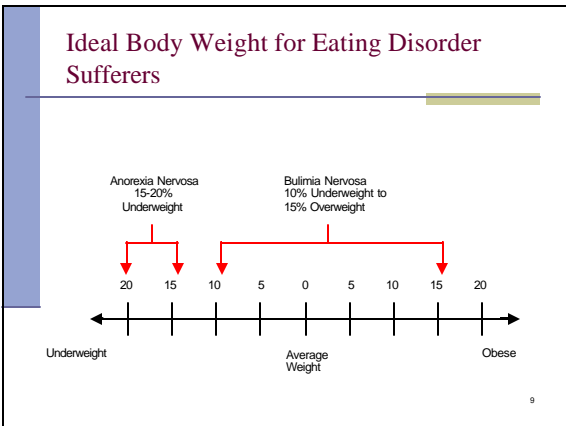
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## What do you think?

- Where would the following be...
  - (1) current weight?
  - (2) ideal weight?
  - (3) what men consider attractive?
  - (4) what women consider attractive?
- For MEN and WOMEN?

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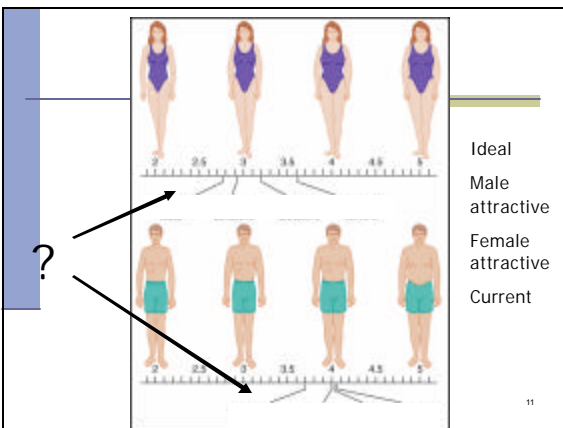
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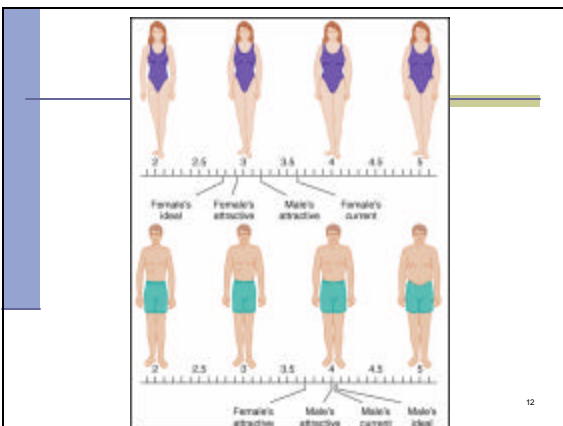
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## Anorexia Nervosa

- **Anorexia Nervosa** - characterized by a refusal to maintain a minimally normal body weight, intense fear of gaining weight, and a significant disturbance in the perception of the shape or size of his or her body



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## Anorexia Nervosa

- starve selves to thinness and death
  - defined as 15% below expected weight
- over-control of eating behavior and relentless pursuit of thinness
- weight is 15-20% below what would be considered "ideal" weight by many
- many begin with normal diet, then become extreme - e.g., limit caloric intake to 600 calories/day
- person becomes "phobic" about gaining weight

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## Anorexia Nervosa

- **DSM-IV Subtypes of Anorexia**
  - **Restricting subtype**
    - Limit caloric intake via diet and fasting
  - **Binge-eating-purging subtype**
    - About 50% of anorexics
- **Associated Features**
  - Most show marked disturbance in body image
  - Most are co-morbid for other psychological disorders
  - Methods of weight loss can have severe life threatening medical consequences

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## Anorexia Nervosa

- person is preoccupied with thinness but become obsessed with food and food related issues
- person may become gourmet cook
  - cook for others
- these people will eat alone often times
- may be hyperactive, may be very into exercise as part of method of losing weight

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## Anorexia Nervosa

- often times will wear bulky clothes (big sweaters) as they get thinner and thinner
  - to camouflage thinness, and/or
  - because they are cold
    - they've lost most of their body fat (insulator)
- they develop brittle hair and nails
- eyes become sunken

