

Anorexia Nervosa

A person with anorexia nervosa deliberately loses weight. The weight loss may become severe and life-threatening. Treatment includes 'talking treatments' such as cognitive behavioural therapy, and sometimes medication and self help measures.

What is anorexia nervosa?

Anorexia nervosa (just called anorexia from now on) is an eating disorder. Many people when talking about anorexia think in terms of models and actresses. However, anorexia is a serious illness which affects all sorts of people. Although it is regarded as a fairly recent illness, in fact anorexia has been known about since medieval times. However, it is becoming more common all over the world.

What are the symptoms of anorexia nervosa?

Deliberate weight loss

This is the main symptom. Weight is usually lost by avoiding fattening foods. In addition, some people make themselves vomit, take laxatives or appetite suppressant drugs, use diuretics, or do excessive amounts of exercise, purely to lose weight. People with anorexia typically weigh 15% or more below the expected weight for their age, sex and height.

There are charts that plot weight and height and calculate BMI (body mass index). A normal BMI for an adult is 20-25. Above that you are overweight and below you are underweight. Adults with anorexia have a BMI below 17.5

A wrong idea of body size

People with anorexia think that they are fat when they are thin. This is usually obvious to everyone else apart from the affected person. There is usually severe dread (like a phobia) of gaining weight. People with anorexia will do their utmost to avoid putting on weight.

Other features

It is common for people with anorexia to:

- vomit secretly after eating.
- try hard to hide their thinness and the unusual things they do to lose weight such as self-induced vomiting.
- often wear baggy clothes to hide their thinness.
- tend not to be truthful about how much they eat, and about everything to do with food.
- like food and feel hungry, but it is the consequences of eating that frightens them.

Many people with anorexia refuse to admit they have a problem. They either never get help, or delay getting help for many years. Eventually the thinness is only too obvious to family or friends who often try to persuade affected people to see a doctor. This may be difficult as people with anorexia often feel the need to lose weight even when their health is seriously at risk.

What are the health risks with anorexia nervosa?

Health risks are caused by undereating (starvation) and by the methods used to get rid of eaten food (vomiting, excess laxatives, etc). Problems that may occur include the following.

- Menstrual periods usually stop.
- Body chemical imbalances caused by repeated vomiting or excess use of laxatives. For example, a low potassium level which may cause tiredness, weakness, abnormal heart

rhythms, kidney damage and convulsions. Low calcium levels can lead to tetany (muscle spasms).

- Thinning of the bones (osteoporosis) caused by calcium and vitamin D deficiency. This can lead to easily fractured bones.
- Bowel problems may occur if a lot of laxatives are taken. Laxatives can damage the bowel muscle and nerve endings. This may eventually result in permanent constipation.
- Swelling of hands, feet and face (due to fluid disturbances).
- Teeth problems caused by the acid from the stomach rotting away the enamel with repeated vomiting.
- Anaemia.
- Depression.
- Delayed puberty, stunted growth and delayed physical development if anorexia occurs in younger age groups.
- Loss of sex drive (libido).

Who gets anorexia nervosa?

Anorexia mainly affects women aged 15-25. However, around 1 in 10 cases occur in men. Children as young as 10, and older people, sometimes develop anorexia. Surveys of schoolgirls and female students show that about 1 in 100 have anorexia. It is more common in young women who are modelling, are ballet students, or have similar career aspirations. It is also more common in people from richer or higher income groups.

Anorexia is getting more common throughout the world. It is also being seen more often in cultures where before it had been rare (such as China). Between 1970 and 1980 the number of people with anorexia increased threefold.

What is the cause of anorexia nervosa?

The exact cause is not clear. Part of the cause is a fear of getting fat but it is not just as simple as that. Different causes possibly work together to bring on the illness. These may include the following.

- The pressure from society and the media to be 'thin and beautiful' is thought to play a part. This is probably why anorexia is much more common in westernised countries.
- Personality and family environment probably play a role too. People with anorexia often have poor self-esteem (not much self-confidence) and commonly feel that they have to be perfectionists. Often there are disturbed family relationships. For example, about 3 in 10 people with anorexia will have had some form of sexual abuse in their upbringing. All sorts of emotions, feelings and attitudes may contribute to causing anorexia. Developing anorexia may be a way of dealing with complex emotions.
- There may be some genetic factor. We know this from studies of families with identical twins. If one twin has anorexia then the other has a 1 in 2 chance of getting it. This tells us that it has a tendency to run in some families and that the condition may have a genetic part. However, because not every twin gets it there are other factors too.

What is the outlook (prognosis)?

Studies where people with anorexia have been followed up for a number of years show the following.

- About 4 in 10 fully recover.
- About 3-4 in 10 improve, but continue to have some eating problems, but not 'full blown' anorexia.
- About 2 in 10 continue to have anorexia. Some develop bulimia nervosa instead.
- About 1 in 20 will have died from causes related to anorexia. Causes of death include infections, dehydration, blood chemistry problems (such as low potassium levels) and suicide.

What is the treatment for anorexia nervosa?

The aim of treatment is to:

- reduce risk of harm (and death) which can be caused by anorexia.
- to encourage weight gain and healthy eating.
- to reduce other related symptoms and problems.
- to facilitate recovery to mental and physical well-being.

Most people who see their GP with anorexia will be referred to a specialist mental health team. Members of the team may include psychiatrists, psychologists, nurses, dieticians and other professionals. The sort of treatments that may be offered include the following.

- **Psychological ('talking') treatments** such as cognitive behavioural therapy. Talking treatments help to look at the reasons why a person developed anorexia, aims to change any false beliefs that they may have about their weight and body, and how to identify and deal with emotional issues. Talking treatments take time and usually require regular sessions over several months.
- **Antidepressant medication** may be advised in addition to talking treatments in some situations.
- **Treatment of any physical or teeth problems** that may occur. This may include taking potassium supplements, dental care, and hopefully not using laxatives.
- **Self help measures** may be appropriate for some people. There are a number of self help books and manuals available. These provide strategies on how to cope with and overcome anorexia. (The Eating Disorders Association listed at the end may be able to suggest current titles.) They are not suitable for everyone, particularly if the anorexia is severe.

Is hospital admission needed?

Most people with anorexia are treated as an outpatient. Regular weighing is included during outpatient visits to monitor progress. Hospital admission is needed by some people who become very underweight.

Further help and information

This leaflet is just a brief introduction to anorexia. For further help, information, resources, 'self-help guides' etc, it is best to see your doctor first. The following may also be of help.

Eating Disorders Association

103 Prince of Wales Road, Norwich, NR1 1DW

Tel: 0870 770 3256 Web: www.edauk.com

Offers information and support.

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Comprehensive patient resources are available at www.patient.co.uk