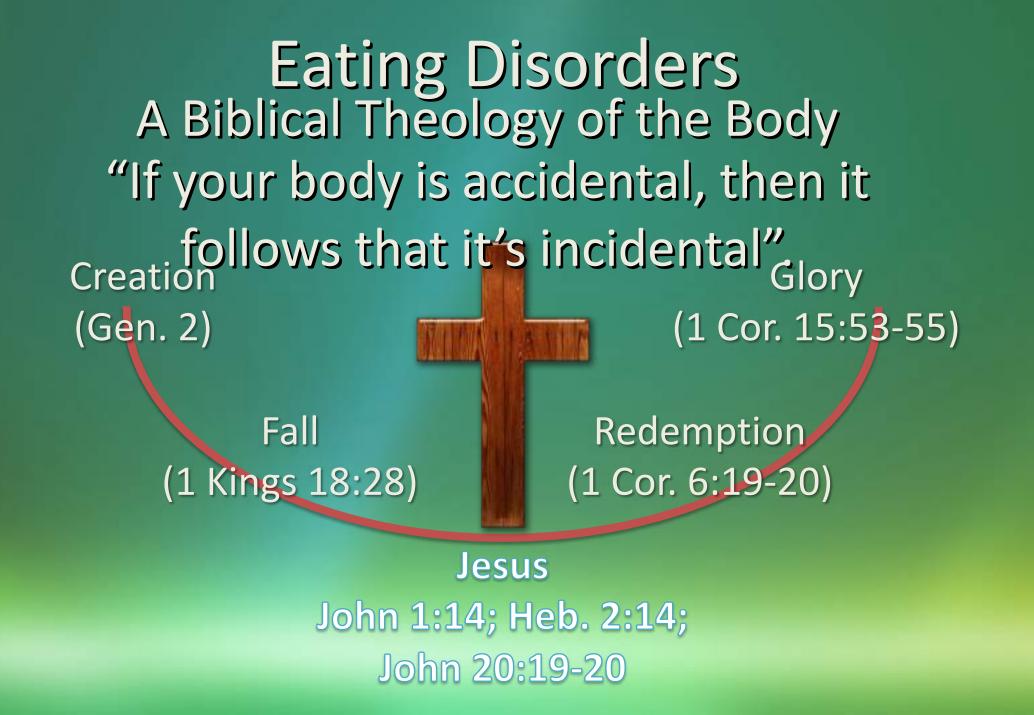
Eating Disorders



Eating Disorders Warning Signs Weight loss: extreme thinness or loss of 15 or more

- <u>Weight loss</u>: extreme thinness or loss of 15 or more lbs. in 2-3 months, is exhilarated by weight loss
- Intense fear of being overweight: preoccupied with thinness, wants to be thinner than peers, complains of being overweight when not, obsessed with clothing size, scales, and mirrors
- Preoccupation with dieting & food: uses diet products, talks constantly about food, calories, fat grams, reads a lot about nutrition, dieting, and exercise

•Eating little: skips meals, eats very little, is finicky about food, appears to eat when not e.g., pushes food around on a plate but mostly does not eat it •Unusual eating habits: eats one thing at a time, eats the same thing every day, cuts food into tiny pieces, fears touching certain foods, sudden vegetarianism, refuses to eat with others

•Bathroom breaks: disappears into the bathroom during or after meals—may suggest vomiting to purge calories Taking up smoking: especially for someone who would not be expected to smoke Caffeine use: excessive drinking of diet caffeinated beverages or regular coffee without sugar Evidence of binge-eating: A lot of empty food packages may suggest bingeing

- <u>Empty laxative packages</u>: herbal or otherwise, may suggest purging
- <u>Onset of hyperactivity</u>: constantly fidgets, lots of exercise
- Loss of menstrual period: irregular, minimal, or absent menses
- Intolerance of cold: shivering, blue skin or fingers
- <u>Baggy or full-covering clothes</u>: wears baggy clothes or long sleeves, pants, and coats during summer months—used to hide excessive thinness, may indicate body image problems

- <u>Skin & hair problems</u>: pasty-looking skin, very thin and dry hair, hair loss, and fine hair growth on the face and arms like a baby—all indicate malnourishment
- <u>Swollen salivary glands</u>: distended, "chipmunk cheeks"
- Broken blood vessels in the eyes
- <u>Change in mood</u>: anxiety, depression, irritability, increased obsessions and compulsions

- <u>Social withdrawal</u>: isolates from peers and family; unwilling to eat with other people
- <u>Perfectionism & low self-esteem</u>: expects too much of self and sees self as not good enough

• Anorexia is an extremely dangerous illness with a shockingly high mortality rate. A person with anorexia starves herself to dangerously thin levels, at least 15% below what would be considered normal body weight. Although men can and do struggle with anorexia, it is far more prevalent in women. Because the body needs food to function correctly, starving takes a significant toll on a woman's health. The medical impact of anorexia is huge and includes:

<u>Amenorrhea - Loss of Menstrual Cycle</u>

This occurs in nearly all women with anorexia. The body simply shuts down its reproductive capacity because it is finding it difficult to sustain one life, let alone, two. Although a woman's ability to bare children usually returns once sufficient weight is gained, that is not always the case. Anorexia, if engaged in long enough or at a critical time during adolescence, can contribute to infertility.