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## Anorexia Nervosa

- lower body temperature
- pulse drops
- develop constipation
- quit menstruating (amenorrhea)
- body will begin to feed off of itself, off its own tissue to survive

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## Anorexia Nervosa

- often times as this progresses, the person will report difficulty thinking clearly
- hospitalization is necessary at extreme ends to keep person alive -- i.v. feedings
- This has been viewed as a control issue
  - when the person can't control outside events, they will turn attention inward and control what is ingested; what is brought into the body

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## Anorexia research data

- Majority are female and white, from middle-to-upper middle class families
- Usually develops around age 13 or early adolescence
- Tends to be more chronic and resistant to treatment than bulimia
- The lifetime prevalence rate for Anorexia
  - females = 0.5%
  - males = 0.1%

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## Anorexia research data

- National Association of Anorexia Nervosa and Associated Disorders:
  - 5-10% of anorexics die **within 10 years** after contracting the disease
  - 18-20% of anorexics will be dead **after 20 years**
  - only 30-40% ever fully recover

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## Anorexia research data

- Death from anorexia nervosa is **12 times higher** than ALL of the combined causes of death for females 15-24 years of age
- **20%** of people suffering from anorexia will prematurely die from complications related to their eating disorder
  - including suicide and heart problems
  - 30-50% of these deaths are from suicide

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## Anorexia treatment

- Medical treatment
  - There are **none** with demonstrated efficacy
- Psychological treatment
  - Weight restoration
    - First and easiest goal to meet
  - Treatment involves education, behavioral, and cognitive interventions
  - Treatment often involves the family
  - Long-term prognosis for anorexia is poorer than for bulimia

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## Bulimia Nervosa

- **Bulimia Nervosa** - characterized by binge eating and inappropriate **compensatory methods** to prevent weight gain (using laxatives, diuretics, or self-induced vomiting)
  - **Compensatory behaviors**
    - Purging
      - Self-induced vomiting, diuretics, laxatives
      - Some exercise excessively, others fast

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## Bulimia Nervosa

- Binge and purge cycling
  - rapid consumption of huge amounts of food followed by some kind of purging
  - specifically, binge is defined as 1200 calories consumed at once
    - average binge is usually between 4000-5000 calories
    - Some individuals with this problem can eat up to 20,000 calories in one day
- Problem:
  - people can define binge as very small caloric intake (1 candy bar) and must immediately purge this
  - probably still talking about Bulimia here

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## Subtypes of bulimia

- DSM-IV Subtypes of bulimia
  - Purging subtype
    - Most common subtype
    - e.g., vomiting, laxatives, enemas
  - Nonpurging subtype
    - About one-third of bulimics
    - e.g., excess exercise, fasting

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## Bulimia Nervosa

- person tends to be very secretive in both eating and purging
- person may use diet pills in addition to purging
- can be very painful to ingest massive amounts of calories
- person often feels very depressed afterwards

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## Bulimia Nervosa

- Most are within 10% of target body weight
- Most are over concerned with body shape, fear gaining weight
- Most are co-morbid for other psychological disorders
- Purging methods can result in severe medical problems

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## Bulimia Nervosa

- Very negative outcomes are possible with bulimia
  - death is a possibility with bulimia
  - damage the electrolyte system
  - damage to stomach
  - become more and more withdrawn

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## Bulimia research data

- Majority are female
  - onset around 15 to 21 years of age
  - Roughly 5-10% of individuals diagnosed with bulimia are men
- Lifetime prevalence
  - 1-3% for females
  - 0.1% for males
- 6-8% of college women suffer from bulimia
  - Stats now sit at approximately 10%

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## Bulimia research data

- Tends to be chronic if left untreated
- 10% of individuals suffering from bulimia will die from either
  - starvation
  - cardiac arrest
  - other medical complications
  - suicide

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## What Causes Eating Disorders? Biological Factors?

