FACT SHEET ON EATING DISORDERS

Types of Eating Disorders:

- **Anorexia Nervosa** is characterized by an intense fear of gaining weight, self-starvation, loss of menstrual periods, body dissatisfaction and significant disturbance in perception of shape or size of his or her body, and a body weight that is 15% below normal.
- **Bulimia Nervosa** is characterized by bingeing (consuming large amounts of food at one sitting while feeling out of control), purging (getting rid of food by using laxatives, vomiting, obsessive exercise), dissatisfaction with body, and fear of gaining weight.
- **Binge Eating Disorder** is characterized by recurrent episodes of binge eating without the purging behavior of bulimia.
- **Eating Disorder Not Otherwise Specified (NOS)** includes people who have characteristics of one or more eating disorder but who do not fit the diagnostic criteria for any one disorder.

Who Suffers from Eating Disorders?

- Approximately 1% of adolescent girls develop anorexia nervosa.
- Approximately 2-3% of young women develop bulimia nervosa.
- Two percent of adults suffer from binge eating disorder.
- Some 90% of those with eating disorders are adolescent and young women.
- Men may constitute as many as 25% of those exhibiting binge eating disorders.
- Bulimia is as high as 15% in college-aged women.
- Although the common perception is that eating disorders are most prevalent among white, upper middle class young women, recent research indicates that of those who suffer from eating disorders:
  - 1 in 5 are poor
  - 1 in 4 are non-white
- Teenagers with asthma, attention deficit disorder, diabetes, and other chronic illnesses are reported to experience eating disorders 2 to 4 times more often

Signs and Symptoms of Eating Disorders

- **Anorexia Nervosa**
  - Intense fear of gaining weight
  - Belief that they are fat although they are actually extremely thin
  - Restriction of calories
  - Avoids social situations where s/he may have to eat in front of others
  - Unusual eating habits or rituals
  - Obsessive or compulsive exercise
  - Hyperactivity or fatigue
  - Isolation from friends and family

- **Bulimia Nervosa**
  - Fear of being fat
  - Eats in secret
  - Goes to the bathroom immediately following meals
  - Hoards food
  - Mood swings
  - Abuse of alcohol or other substances
  - Over-exercising
  - Isolation from friends and family

- **Binge Eating Disorder**
  - Eating alone and in secret
  - Feelings of guilt, shame and disgust about overeating
  - Eating large amounts of food when not hungry
  - Abuse of alcohol or other substances

- Someone with an Eating Disorder NOS may exhibit some combination of the above symptoms.
- All eating disorders may also be characterized by depression.
Physical Effects of Eating Disorders

- Anorexia has the highest rate of death of any psychiatric illness, with 1 in 10 cases leading to death by cardiac arrest, starvation, other medical complications, or suicide.

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<thead>
<tr>
<th>Anorexia Nervosa</th>
<th>Bulimia Nervosa</th>
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<tbody>
<tr>
<td>✓ Dry skin, sallow complexion</td>
<td>✓ Damaged teeth and swollen cheeks</td>
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<tr>
<td>✓ Irregular or ceased menstrual cycle for females</td>
<td>✓ Dehydration, weakness, fatigue</td>
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<tr>
<td>✓ Growth of fine hair over body and face</td>
<td>✓ Electrolyte imbalance</td>
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<tr>
<td>✓ Purple nail beds and cold extremities</td>
<td>✓ Bleeding and infection of the throat</td>
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<tr>
<td>✓ Hair loss</td>
<td>✓ Enlargement of lymph or salivary glands</td>
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<tr>
<td>✓ Cardiac problems</td>
<td>✓ Digestive and intestinal problems</td>
</tr>
<tr>
<td>✓ Dizziness, low blood pressure, fainting</td>
<td>✓ Muscle spasms and headaches</td>
</tr>
<tr>
<td>✓ Changes in metabolism and energy</td>
<td>✓ Irregular menstrual cycle for females</td>
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<tr>
<td>✓ Malfunctioning of pancreas; Damaged kidneys</td>
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<tr>
<td>✓ Osteoporosis</td>
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<table>
<thead>
<tr>
<th>Binge Eating Disorder</th>
<th>Eating Disorder NOS</th>
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<tr>
<td>✓ Diseases related to obesity (i.e. diabetes, high blood pressure, high cholesterol, risk of stroke, sleep apnea)</td>
<td>✓ Any number of the above mentioned effects, depending on the behavioral symptoms of the individual</td>
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Treatment of Eating Disorders

