



Eating disorders

Parenting SA
Parent Easy Guide **70**

The words 'eating disorder' have been given a lot of attention in recent years so it is not uncommon for parents to wonder if there is something wrong when they see a change in the behaviour or eating pattern of their child.

Teenagers often eat differently from the rest of the family or change the eating habits that they had in childhood. This may be just part of this stage in their life and nothing more. However, for some young people it can be a sign of something more serious. If you have some information about eating disorders you may have a better chance to help your child or to stop worrying unnecessarily.

*This PEG uses 'he' and 'she' in turn.
Change to suit your child's sex.*

What is an eating disorder?

An eating disorder is a serious emotional problem that can lead to serious physical problems. People with eating disorders become obsessed with their bodies, food and how much they weigh. Eating disorders can affect males and females but mainly affects girls and women between the ages of 14-30 years. It usually begins in the teenage years. People with eating disorders believe that life will get better and they will become better people by gaining absolute control over their food intake and body size.

Anorexia nervosa and bulimia nervosa are two of the best known and most serious eating disorders.

Anorexia nervosa

People with anorexia nervosa are often depressed. They choose not to eat despite their hunger and their very thin appearance. They often 'feel fat' even though they may actually be underweight. They may be thinking of food most of the time but they will not eat because for them eating normally would lead to terrifying weight gain. The fear of becoming fat can override any sense of hunger so they don't know when they are hungry, or they deny their hunger pain. They limit their food intake, are very choosy and may not eat many foods. Many also over exercise to lose weight, or work towards keeping a very low body weight. Not all those with anorexia nervosa are thin all the time. Their weight may vary but the anorexic thinking pattern may stay the same.

Sometimes anorexia nervosa begins with a weight loss after a physical illness or from dieting.

