Understanding Eating Disorders

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Fretting over weight is common, but for some people, that concern can become an obsession. In a society dominated by commercial images of lean, toned and beautiful people, disordered eating habits are too easy to learn.

Have you ever noticed a friend, classmate or teammate who has lost too much weight or seems skinnier than a healthy person should be? Are a friend’s eating patterns starting to worry you? How do you know when you or someone else has a problem?

Understanding Eating Disorders

Eating disorders are more common in women than men. Someone is said to have an eating disorder when she cannot control certain eating patterns. The behavior changes often go hand in hand with a need for control, a poor body image, or an obsession with weight or food.

Two major types of eating disorders are anorexia nervosa and bulimia nervosa. Common features in all eating disorders include:

- A distorted body image — thinking you’re overweight when you are normal or thin
- An obsession with weight, food or exercise
- Fear of gaining weight

When I was in high school, eating disorders were not well-recognized. Today, high school students are much more attuned to the issues. It wasn't until college and medical school that I noticed a few women clearly develop eating disorders and compulsive exercise behavior. Already seeing myself as a physician-healer, I felt the need to reach out. I had the urge to run up to the person, bring her to a mirror and ask, "What are you doing to yourself? Let me help you to see this."

This illustrates a central fact of the disorder: People with anorexia nervosa do not see themselves as others see them. They have a distorted body image. The person looks in the mirror and sees someone who is overweight, even when she is undernourished.

Women with anorexia nervosa starve themselves because they cannot see the reality of their bodies' thinness. Fear of gaining weight drives their behavior, so they refuse to eat or maintain their weight. Even when they confront physical problems due to significant weight loss, they continue to deprive themselves of food. These problems can include halting of menstrual periods (not uncommon in women who lose more than 15% of their ideal body weight); unhealthy changes to skin, hair and nails; and heart malfunction. Ten percent of people with anorexia nervosa will die from the disease.

In addition to dieting, women with anorexia nervosa may turn to binging and purging, obsessive exercise regimens, laxatives and diuretic medications or enemas to lose weight.
Bulimia nervosa is less visible because people with the disorder tend to be of normal weight, or even overweight. The person’s behaviors tip you off to a problem. Binge eating is one part of the problem, along with feeling a lack of control over the binge. The fear of gaining weight leads a person with bulimia to compensate for the caloric intake by vomiting, taking laxatives, and exercising obsessively.

No Easy Cure

Diagnosis is only the first hurdle, even when a woman understands that she has a problem and needs treatment. Even if she understands that her behavior is bad for her health or is already engaged in a treatment program, she may be unable to change her behavior. In fact, many people with eating disorders become good at hiding their illness, while convincing people that they are trying to change.

Why is it so hard to change behaviors? For many people, the underlying reason for their eating and/or purging behaviors is the need to feel in control of their bodies. In some cases that begins in early adolescence, a girl loses weight or starves herself to the point of stopping her periods as a way to halt the changes that herald becoming a woman.

But ultimately there are many causes of eating disorders, combining a genetic vulnerability with environmental stresses. Sometimes it is a variation of depression or anxiety. It may be a response to the pressures of growing up. Exposure to cultural influences from television and film may prompt the symptoms. Or it may be a way to cope with family tensions.

If a friend seems to be suffering with an eating disorder, it's important to encourage the person to take control of her life by getting help. However, make sure she gets trained help – approach a resident counselor in a dorm, a teacher, a coach or your friend’s parents. Don’t try to handle a person with an eating disorder by yourself.

Determining Whether You Might Have A Problem

Several screening tools have been tested for eating disorders. None are perfect, but together, the following questions can help to alert you to a problem or potential problem:

1. Are you terrified of being overweight?
2. Have you gone on eating binges where you felt unable to stop?
3. Do you ever eat in secret?
4. Do you feel extremely guilty after eating?
5. Do you vomit or have the impulse to vomit after meals?
6. Have you ever used laxatives, diuretics or enemas to lose weight or compensate for overeating?
7. Do you feel that food controls your life?

If you answer yes to any of these questions, you should talk to a counselor, a close friend, a parent or your doctor to find out whether you might have disordered eating behaviors or even an eating disorder. Disordered eating behaviors and exercise patterns are more common than eating disorders themselves and puts you at risk of developing an eating disorder. It's a good idea to pay attention to what you eat and how much exercise you get, but sometimes this becomes an obsessive preoccupation rather than a comfortable part of life. If you notice these patterns, you may want to talk to your doctor or a mental health professional to deal with the problem before it becomes harder to control. Ultimately, diet and exercise should enhance your health. Your looks and image should follow naturally and with less distress.

In summary, when you see someone in need of help, before you act, remember that people with eating disorders often:

- Have a distorted body image
• Cannot easily change their behavior without help
• Have a variety of biological factors and environmental stresses leading to their problem
• Need the help of a counselor, teacher, coach, trainer, parent or physician

For more information:
National Eating Disorders Screening Program

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