

HEALTH IN OUR HANDS!

The Arkansas State University Wellness Program Newsletter
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Eating Disorder Awareness

Introduction

“Eating Disorder” encompasses any irregular eating, severe distress or concern about body weight or shape. The National Eating Disorders Association brings to light the issue of Eating disorders during the week of February 26th – March 4th. Their goal is to provide screening and other resources for the individuals and families in need, in hopes of saving a life. This year’s theme is, “It’s Time to Talk About It.” As future health care providers, it is of utmost importance that we can recognize the signs of an eating disorder, so let’s talk about it!

Eating disorders affect ALL kinds of people, regardless of gender, ethnicity, age, socioeconomic status, sexuality, or background. While developing an eating disorder is most common in the teen years or young adulthood, they can develop during any stage of life. Eating disorders commonly coexist with other conditions, such as anxiety disorders, substance abuse, or depression. 30 million Americans will struggle with an eating disorder at some point in their lives!

Anorexia Nervosa

Facts:

- 90-95% are female.
- 0.5-1% of American women suffer from Anorexia.
- Between 5-20% of individuals struggling with Anorexia will die.
- One of the highest death rates of any mental health condition.

Signs/symptoms:

- Inadequate food intake, leading to low bodyweight.
- Preoccupied with weight, calories, fat grams, and dieting.
- Refusal to eat certain foods.
- Frequent comments about feeling “fat” despite weight loss.
- Denial of hunger.
- Food rituals (eating food in certain orders, excessive chewing, etc.).
- Excuses to avoid mealtimes or situations involving food.
- Excessive exercise.

Health Consequences:

- Low blood pressure, slow breathing, and pulse.
- Drop in internal body temperature, resulting in the patient feeling cold.
- Reduction of bone density.

- Muscle loss and weakness.
- Severe dehydration, which can lead to kidney failure.
- Fatigue and fainting.
- Brittle hair, skin, and nails.
- Growth of fine hair all over body (lanugo).
- Develop amenorrhea (abnormal absence of menstruation) and infertility.
- Hypothyroidism.

Bulimia Nervosa

Facts:

- About 80% of patients are female.
- Affects 1-2% of adolescent and young adult women.
- Patients will usually appear to be of average body weight.

Signs/symptoms:

- Consuming large amounts of food followed by behaviors to prevent weight gain, such as self-induced vomiting.
- Swollen salivary glands in the neck/jaw region.
- “Russel’s sign”- calluses on the knuckles or back of the hand due to repeated self-induced vomiting.
- Frequent trips to the bathroom following meals, smells of vomiting,

packages of laxatives or diuretics.

- Staining of teeth.

Health Consequences:

- Electrolyte imbalances that can lead to irregular heartbeats, heart failure, and death.
- Inflammation and possible rupture of esophagus from frequent vomiting.
- Tooth decay and staining from stomach acids released during vomiting.
- Acid reflux disorder.
- Irregular bowel movements/constipation from laxative abuse.

Binge Eating Disorder

Facts:

- Body weight varies from normal to mild, moderate, or severe obesity.
- Most common eating disorder in the United States, affecting 1-5% of the population.
- About 60% of individuals struggling with binge eating are female; 40% are male.

Signs/symptoms:

- Eating unusually large amounts of food in a specific amount of time.
- Eating in the absence of hunger to the point of being uncomfortably full, but does not purge.
- Eating in private.
- A sense of lack of control.
- Feeling distressed, ashamed, or guilty about eating.
- Can involve extreme restriction and rigidity with food and sporadic dieting/fasting.

Health Consequences:

- High blood pressure and cholesterol levels.

- Heart and gallbladder disease.
- Type II diabetes.

Additional Eating Disorders:

- **Night eating syndrome**-excessive nighttime food consumption.
- **Pica**- persistent eating, over a period of at least one month, of substances with no nutritional value.
- **Avoidant/Restrictive Food Intake Disorder**- failure to consume adequate amounts of food, with serious nutritional consequences, but without the physiological characteristics of Anorexia.
- **Rumination Disorder**-regurgitating food that has already been swallowed and spitting it out.
- **Laxative Abuse**- attempting to get rid of unwanted calories/weight through frequent use of laxatives.

Treatment and Recovery

The first step is to find a health professional the patient trusts to oversee their care.

The most successful treatment includes psychotherapy, counseling, and careful attention to medical and nutrition needs. Support groups and psychiatric medications administered under medical supervision have also proven helpful. Inpatient care may be necessary when the eating disorder has become life threatening or when severe psychological or behavior problems are present.

References:

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Other News:

**If you have any suggestions for newsletter topics, please contact Dean Susan Hanrahan at hanrahan@astate.edu.

The Arkansas State University Employee Wellness Newsletter is published monthly during the academic year by the College of Nursing and Health Professions. Health questions can be addressed to Dean Susan Hanrahan, Ph.D., ext. 3112 or hanrahan@astate.edu. Produced by Karinda Polk, graduate student in the College of Nursing and Health Professions, Physical Therapy Program.