

Eating Disorders

What are eating disorders?

Eating disorders are dangerous and complex mental health problems that often reflect how you feel and how you think about yourself. Because they are often misunderstood and typically hidden, it can be challenging to identify people affected by eating disorders.

Treatment by a medical care team vastly improves the chances of recovery. If you think you or someone you care about might have an eating disorder, reach out for help. Eating disorders can be overcome—leading to a happier, more hopeful life.

Anyone can develop an eating disorder. They are most common in young women (teenagers and young adults), but they can happen to people of any gender, race, age, or weight.

There are many types of eating disorders (see [page 2](#)). The most common are **anorexia nervosa** [an-uh-REK-see-uh nur-VOH-suh] and **bulimia nervosa** [buh-LEE-mee-uh nur-VOH-suh]. These 2 disorders typically involve periods of:

- **Dietary restriction**—decreasing how much someone eats by skipping meals or avoiding certain foods and food groups.
- **Binge eating (or binging)**—eating an unusually large amount in a short period of time.
- **Purging**—routinely throwing up or using laxatives, enemas, or **diuretics** [die-uh-RET-iks] which are drugs that increase how much you urinate (pee).

Eating disorders tend to occur in people who:

- Think about what they eat and their weight most of the time
- See themselves as fat, even when underweight



What do I need to do next?

- 1 Learn about the different types of eating disorders and the signs and symptoms to watch for in yourself or your family member ([page 2](#)).
- 2 Review how eating disorders are diagnosed and treated on [page 3](#).
- 3 Check out the online and book resources listed on [page 4](#) to learn more about eating disorders.
- 4 Ask your doctor for a copy of ***Eating Disorders: Conversation tips for friends and families***. This helps you start a conversation and make those conversations more productive.

- Often exercise obsessively to stay thin or to burn off what they eat
- Often have emotional issues such as depression and anxiety

What causes eating disorders?

It's not clear why some people have eating disorders and others don't. The cause is unique to each person's experiences, genetics, environment, and other personal factors. An eating disorder may stem from many factors, including:

- **A drive for perfection** that can be fueled by media and cultural images of unrealistic thinness or by family and friends who value "fitting in" with a certain body size, shape, or weight
- **Participating in sports** that emphasize appearance (like gymnastics and figure skating) or where weight gives a competitive advantage (like long-distance running and wrestling)
- **Emotional and personality disorders**, such as depression, anxiety, traumatic life events, and a desire for control or perfectionism

What are the types of eating disorders and signs to watch for?

The table below highlights the signs, types, and health risks of anorexia nervosa and bulimia nervosa. Other types of eating disorders vary greatly but can be just as dangerous as anorexia or bulimia.

Examples of other eating disorders include:

- Binge-eating disorder (binge eating without purging)
- Purging disorder (purging without bingeing)
- Chewing (and then spitting out) large amounts of food

How can eating disorders hurt my life?

In addition to the risks listed in the table below, eating disorders can make school, work, and daily tasks overwhelming.

Eating disorders can also cause you to have other serious health problems, such as:

- Mood disorders
- Depression
- Anxiety
- Obsessive-compulsive disorder
- Substance use disorder
- Suicidal thoughts

Talk to your doctor about being checked for these other conditions.

Anorexia nervosa (involves self-starvation and excessive weight loss)		
Signs	Types	Health Risks
<ul style="list-style-type: none"> • Low body weight • Intense fear of gaining weight or becoming fat • Denial of the seriousness of low body weight • Loss of menstrual periods (for females) 	<ul style="list-style-type: none"> • Restricting calories by following drastic diets, fasting, or exercising too much • Binge-eating (eating an unusually large amount in a short period of time) and/or purging (throwing up or using laxatives, enemas, or diuretics to eliminate food) 	<ul style="list-style-type: none"> • Slow heart rate and muscle loss, which leads to fainting, fatigue, weakness, and possible heart failure • Weakening bones (osteoporosis), which leads to bone breaks • Dehydration and loss of nutrients, which leads to irregular heartbeat, heart or kidney failure, and sometimes death • Being depressed or anxious, having a sleep disorder, or thinking about committing suicide

