

How can family and friends help?

It can be upsetting to witness loved ones putting their health and lives in jeopardy. As a member of the family or as a friend, it is natural to want to help. But unwanted pressure or criticism from others usually makes matters worse. If possible, accept their behaviour instead of confronting them with it. Unless it's a life-threatening situation, try to let the person make his or her own choices and let the person know that unconditional love and support is consistently there. Once the person has recognised the problem, offer to help with practical matters such as finding medical assistance, self-help groups and other resources that may be needed to do battle with the eating disorder.

Is it possible to get over an eating disorder?

Yes. It can be a long and difficult process. Sufferers may need to have psychotherapy for months or years and relapses can occur in times of stress. Approximately 50% of people with anorexia who are treated in hospital continue to have symptoms for many years. An eating disorder is difficult to overcome but with commitment, patience and support it can be done.

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Anorexia Nervosa

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Introduction

Anorexia Nervosa is a condition in which a person has an intense fear of gaining weight and a distorted perception of their weight and body shape. People with this illness believe themselves to be fat even when their weight is so low that their health is in danger. A person with anorexia nervosa severely restricts food intake and usually becomes extremely thin.

Although cases of self-starvation have been known since antiquity, anorexia nervosa has become much more common in modern Western societies as thinness has increasingly become a primary measure of attractiveness.

The disorder is thought to be most common among Caucasian, people of higher socioeconomic classes and people involved in activities where thinness is especially prized, such as dancing, theatre, and distance running. More than 90 percent of cases are diagnosed in females but some experts believe that many cases of anorexia nervosa in males go unreported. The disorder typically begins in the mid - to late teenage years.

Researchers estimate that about 0.5 to 1 percent of young women has anorexia nervosa as it is clinically defined by the American Psychiatric Association. However, many more individuals, perhaps 5 to 10 percent of all young women, have a distorted body image and a preoccupation with becoming thin, though they do not fit all the criteria for a clinical diagnosis of anorexia nervosa.

Behaviours and Psychological Symptoms

People with anorexia nervosa have a preoccupation with food, weight, dieting, and body image. They are dissatisfied with themselves and think that by changing their body to what they see as acceptable to others, they will be more acceptable. Many are so focused on outward appearance that they have little awareness of internal sensations such as hunger and fullness. Anorexics usually undertake strict diets, severely restricting food intake and avoiding certain foods they deem taboo. They may also undergo intense, strenuous exercise regimens and weigh themselves frequently. Despite eating very little, many people with anorexia nervosa become overly involved with food by preparing elaborate meals for others or taking over food shopping or preparation for the family. At meals they may cut their food into tiny pieces, eat very slowly, and dispose of food secretly. About 30 percent of people with anorexia nervosa also develop bulimia nervosa. This is a type of eating disorder in which individuals engage in episodes of binge eating, or consuming large amounts of food in a short period and then purging the food from their bodies by self-induced vomiting or abuse of laxatives.

People who develop anorexia nervosa often share certain personality attributes, such as perfectionism, introversion, low self-esteem, difficulty expressing emotions and a need for control. As the disorder develops they may experience depression, irritability, sleep problems, lack of sexual interest and they may withdraw from friends and family.

Anorexia nervosa is sometimes present with other mental illnesses, particularly depression and anxiety disorder. About 35 percent of people with anorexia nervosa also have obsessive-compulsive disorder. A person with this disorder experiences recurrent, often irrational thoughts or fears and feels compelled to perform certain behaviours over and over. Some evidence suggests that the psychological symptoms of anorexia nervosa, such as obsessive behaviour, preoccupation with food and depression, may actually be an effect of food deprivation. In many cases, however, the depression or another mental illness develops before the diagnosis of anorexia nervosa and some scientists believe these other mental illnesses may make people more vulnerable to developing anorexia nervosa.

People with anorexia nervosa usually deny that they have a problem. They do not see low weight as a health risk or symptom of a psychological problem. They believe that dieting and losing weight is logical because they perceive themselves to be fat. Many feel pride in their ability to adhere to their strict diet. To the outside world, anorexics frequently appear normal. They are often successful in school and other activities and may be perceived as respectful, obedient, helpful and compliant—in short, they are seen as model young people.