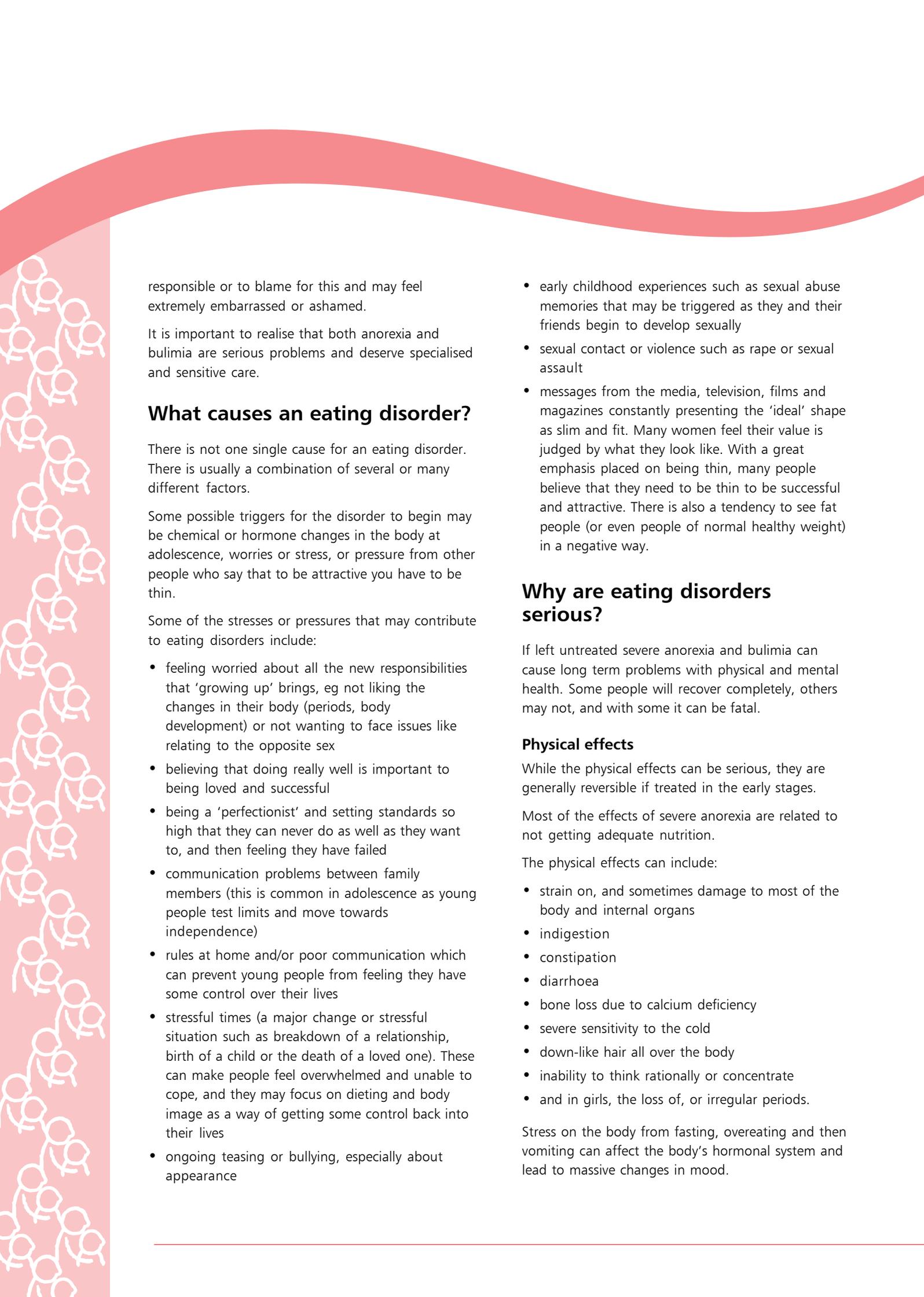
Bulimia nervosa

People with bulimia nervosa often have normal body weight or may be slightly overweight. This is another serious eating disorder where the sufferer has a similar fear of being overweight. The person gets caught up in a binge, purge, fast cycle.

- Binge eating is uncontrolled eating of vast amounts of food, usually in a short space of time and is usually done in secret.
- Purging is a way of getting rid of the food eaten in a binge. The most common way to purge is to make yourself vomit. Other ways of purging include laxatives, diet pills, over exercising and going without food.

The binge, purge, fast cycle is a hard pattern to break. People often binge to get rid of feelings they cannot manage, but this usually leads to more difficult feelings of guilt and gaining weight. They may then purge to get rid of these feelings at first and they may experience some relief from purging, but the guilt and self-hatred returns along with a feeling of being out of control. In an attempt to gain control and to feel better, they fast or don't eat much but then the hunger leaves them more likely to start the cycle over again.

This can happen many times a day leaving people feeling depressed, sometimes suicidal, disgusted at themselves, withdrawn and having a belief that they are not able to control their behaviour. They often feel



responsible or to blame for this and may feel extremely embarrassed or ashamed.

It is important to realise that both anorexia and bulimia are serious problems and deserve specialised and sensitive care.

What causes an eating disorder?

There is not one single cause for an eating disorder. There is usually a combination of several or many different factors.

Some possible triggers for the disorder to begin may be chemical or hormone changes in the body at adolescence, worries or stress, or pressure from other people who say that to be attractive you have to be thin.

Some of the stresses or pressures that may contribute to eating disorders include:

- feeling worried about all the new responsibilities that 'growing up' brings, eg not liking the changes in their body (periods, body development) or not wanting to face issues like relating to the opposite sex
- believing that doing really well is important to being loved and successful
- being a 'perfectionist' and setting standards so high that they can never do as well as they want to, and then feeling they have failed
- communication problems between family members (this is common in adolescence as young people test limits and move towards independence)
- rules at home and/or poor communication which can prevent young people from feeling they have some control over their lives
- stressful times (a major change or stressful situation such as breakdown of a relationship, birth of a child or the death of a loved one). These can make people feel overwhelmed and unable to cope, and they may focus on dieting and body image as a way of getting some control back into their lives
- ongoing teasing or bullying, especially about appearance

- early childhood experiences such as sexual abuse memories that may be triggered as they and their friends begin to develop sexually
- sexual contact or violence such as rape or sexual assault
- messages from the media, television, films and magazines constantly presenting the 'ideal' shape as slim and fit. Many women feel their value is judged by what they look like. With a great emphasis placed on being thin, many people believe that they need to be thin to be successful and attractive. There is also a tendency to see fat people (or even people of normal healthy weight) in a negative way.

