

“Mirror, mirror on the wall, who's the fattest one of all?”



Chapter 8- Eating Disorders

CLASS OBJECTIVES:

- ◆ What are eating disorders?
- ◆ What is the difference between Bulimia Nervosa and Anorexia Nervosa?
- ◆ What are the diagnostic characteristics of each disorder?

Test Your Knowledge!

True or False?

- ◆ Eating disorders have the highest mortality rate of any mental illness. _____
- ◆ Eating disorders can be completely “cured.” _____
- ◆ Almost 50% of people with eating disorders meet the criteria for depression. _____
- ◆ Women and girls of all ethnic groups susceptible to eating disorders. _____
- ◆ Men don't get eating disorders. _____

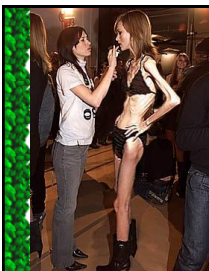
Eating Disorders

- Approximately 24 million people of all ages and genders suffer from an eating disorder in the U.S.
- Eating disorders have increased dramatically in Western countries from 1960-1995 (Hock, 2002).
- Eating disorders are not a sign that a person has a problem with food, these are only the symptoms of underlying problems in that person's life.
- The three of the most common eating disorders are _____

Eating Disorders

- Each disorder has different diagnostic criteria, but _____
- These are often comorbid with other disorders such as depression, substance abuse, and anxiety disorders (NIMH, 2002).





Anorexia Nervosa:
The relentless pursuit of
thinness

They are so successful at losing weight that they put their lives in danger.

* People with this disorder demonstrate drastic weight loss. _____

* 20% of people struggling with this disorder will die as a result with slightly more than 5% dying within 10 years

“There’s no such thing as too thin”

* This disorder is one of the most commonly diagnosed psychiatric diagnoses

* This disorder commonly begins in adolescents who are or believe themselves to be overweight.

- Initial dieting escalates to an obsessive preoccupation



There are 2 types of anorexia:

Approximately half of those diagnosed with anorexia engage in binge eating and purging (Agras, 1987).



◆ People with anorexia may have some form of cognitive distortions.

◆ This is demonstrated by an inappropriate evaluation of _____



Jane has Anorexia

Jane is 5'8 and weighs 110 lbs. The recommended weight for her height is 130-160 lbs.

◆ Is Jane satisfied with her weight loss?

There are many medical consequences that result from anorexia:

- *Amenorrhea* -loss of menstrual cycle resulting from semi-starvation
- Brittle hair and nails, dry skin
- Sensitivity and intolerance to cold
- Cardiovascular problems- chronically low BP and HR
- Electrolyte imbalance

Comorbidity

- One anxiety disorder that frequently occurs with anorexia is _____.
- In anorexia, the intrusive thoughts are focused on gaining weight and the individual engages in a variety of ritualistic behaviors to rid these thoughts (Keel et al., 2003).

Which one of these women do you THINK has Bulimia Nervosa?



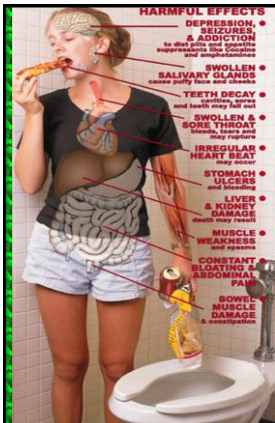
Bulimia Nervosa

- Bulimia is one of the most common psychological disorders on college campuses.
- The hallmark of this disorder is bingeing on large amounts of junk food.



Not Just the Ladies...

- ✦ The remaining 5-10% are men who have later onset and a large percentage (42%) of those are usually _____
- Male athletes who require weight regulation, such as wrestling are another large group of males with eating disorders.



- ✦ Bulimia causes serious physical and emotional effects:
 - Electrolyte imbalance
 - Inflammation of the esophagus, salivary glands, and jaw
 - Problems with teeth, gums, and lips
 - Damaged family and social relationships

Comparisons

✦ Both anorexia and bulimia are characterized by a morbid fear of gaining weight and losing control.

- People with anorexia are proud of their diets and their extraordinary control.
- People with bulimia are ashamed of both the problem and the lack of control (Brownell, 1995).

Can this disorder “rub-off” on someone who immigrates?

There are many documented cases of eating disorders occurring in immigrants who move to western countries, with no instances of eating disorder until they moved.

- Nasser’s (1988) study of Egyptian women with no history of eating disorders showed that 12% of these women developed while living outside Egypt.

The Influence of Culture

The prevalence of eating disorders varies amongst most north American minority populations, but African Americans and Asian women have lower rates than Caucasians.

- But are equal among Hispanic females and more prevalent among native-Americans (Crago, 1997).

Are African-American women being sent a different message?