•Anemia

Without sufficient nutrition, the blood is affected and anemia results. Fortunately, this condition is only temporary; blood health returns once food is reintroduced.

Dry Skin and Hair Loss

Dehydration causes the skin to drastically dry out and become flaky. The woman's scalp, starved for protein and nutrients, often becomes bald or patchy. Paradoxically, extremely fine hair growth often occurs on other parts of the torso; this is an attempt by the body to keep itself warm.

<u>Feeling Cold</u>

Without protective fat stores to keep them warm, those with anorexia are usually cold. In fact, their body temperature is rarely at a healthy 98 degrees; it's typically a couple of degrees less that normal.

• <u>Slowness of Thought/Brain Shrinkage</u>

Although retardation of thought is temporary, due to lack of fuel to keep the brain functioning well, actual brain shrinkage, due to prolonged starvation, is not. Studies show a drop in actual IQ, which does not always return once the woman gets well

• Osteopenia/Osteoporosis

These degenerative bone conditions result from lack of calcium and other dietary deficiencies. Most bone loss is permanent, leaving even young women at severe risk of bone fractures and spinal curvature.

Heart Rhythm Abnormalities, Heart Attacks

Electrolyte abnormalities often trigger arrhythmias in the heart. This is a significant indication that the heart is undergoing stress. When a body is starving, it starts attacking its own muscle tissue in an effort to stay alive. The heart is a muscle and is not immune to this attack. In the case of extreme starvation, the heart simply stops.

Eating Disorders Bulimia - Health Problems • Injury to the esophagus

Repeated vomiting causes Acid and bile from the stomach to irritate and inflame the lining of the esophagus causing a condition known as esophagitis. This is sometimes severe enough to cause scarring and narrowing. In fact, this passageway may become so narrow that food may no longer be able to pass through. Vomiting can also cause tears in the lining of the esophagus. These tears may bleed a great deal or cause the esophagus to actually rupture. This lifethreatening condition requires immediate surgery.

Injury to the stomach

Binge eating and frequent vomiting commonly causes gastritis, an inflammation of the stomach lining.

• Injury to the intestines

Laxative abuse is harmful in several ways: it upsets the body's mineral balance; it leads to dehydration; it damages the lining of the digestive tract; and it burns out the colon. This damage to the muscle and nerves often causes severe constipation.

Lung damage

Self-induced vomiting often leads to aspiration of food particles, gastric acid, and bacteria from the stomach into the lungs. This can result in pneumonia.

Severe Kidney and heart complications

Fasting, vomiting and other forms of purging result in loss of fluid and crucial minerals from the body. Chronic dehydration and low potassium levels can lead to kidney stones and even kidney failure. Frequent vomiting leads to high alkali levels in the blood and body tissues. This may cause weakness, constipation and fatigue. Severe alkalosis and potassium deficiency can lead to an uneven heart rate or sudden death.

Injury to the skin and teeth

Most over-the-counter laxatives contain phenolphthalein, which may cause sores and brown or gray spots on the skin. Chronic vomiting increases the acidity of the mouth and results in erosion of the teeth's' enamel and dentin.

Eating Disorders Causes

Personality

Highly motivated, disciplined, Type "A" personalities. On the outside they may be perfectionist, and highly functioning, but inside they are dealing with low-self esteem, feelings of helplessness and a fear of becoming fat. Eating disorders become a means of control over stress and anxieties.

Eating Disorders Causes

<u>Genetic Factors</u>

Eating disorder appear to run in families. This may suggest that genetic factors may predispose some people to eating disorder.

• Environmental Factors

Pressure from society and expectations from family and friends may lead towards a development of eating disorders

Eating Disorders Causes

<u>Spiritual Causes</u>

Trying to find life and meaning outside of Christ and God. Significance is found from external acceptance rather than internal realities in a relationship with Christ.

- Knowledge and Early Treatment
 Know the warning signs of someone that may be dealing with an eating disorder. Eating disorders are most successfully treated when diagnosed early. If you suspect something...ASK!
- Involve Family and/or Close Friends
 Family members will be key with immediate care, follow-up and continual treatment for the client.

Physical Examination

A full examination is needed to rule out any other illnesses and properly assess the problems associated with the eating disorder. If client is in immediate medical danger, hospitalization may be in order.

Treatment Team

A variety of experts and approaches should be included in a holistic treatment of the eating disorder. Physician, nutritionist, counseling, psychiatrist, etc.

• Spiritual Care

A deeper dependence on Christ is needed for dealing with anxiety and how they view themselves. Expose the lies (Jeremiah 2:13), and seek Christ and His kingdom (Matt. 6:31-33)

Family Counseling

Dealing with some of the expectations and attitudes within the family may be key in developing long-term care for those struggling with eating disorders