



# Eating Disorder Treatment

A Recovery Perspective

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Treatment Center

# What is an Eating Disorder?

Eating disorders refer to a group of conditions defined by abnormal eating habits that may involve either insufficient or excessive food intake to the detriment of an individual's physical and mental health.

(Wikipedia, 2011)



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# Types of Eating Disorders

## **Anorexia Nervosa**

Individual refuses to maintain a minimally normal body weight, is intensely afraid of gaining weight, and exhibits a significant disturbance in the perception of the shape or size of his/her body.

## **Bulimia Nervosa**

Binge eating and inappropriate compensatory methods to prevent weight gain, such as laxatives, purging, excessive exercise.

## **Binge Eating (compulsive overeating)**

Uncontrolled eating or bingeing followed by periods of guilt and depression.



# Warning Signs for Anorexia

- Individual is thin and continues to lose weight.
- Continuing to restrict foods or diet, despite not being overweight.
- Distorted body image – feels fat even though looks thin.
- Preoccupied with food, calories, nutrition, or cooking.
- Denies hunger.
- Exercises obsessively.
- Weighs self frequently.
- Thinning or loss of hair.
- Stops menstruating.

# Warning Signs for Bulimia

- Engages in binge eating and cannot voluntarily stop.
- Uses the bathroom frequently after meals.
- Reacts to emotional stress by overeating.
- Menstrual irregularities.
- Swollen glands.
- Experiences frequent fluctuations in weight.
- Obsessively concerned about weight.
- Feels guilty or ashamed about eating.
- Feels out of control.
- Depressive moods.
- Cannot voluntarily stop eating.

# Warning signs for Binge Eating Disorder

- Eats large amounts of food when not physically hungry.
- Eats much more rapidly than normal.
- Eats until the point of feeling uncomfortably full.
- Often eats alone because of shame or embarrassment.
- Feelings of depression, disgust, or guilt after eating.
- History of marked weight fluctuations.
- Hoarding of food.

# Medical Issues Associated with Eating Disorders

## Anorexia

- Gradual or abrupt weight loss that cannot be explained by any other medical condition.
- Irregular menstrual periods or amenorrhea (absence of period).
- Pale complexion.
- Discolored skin and nails.
- Hair loss.
- Dull eyes.
- Frequently dizzy; fainting spells.
- Prone to injury; brittle bones.
- Frequently tired and fatigued.

# Medical Issues Associated with Eating Disorders

## Bulimia

- Frequent shift in weight, between 5-10 lbs, that cannot be explained by any other medical condition.
- Irregular menstrual periods or none at all.
- Brittle nails and hair; dull eyes.
- May vomit blood; prone to stomach aches.
- Chronic sore throat.
- Re-occurring headaches.
- Frequently tired and feel rundown.
- Heartburn, especially after purging.
- Swollen throat glands.
- Water retention.
- Blood shot eyes.

# Medical Issues Associated with Eating Disorders

## Binge Eating

- High blood pressure.
- Type 2 diabetes.
- Digestive problems.
- Heart disease.
- Joint/muscle pain.
- Headaches.
- Obesity.

# Psychological Issues Associated with Eating Disorders

## Anorexia

- Perfectionist – nothing is ever good enough, including weight.
- People pleaser – never saying “no” because then people may not like you.
- Black and white thinking.
- Low self-esteem and self-worth.
- Feelings of worthlessness after eating a certain amount of calories or gaining weight.
- Depression, mood swings, general irritability.
- Feel that your body is the ONLY thing you can control.
- Scale determines whether it is a “good” or “bad” day.

# Psychological Issues Associated with Eating Disorders

## Bulimia

- All the factors for anorexia, plus...
- Feel that purging your food and your weight are the **ONLY** things you can control.
- Often feel like you don't belong.



# Psychological Issues Associated with Eating Disorders

## Binge Eating

- Stress/tension that is only relieved by eating.
- Embarrassed over the amount of food you've eaten.
- Feeling numb while bingeing – eating on “auto pilot”.
- Never feeling satisfied, regardless of amount of food you've eaten.
- Feelings of guilt, depression, and disgust after eating.

