

When you become so preoccupied with food and weight issues that you find it harder and harder to focus on other aspects of your life, it may be an early sign of an eating disorder. Studies suggest that 1 in 20 people will be affected at some point in their lives. Ultimately without treatment, eating disorders can take over a person's life and lead to serious, potentially fatal medical complications.

Symptoms

Eating disorders are a group of related conditions that cause serious emotional and physical problems. Each condition involves extreme food and weight issues; however, each has unique symptoms that separate it from the others.

Anorexia Nervosa. A person with anorexia will deny herself food to the point of self-starvation as she obsesses about weight loss. With anorexia, a person will deny hunger and refuse to eat, practice binge eating and purging behaviors or exercise to the point of exhaustion as she attempts to limit, eliminate or “burn” calories. Low food intake and inadequate nutrition causes a person to become very thin. The body is forced to slow down to conserve energy causing irregularities or loss of menstruation, constipation and abdominal pain, irregular heart rhythms, low blood pressure, dehydration and trouble sleeping.

Bulimia Nervosa. Someone living with bulimia will feel out of control when bingeing on very large amounts of food during short periods of time, and then desperately try to rid himself of the extra calories using forced vomiting, abusing laxatives or excessive exercise. This becomes a repeating cycle that controls many aspects of the person's life and has a very negative effect both emotionally and physically. People living with bulimia are usually normal weight or even a bit overweight.

The emotional symptoms of bulimia include low self-esteem overly linked to body image, feelings of being out of control, feeling guilty or shameful about eating and withdrawal from friends and family. Like anorexia, bulimia will inflict physical damage. The bingeing and purging can severely harm the parts of the body involved in eating and digesting food, teeth are damaged by frequent vomiting, and acid reflux is common. Excessive purging can cause dehydration and lead to cardiac arrhythmias, heart failure and even death.

Binge Eating Disorder (BED). A person with BED loses control over her eating and eats a very large amount of food in a short period of time. She may also eat large amounts of food even when she isn't hungry or after she is uncomfortably full. This causes her to feel embarrassed, disgusted, depressed or guilty about her behavior. A person with BED, after an episode of binge eating, does not attempt to purge or exercise excessively like someone living with anorexia or bulimia would. A person with binge eating disorder may be normal weight, overweight or obese.

Causes

Eating disorders are very complex conditions, and scientists are still learning about the causes. Although eating disorders all have food and weight issues in common, most experts now believe that eating disorders are caused by people attempting to cope with overwhelming feelings and painful emotions by controlling food intake. Factors that may be involved in developing an eating disorder include:

- **Genetics.** People with first degree relatives with an eating disorder appear to be more at risk of developing an eating disorder suggesting a genetic link. Evidence that the brain chemical, serotonin, is involved also points a contributing genetic and biological factors.
- **Environment.** Cultural pressures that stress “thinness” as beautiful for women and muscular development and body size for men places undue pressure on people of achieve unrealistic standards.
- **Peer Pressure.** With young people, this can be a very powerful force. Pressure can appear in the form of teasing, bullying or ridicule because of size or weight. A history of physical or sexual abuse can also contribute to some people developing an eating disorder.
- **Emotional Health.** Perfectionism, impulsive behavior and difficult relationships can all contribute to lowering a person’s self-esteem and make them vulnerable to developing eating disorders.

Diagnosis

An early diagnosis is important to achieving the best recovery outcome. If an eating disorder is believed to be an issue, a doctor will usually perform a physical examination, conduct an interview and order lab tests to check for related medical issues and complications. In addition, a mental health professional will conduct a psychological evaluation.

Treatment

Eating disorders are managed using a variety of techniques. Treatments will vary depending on the type of disorder, but will generally include the following:

- **Psychotherapy**, such as talk therapy or behavioral therapy.
- **Medicine**, such as antidepressants and anti-anxiety drugs to address frequently co-occurring illnesses like depression or anxiety. With no medication available to treat eating disorders themselves, many patients find that these medicines help with underlying issues.
- **Nutritional counseling and weight restoration monitoring** are also crucial. Family based treatment is especially important with children and adolescents. It leads to healthy eating patterns, and increases awareness and support at home.

See more at: <http://www.nami.org/Learn-More/Mental-Health-Conditions/Eating-Disorders>

Updated March 2015

NAMI
3803 N. Fairfax Drive, Suite 100
Arlington, VA 22203
www.nami.org
NAMI HelpLine: 800-950-NAMI (6264)
 [NAMI](#) |  [namicommunicate](#)