- Eating disorders are most successfully treated when diagnosed early.
- A complete physical examination is necessary to determine if there is immediate medical danger and to rule out other illnesses.
- Hospitalization may be required.
- Treatment often involves a combination of interventions including:
  ✓ Individual, group or family psychotherapy
  ✓ Cognitive therapy
  ✓ Behavioral therapy
  ✓ Nutritional counseling
  ✓ Antidepressant medication
- Support groups may be helpful for some individuals and are often offered through hospitals as well as by national eating disorder advocacy organizations. Recovery is a long process and relapse is not uncommon. Support and treatment are needed to help the individual continue his/her recovery, even if s/he suffers a relapse.

Adolescents and Eating Disorders

- The onset of eating disorders peaks at ages 14 and 18, corresponding to the ages of changes in an adolescent female’s body and the transition to college/leaving the family home.
- 66% of high school girls and 17% of boys are on diets at any given time.
- 1 in 8 high school girls has used vomiting as a “diet aid.”
- 81% of 10 year olds are afraid of being fat.
- 80% of high school females and 44% of high school males have used exercise to lose weight.
- In a study of high school students’ weight control practices, in the 7 days before the survey 49% of females and 18% of males had skipped meals to lose weight.
Men and Eating Disorders

- 5-10% of eating disorders occur among males.
- Men more frequently use excessive and obsessive exercise and body-building prior to and during their eating disorder.
- Issues relating to sexuality and gender identity are sometimes associated with male eating disorders and there appears to be a higher rate of eating disorders among gay males.
- Men may be less likely to seek treatment for an eating disorder because of the social stigma of having a problem that has generally been perceived as a “woman’s problem.”
- The signs, symptoms, and treatment needs of eating disorders in males are similar to those of women.

Athletes and Eating Disorders

- Eating disorders and disordered eating are significant problems for many athletes and a greater risk is associated with sports in which anaerobic activities predominate over aerobic activities.
- Female athletes are especially at risk in sports which emphasize a thin body or appearance, such as gymnastics, ballet, figure skating, swimming or distance running.
- Male athletes are especially at risk in body building and wrestling.
- Eating disorders may result in symptoms that interfere with athletic performance and impair athletic capacity.
- Female athletes are particularly at risk for the Female Athlete Triad of amenorrhea (cessed menses), disordered eating, and osteoporosis (brittle bones).
- A 1996 study of NCAA athletes found that
  - Binge-eating occurred at least weekly in 13% of male athletes and 10% of female athletes.
  - 25% of male athletes used saunas or steam baths at least weekly to lose weight.
  - 2% of both male and female athletes used steroids to improve performance.
  - 4.4% of female athletes used vomiting to lose weight.
- NCAA studies show that at least 40% of member institutions reported at least one case of anorexia or bulimia in their athletic programs.

Dieting and Eating Disorders

- 95% of all dieters will regain their lost weight in 1-5 years.
- 20-24% of men and 33-40% of women are actively dieting to lose weight while an additional 28% of men and women are dieting to maintain weight.
- 91% of women surveyed on a college campus had attempted to control their weight through dieting.
- 59% of individuals entering into treatment for an eating disorder considered a prolonged period of dieting a precipitating event to the onset of their disorder.
- 35% of normal dieters progress to pathological dieting. Of those, 20-25% progress to partial or full-syndrome eating disorders.
- Americans spend over $40 billion on dieting and diet-related products each year.

Body Image and the Media

- The average American woman is 5’4” tall and weighs 140 pounds. The average American model is 5’11” and weighs 117 pounds. Most fashion models are thinner than 98% of American women.
- 80% of American women are dissatisfied with their appearance.
- More than 50% of high school girls want smaller hips, thighs, and/or waists.
- Nine-year-old children rate silhouettes of fat figures as having fewer friends, being less liked by their parents, doing less well in school, being less content with their appearance, and wanting to be thinner.
REFERENCES

Types of Eating Disorders:

Who Suffers from Eating Disorders?

Signs and Symptoms of Eating Disorders and Physical Effects of Eating Disorders

Treatment of Eating Disorders

Adolescents and Eating Disorders

Men and Eating Disorders
Weinstein B. *Men are upsetting the scales.* The Boston Globe: Your Health (A Special Section). October 20, 1996 pgs. 12-17.

Athletes and Eating Disorders
Dieting and Eating Disorders


Body Image, the Media, and Eating Disorders