# Behavioral Issues Associated with Eating Disorders

## Anorexia

- Increased isolation and increased focus on counting calories, food, and weight.
- Obsess or express “great interest” in reading recipes, cooking shows, cooking for others, memorizing calorie content in food.
- Wear baggy clothes to mask weight loss or because you are frequently cold.
- Purposely restrict caloric intake to the point that you are hungry the majority of the day.
- Only allow yourself to eat at certain times of day.
- Avoid social gatherings and outings where you know food is involved.
- Exercise compulsively.
- Frequently check weight on scale.

# Behavioral Issues Associated with Eating Disorders

## Bulimia

- Force yourself to purge for any length of time.
- Increased isolation and increased focus on food, calories, and weight.
- Plan out when you can binge and where you can purge.
- Starve or severely restrict your calorie intake during the day and then secretly binge at night.
- Only like to eat alone.
- Avoid social gatherings where food is involved.
- Abuse various pills (laxatives, diuretics).
- Hoard food.
- Exercise compulsively, especially after a binge.
- Frequently check weight on a scale.

# Behavioral Issues Associated with Eating Disorders

## Binge Eating

- Inability to control/stop eating.
- Rapidly eating large amounts of food.
- Continuing to eat, even when full.
- Hiding food to later eat in private.
- Avoiding social gatherings where food will be present.
- Social withdrawal and isolation.

# Myths About Eating Disorders

## Myth – 1

**You have to be underweight to have an eating disorder.**

- People with eating disorders come in all shapes and sizes. Many individuals with eating disorders are of average weight or are overweight.

## Myth – 2

**Only teenage girls and young women are affected by eating disorders.**

- While eating disorders are most common in young women in their teens and early twenties, they are found in men and women of all ages.

## Myth – 3

### **People with eating disorders are vain.**

- It's not vanity that drives people with eating disorders to follow extreme diets and obsess over their bodies, but rather an attempt to deal with feelings of shame, anxiety, low self-esteem and self-worth, and powerlessness.

## Myth – 4

### **Eating disorders aren't really that dangerous.**

- All eating disorders can lead to irreversible and even life-threatening health problems, such as heart disease, bone loss, stunted growth, infertility, and kidney damage.

# How do you talk to someone with an eating disorder?

- Focus on feelings and relationship, not weight and food.
- Express concern about their health while respecting their privacy.
- Avoid commenting on how they look.
- Avoid using terms such as “fat” and “skinny”.
- Avoid power struggles about eating.
- Avoid placing shame, blame, or guilt.
- Avoid giving solutions, or suggesting ways to “fix” them.

# Treatment Eating Disorders

## Psychotherapy

- Individual and group therapy can help with exploring underlying issues contributing to eating disorder.
- Helps to improve self-esteem.
- Helps individual to learn healthy ways of responding to stress and emotional pain.
- Family therapy can be beneficial when family is willing and can actively participate in a healthy way that will be beneficial to the client; addresses the impact the eating disorder has on the entire family unit.



# Treatment Eating Disorders

## Nutritional Counseling

- Dieticians or nutritionists are often involved in the treatment of eating disorders.
- Help client to design meal plans that are healthy, balanced, and realistic.
- Help client to achieve dietary goals, and reach and maintain a healthy weight.
- Provides education about nutrition and the health consequences of eating disorders.

# Treatment Eating Disorders

## Support Groups

- Provides support from other individuals experiencing similar issues.
- Client feels less alone and ashamed.
- Facilitated by peers rather than professionals.
- Provides a safe environment to share experiences, advice, encouragement, and healthy coping strategies to maintain recovery.



# Treatment Eating Disorders

## Residential Treatment

- Residential or hospital-based care may be necessary when client is experiencing severe physical, emotional, and/or behavioral problems as a result of eating disorder.
- Problems may include, but are not limited to: resistance to treatment, medical issues requiring constant monitoring and supervision by a doctor, continued weight loss, suicidal ideation/attempt as a result of emotional impairments experienced.