Bulimia nervosa (involves secretive binge-eating followed by purging)		
Signs	Types	Health Risks
<ul style="list-style-type: none"> • A lack of control during binge-eating • Secrecy about binge-eating and purging • Eating an unusually large amount of food without gaining weight • Episodes of not eating, binge-eating, and purging • Going to the bathroom after meals to self-induce vomiting • Complaining of diarrhea and constipation from laxative abuse 	<ul style="list-style-type: none"> • Purging in an attempt to lose weight after binge-eating • Non-purging methods like exercising too much or not eating to lose weight after a binge 	<ul style="list-style-type: none"> • Dehydration and loss of chemicals that control the fluids in your body (electrolytes), which can lead to irregular heartbeat, heart or kidney failure, and sometimes death • Damage to the digestive system (esophagus, stomach, and intestines), leading to bleeding ulcers, bloating, and pain • Tooth decay due to stomach acid (when vomiting) eroding tooth enamel

How are eating disorders diagnosed?

Doctors make a medical diagnosis related to eating disorders by gathering information about your symptoms and evaluating findings from a physical exam and lab tests. Your doctor may:

- **Talk with you** about food intake, behaviors like fasting and self-induced vomiting, weight and body image, exercise, and family background.
- **Talk with your family** about your behaviors and family history.
- **Take a medical history including** information about past health, diseases, treatments, and other factors that may contribute to an eating disorder.
- **Do a physical exam** to assess current health and identify any concerns.
- **Order blood and urine tests** to assess how your body is functioning and identify problems.

How are eating disorders treated?

Intermountain uses a team-based approach to treatment. Different team members treat the various aspects of an eating disorder (**see the table below**). The care team works to treat the physical, emotional, and nutritional aspects of eating disorders. Each care plan is tailored to the needs of the patient.

You are the most important member of the team.

The more you follow your care plan, the better the outcomes.

Your family members (parents, spouses, siblings, and others) can provide critical support and participate in appointments with the care team when needed.

Care Team Roles			
Doctor	Mental health specialist	Registered dietitian nutritionist (RDN)	Care manager
<ul style="list-style-type: none"> • Monitors overall health. • Treats medical conditions. • Prescribes medicine as needed. Although there is no medicine to cure an eating disorder, the doctor can prescribe medicines that treat health problems resulting from the eating disorder. Medicine may also ease symptoms of other related conditions. 	<p>The therapist or psychologist counsels on:</p> <ul style="list-style-type: none"> • Emotional issues. With eating disorders, feelings tend to drive eating behaviors. • Life events. Current events and past traumas can contribute to eating disorder behaviors. • Other behavioral disorders. Depression, anxiety, or obsessive-compulsive disorder can cause eating disorders or make them worse. 	<ul style="list-style-type: none"> • Provides information about a healthy diet. • Constructs a plan for healthy eating and exercise patterns. • Addresses nutrition concerns and physical needs. • Addresses thoughts and behaviors around eating. 	<ul style="list-style-type: none"> • Helps coordinate and support treatment. • Connects the patient to resources.

Where can I learn more?

Websites

- Intermountain Healthcare patient information: IntermountainHealthcare.org
- The National Eating Disorders Association (NEDA) advocates on behalf of and supports individuals and families affected by eating disorders: NationalEatingDisorders.org
- Eating Disorders booklet provided by the National Institute of Mental Health: nimh.nih.gov/health/publications/eating-disorders/index.shtml
- Support programs provided by the National Alliance on Mental Illness (NAMI): nami.org/Learn-More/Mental-Health-Conditions/Eating-Disorders/Support
- Video series from the National Institute of Mental Health entitled, *9 Eating Disorders Myths Busted*: nimh.nih.gov/news/science-news/2014/9-eating-disorders-myths-busted.shtml

Books

- *Wasted: A Memoir of Anorexia and Bulimia*, by Marya Hornbacher
- *Life Without ED: How One Woman Declared Independence from Her Eating Disorder and How You Can Too*, by Jenni Schaefer and Thom Rutledge
- *Reviving Ophelia: Saving the Selves of Adolescent Girls*, by Mary Pipher
- *Addiction to Perfection: The Still Unravished Bride*, by Marion Woodman
- *Intuitive Eating: A Revolutionary Program that Works*, by Evelyn Tribole and Elyse Resch
- *Eating Mindfully: How to End Mindless Eating and Enjoy a Balanced Relationship with Food*, by Susan Albers, PsyD
- *The Food & Feelings Workbook: A Full Course Meal on Emotional Health*, by Karen Koenig



Questions for my doctor

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