

Alma Griffith

Nutritional Therapist & Life Coach

t 01737 812 498 *m* 07759 149 326





Anorexia - January 2012

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January's newsletter is about **eating disorders**, specifically **Anorexia**, which is a serious eating disorder. It can damage your health and even threaten your life. We would all like to look good with a nice shapely figure but when we become preoccupied with being thin to the point where your life and thoughts are dominated, then this can be a sign of an eating disorder.

This newsletter is full of information about this very serious subject; if you enjoy receiving my emails please forward them to anyone you think would be interested. Anorexia nervosa is a complex eating disorder where a person is obsessed with dieting and has a distorted image of their body weight and an intense fear of gaining weight. It is often accompanied by excessive exercising, use of diet pills, laxatives and enemas, often to the point of starvation in order to feel a sense of control over their body and no matter how much weight they lose it's never enough. Anorexia is a life threatening condition that can result in death from starvation, heart failure, electrolyte imbalance, or suicide. Treatment can help these people to develop a healthier lifestyle and manage this eating disorder.

What causes Anorexia?

Anorexia is an emotional disorder that focuses on food, but it is actually an attempt to deal with perfectionism and a desire to gain control by strictly regulating food and weight. People with anorexia often feel that their self-esteem is tied to how thin they are.

No one knows exactly what causes this eating disorder; experts agree that there maybe several factors involved:

- Peer pressure to be thin and attractive, or a cultural environment that puts a high value on thin or lean bodies.
- Severe trauma or emotional stress (such as the death of a loved one or sexual abuse) during puberty or pre-puberty.
- Abnormalities in brain chemistry. Serotonin, a brain chemical that's involved in depression, may play a role
- A tendency toward perfectionism, fear of being ridiculed or humiliated, a
 desire to always be perceived as being "good." A belief that being
 perfect is necessary in order to be loved.
- They have also found that it is also the desire to remain childlike in their bodies. That way they are not sexual, or sexually appealing. Sometimes the sufferers are incest survivors too.
- Family history of anorexia. About one fifth of people with anorexia have a relative with an eating disorder.

Signs & Symptoms of Anorexia

The primary sign of anorexia nervosa is severe loss of body weight. People with anorexia may try to decrease their weight by severely limiting how much food they eat. They may also exercise excessively. Some people may engage in binging and purging, similar to bulimia. They may vomit after eating or take laxatives. At the same time, the person may insist that they are still fat.

Physical Signs to look for

- Excessive loss of body weight
- Loss of menstrual cycle
- Fertility problems
- Thinning hair
- Dry skin
- Brittle nails
- Hollow looking eyes, pasty skin
- · Cold or swollen hands and feet
- Digestive problems
- Malnutrition & dehydration
- Downy hair covering the body
- Low blood pressure
- Fatique
- Abnormal heart rhythms
- Osteoporosis

Psychological Signs to look for

- Denial of being underweight (insisting they are fat when they are thin)
- Being preoccupied with food
- Anxiety when eating in front of people
- Ignoring feelings of hunger and refusing to eat
- Inability to remember things
- Refusing to acknowledge the seriousness of the illness
- Obsessive-compulsive behaviours
- Depression and irritability
- Mood swings
- Low self-esteem
- Obsessive exercising

Behavioral signs to look for

- Skipping meals or making excuses not to eat
- Eating only a few foods and counting calories
- Wearing baggy clothing to disguise the weight loss
- Refusing to eat in public
- Fainting & Dizziness
- Planning and preparing elaborate meals for others but not eating
- Constantly weighing themselves
- Ritually cutting food into tiny pieces
- Compulsive exercising
- Withdrawing from family, friends and any social situation
- Inflicting self-harm
- Controlling behaviour

Risk Factors:

- Age and gender -- anorexia is most common in teens and young adult women.
- Dieting
- Weight gain
- Puberty
- Having depression, anxiety disorders, obsessive compulsion disorder (OCD) often present -- OCD associated with an eating disorder is often accompanied by a compulsive ritual around food (such as cutting it into tiny pieces)
- Heavily into sporting activities (such as dance, gymnastics, running, figure skating, horse racing, modeling, acting)
- Difficulty dealing with stress (pessimism, tendency to worry, refusal to confront

- difficult or negative issues)
- History of sexual abuse or other traumatic event
- Experiencing a big life change, such as moving or going to a new school

Treatment

Treatment can be challenging as some people can be in denial and refuse to accept that they have a problem. Effective treatment needs to address the underlying emotional and mental health issues, which often goes back to their childhood and a person's self-image and self-perception.

There are many different ways to help treat anorexia:

General practitioner - who will examine the client and refer to a Eating disorder specialist (psychologist), who is trained in eating disorders.

Psychotherapist - helps to address the underlying emotional issues that have triggered the eating pattern.

Cognitive behavioural therapy - CBT is a time-limited and focused approach that helps a person understands how their thinking and negative self-talk and self-image can directly impact their eating and negative behaviors.

Family therapy - Family therapy helps a person with anorexia see and understand the dysfunctional role they play within the family, and how their eating behaviors maintain that role. Usually the whole family is involved in helping the client to gain weight and improve their eating habits.

Medication - is usually not given for anorexia but mainly for any medical complications' arising from the eating disorder i.e. depression, osteoporosis.

Residential treatment - usually provides the full range of specialists to help treat the disorder - nutritionists, psychologists, doctors and relaxation therapists. All these help the person to learn all the skills necessary to make the changes they need in a relaxed and safe environment.

Hospitalization if a person is severely ill and below 15% of their appropriate body weight or serious medical problems resulting from their anorexia.

Self-help groups - like any addiction if you meet recovering anorexic people this can often help to make you feel that you are not alone in your struggle.

NLP & Hypnosis can also help to manage your struggle with eating disorders.