Why are eating disorders serious?

If left untreated severe anorexia and bulimia can cause long term problems with physical and mental health. Some people will recover completely, others may not, and with some it can be fatal.

Physical effects

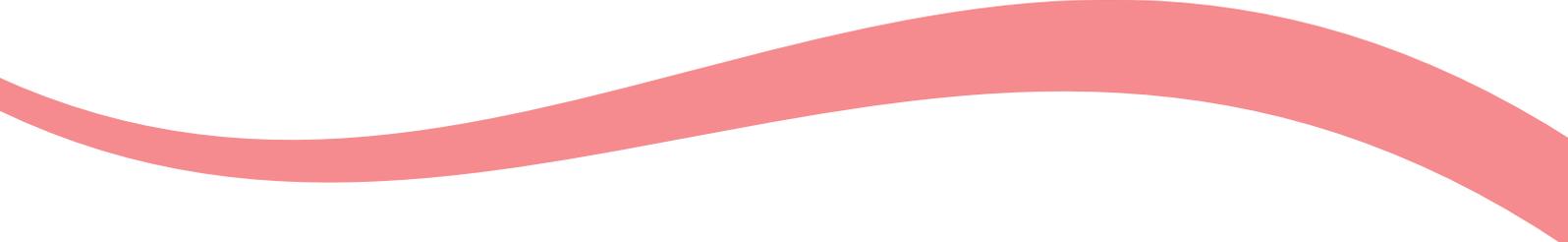
While the physical effects can be serious, they are generally reversible if treated in the early stages.

Most of the effects of severe anorexia are related to not getting adequate nutrition.

The physical effects can include:

- strain on, and sometimes damage to most of the body and internal organs
- indigestion
- constipation
- diarrhoea
- bone loss due to calcium deficiency
- severe sensitivity to the cold
- down-like hair all over the body
- inability to think rationally or concentrate
- and in girls, the loss of, or irregular periods.

Stress on the body from fasting, overeating and then vomiting can affect the body's hormonal system and lead to massive changes in mood.



Severe bulimia is likely to cause erosion of the enamel on teeth from vomiting, swollen salivary glands, chronic sore throat and gullet, and the possibility of damage to the throat and stomach.

It is important to be aware that extreme episodes of binge eating can in rare cases result in a bursting (rupture) of the stomach or oesophagus. This condition is a medical emergency and urgent treatment should be sought.

Emotional and social effects

These are likely to include:

- difficulties with activities which involve food, eg not wanting to eat with others
- loneliness and withdrawal from friends
- deceptive behaviours relating to food
- fear of disapproval of others should the illness become known, mixed with the hope that family and friends might step in and give help
- mood swings, changes in personality, emotional outbursts or depression
- inability to work, study or attend school due to depression, lack of stamina and inability to concentrate.

Signs of eating disorders

Some people might have unusual eating habits but they are not really extreme. Others can have eating disorder symptoms that don't fit into either anorexia nervosa or bulimia nervosa. For example, some people with anorexia do know how thin they really are but still want to be thinner. Some people make themselves vomit but they don't binge first. Some may not stop eating, but may restrict the amount they eat or have special rituals or very unusual behaviours around food.

Eating disorders can show up in what people do, but the underlying emotional stresses are not always easy to see.

These signs can have other causes besides an eating disorder but be aware of:

- weight loss, failure to gain weight when growing, or fluctuating weight
- tiredness, lack of energy and strength
- depression or low self-worth
- obsession with, and/or playing with food
- being very selective about what to eat

- obsession with body weight or shape
- a preoccupation with the preparation of food for others to eat
- thinking or talking about food all the time
- over-exercising and being worried if they are not able to exercise
- avoiding eating with other people
- secrecy around food
- regularly going to the toilet after eating or during meals
- hoarding food
- fear of losing control of eating
- irritability and mood swings
- avoiding friends and family
- appearing anxious or stressed at meal times about food and amounts of food
- menstruation (periods) stopping or not starting
- lack of balance in a young person's life, eg not stopping exercise (despite injuries).