- Biological theorists suspect that some people inherit a genetic tendency to develop an eating disorder
  - Consistent with this model:
    - Relatives of people with eating disorders are 6 times more likely to develop the disorder themselves
    - Identical (MZ) twins with bulimia: 23%
    - Fraternal (DZ) twins with bulimia: 9%
  - We are told that these findings may be related to...
    - low serotonin

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## Bulimia treatment

- Medical Treatment
  - Antidepressants can help reduce bingeing and purging behavior
  - Antidepressants are not efficacious in the long-term
- Psychological Treatment
  - Cognitive-behavior therapy (CBT) is the treatment of choice
  - Interpersonal psychotherapy results in long-term gains similar to CBT
- Treatment provides immediate, significant improvement in about 40% of cases
  - An additional 40% show moderate improvement
- Follow-up studies suggest that 10 years after treatment, about 90% of patients have fully or partially recovered

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## Bulimia Nervosa vs. Anorexia Nervosa

- Similarities:
  - Onset after a period of dieting
  - Fear of becoming obese
  - Drive to become thin
  - Preoccupation with food, weight, and appearance
  - Elevated risk of self-harm or attempts at suicide
  - Feelings of anxiety, depression, perfectionism
  - Substance abuse
  - Disturbed attitudes toward eating

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## Bulimia Nervosa vs. Anorexia Nervosa

- Differences:
  - People with bulimia are more worried about pleasing others, being attractive to others, and having intimate relationships
  - People with bulimia tend to be more sexually experienced
  - People with bulimia display fewer of the obsessive qualities that drive restricting-type anorexia
  - People with bulimia are more likely to have histories of mood swings, low frustration tolerance, and poor coping

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## Bulimia Nervosa vs. Anorexia Nervosa

- Differences:
  - Different medical complications:
    - Only half of women with bulimia experience amenorrhea vs. almost all women with anorexia
    - People with bulimia suffer damage caused by purging, especially from vomiting and laxatives

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## Eating problems research data: college

- 61% of college women have some kind of eating disturbance
  - chronic dieting, restrained eaters
- about .1 to 1% of college women meet definition of anorexia
- bulimics are more common
  - one study indicated that 15% of freshman women are bulimic
- onset for these disorders is typically between the ages of 13-22

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## Research data: NCAA Athletes

### Rates Among Male and Female NCAA Athletes

(Johnson, Powers, & Dick, 1999)

	FREQUENCY	FEMALES	MALES
Vomiting	Lifetime	23.90%	5.93%
	Monthly	6.41%	2.04%
	Weekly	3.20%	1.13%
Laxative use	Daily	1.42%	0.34%
	Lifetime	11.72%	5.06%
	Monthly	1.78%	1.02%
Diet pill use Lifetime	Weekly	0.36%	0.34%
	Daily	0.18%	0.23%
	Lifetime	14.30%	2.16%
Sauna/Steam use	Monthly	1.42%	0.57%
	Weekly	1.25%	0.23%
	Daily	1.25%	0.23%
	Lifetime	6.59%	24.26%
	In Last Year	2.50%	14.63%

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## Racial and Ethnic Minorities

- Rates of minorities with eating disorders are similar to those of white women
- 74% of American Indian young women report dieting and purging with diet pills
- A survey by Essence magazine (1994) reported that 53.5% of African-American female respondents were at risk of an eating disorder
- In Japan, one of the most common psychological problems facing young women are eating disorders

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## Characteristics of women with eating disorders

- come from family that places great emphasis on physical beauty
- 70% of these women tend to be on diets as early as elementary school
- there is a great deal of socialization here
- woman is told she can never be too thin
- thinness in advertising is linked to success in other areas
- there is, overall, an incredible pressure in society to stay thin

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## IF A FRIEND HAS THIS

- be direct
  - tell them you're concerned
- don't comment repeatedly on the thinness
  - may take this as a compliment or as you being jealous
  - may be reinforcing
- emphasize caring about this person

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## IF A FRIEND HAS THIS

- comment on what you've seen
- if person opens up
  - may be great relief in getting this secret out in the open
  - person may be angry at you for bringing this up
  - be compassionate with the person - want to be there with how they feel
  - be comforting, be with them through counseling
  - encourage them that a lot of people get better
  - hang in there and support them

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