What parents can do

- If you pick up a number of signs and are worried, seek help early, even if your child resists – they rarely seek help themselves.
 - Gently speak with your child, using open-ended questions, eg *"You seem to be really finding things hard, what's happening for you?"* rather than *"Why aren't you eating?"*
 - Choose a good time to ask your child how she's going and what is happening in her life.
 - Try not to focus too much on food and weight. Although the person who has an eating disorder is totally focused on eating and weight, it is important to realise that this is not the main problem. The obsession with food takes up all their thinking and helps them block out other things, such as how bad they feel about themselves and their lives. Not eating then causes other problems that then become the major worry.
 - Give praise and encouragement for small achievements as well as large ones.
 - Do what you can to build your child's self-esteem.
 - Don't let the eating disorder dominate your relationship with your child. Make sure you see all the good things about her as well.
-

- Tell your child honestly that you love and care for her.
- Seek advice from specialists who understand this illness and can make an assessment and help advise the best things to do.
- Consider making contact with your child's school once diagnosed so they can help support your child.
- Be careful to avoid commenting on other people's appearances (young people are particularly sensitive to comments from others).
- Find support for yourself.
- If your child is uncooperative, still seek advice and support.
- Be patient – it can be difficult for your child who may not understand the problem herself.

What help is available?

Noticing and responding to early warning signs and consulting a doctor is the most important thing to do first. No one wants to believe their child has a serious problem like an eating disorder but getting help early is the beginning of possibly breaking the cycle.

Once the illness has been diagnosed a range of health professionals may play a role in helping your child to recover. They may be doctors, nurses, psychiatrists, psychologists, dietitians, social workers, occupational therapists and dentists.

Sometimes it may be necessary for a young person who is severely malnourished because of anorexia to spend some time in hospital. Outpatient treatment is generally preferred for those with bulimia.

Treatment may include counselling, and sometimes medication to help severe depression or to correct hormonal and chemical imbalances.

Dieticians who are trained in helping young people with eating disorders can help guide new healthy eating habits.

Reminders

- **An eating disorder is a serious problem which can lead to death if untreated.**
- **Responding to early warning signs and getting early treatment is one of the most important things you can do.**
- **Changes in eating behaviour can be caused by a number of illnesses so a physical assessment first is a good idea.**
- **There is specialised help around. Help is aimed at recovery and not blaming any one.**
- **Remember you can seek advice even if your child is not ready to speak to someone.**
- **Try not to panic - if people receive good assistance, recovery rates are high.**
- **It will require much commitment, motivation and hard work.**
- **Be patient . . . change does not happen quickly.**

Want more information?

Your local doctor

The Weight Disorder Unit at Flinders Medical Centre -
- telephone (08) 8204 5237

Eating Disorders Association of SA (EDASA)
- telephone (08) 8332 3466
- www.edasa.org.au

Flinders University Psychology Clinic for assessment and treatment of bulimia nervosa - telephone (08) 8201 2416

Blackwood District Hospital (Food Without Fear) -
- telephone (08) 8278 0400

Youth Healthline - telephone 1300 13 17 19

Parenting SA - www.parenting.sa.gov.au

(parenting and child health information) - www.cyh.com

See other Parent Easy Guides (PEGs):

- Living with teens
- Teenagers and food
- Discipline (for teens)
- Teenage depression
- Talking sex with teens

Acknowledgement

National Mental Health Strategy

Written in Partnership

Eating Disorders Association of SA (EDASA)
Weight Disorder Unit, Flinders Medical Centre
Parenting SA
Centre for Parenting

Produced by

Parenting SA - telephone (08) 8303 1660
© Copyright
Revised 0606

Parent Easy Guides are free in South Australia

Parent Helpline
1300 364 100



Government of South Australia

Children, Youth and Women's
Health Service