

Eating Disorders

What are Eating Disorders?

Many of us experience difficulties around food at some point in our life. Eating too little and eating too much have likely been problems for as long as there have been people. We all will have done both at some time. You might be reading this because you are worried about a prolonged or developing pattern of concern in your own relationship with food or that of someone in your life.

Eating disorders are generally viewed as an external expression of some internal distress. Focusing on food can be a way of trying to manage distress. It can also be a way of trying to take back control.

Anorexia

The key indicator of anorexia is severe weight loss linked with an intense fear of gaining weight. A person who has anorexia will typically view their weight very differently from how they view the weight of others who are the same size. No matter how thin someone of the same size looks to them, they will view themselves as the one who is overweight. Intense exercise as a way of maintaining and increasing weight loss is also often a feature of the illness. Women will generally find that they stop menstruating.

Anorexia is more prevalent among women than men, but unfortunately, the number of men with anorexia is increasing. There are effective treatment options, and there is every reason to be hopeful that you can overcome it with the right support. However, it is also a condition that can result in premature death, so it is essential to acknowledge it and seek help.

Bulimia

Bulimia may be less obvious to an outside observer as it doesn't necessarily lead to weight loss. If you have bulimia you may maintain your weight. You are also likely to devote a lot of mental energy and attention to your weight and worry about your weight increasing. You will have periods of bingeing followed by purging either through making yourself sick or by using laxatives or diuretics. You may also engage in intense exercise as a way of controlling your weight. These binges may be what Dr. Fairburn in "Overcoming Binge Eating" refers to as either objective or subjective binges. A binge which is objective has a very high calorie consumption over a short period of time. A subjective binge involves eating more than the individual has restricted themselves to, which may be low in calories, but feels like a binge. What objective and subjective binges have in common is a sense of compulsion and a sense of a lack of control.

Binge Eating Disorder

Binge Eating Disorder (BED) is commonly known as compulsive overeating or consuming abnormal amounts of food while feeling unable to stop and at loss of control. Binge eating episodes are typically classified as occurring a minimum of twice per week (on average) for a duration of six months.

What Characterizes Eating Disorders?

Apart from the characteristics described above, there are some other features that you or people in your life may notice:

- Diet and food are occupying a lot of your thoughts and taking up more mental energy than you would like.
- Food becomes a way of managing emotions with binge eating becoming a way of managing difficult emotions.
- You are restricting eating due to a desire for control over at least one aspect of your life.
- You battle with perfectionism in different aspects of your life.

- You have low self-esteem that is then reinforced by the behavior associated with the eating disorder and results in more self-disgust, shame and guilt and a further lowering of self-esteem.
- Your thinking is distorted (e.g. “When I am thin, I will be able to cope with ...”).
- You have secondary disorders caused by the behavior (e.g. dental and digestive system damage, depression).
- Difficulties around eating may be linked to some difficulties in adapting to being adult and to being sexual.

How to Help Yourself

The earlier you seek help, the more likely it is that it will be easier to change. However, people can get over even very serious difficulties in time. Seek medical advice and support from your medical doctor if you need it. Some good key starting points (which may sound obvious or simplistic but can be hard in practice) are:

- Admit to yourself and trusted others that the problem exists.
- Try to develop a compassionate mindset toward yourself and acknowledge that there may be underlying emotional difficulties and experiences that have led you to have difficulties around eating. This is important in reducing the shame we may experience about having these difficulties.
- Try to be clear in your own mind about what you would like to make different in relation to your eating and the patterns you would like to establish. Celebrate any progress toward that, and accept that it won't be a smooth path.
- Try to notice and challenge the distorted thinking. Although you may think of yourself as overweight, at least allow yourself to recognize that others may see you quite differently. Realize that they may be disinterested in your weight and just see you for who you are.
- Develop a pattern of eating that keeps you healthy. Try to maintain some flexibility and variety with the foods you eat.
- Accept and appreciate your body (i.e. respect your body regardless of its current shape or size). Recognize, too, that your body is not the same as your identity—confidence and personal contentment can be present no matter how you look. Look after your body by resting, relaxing, nurturing and connecting with it.
- Don't keep it a secret any longer, and remember that it is unfair to expect a friend to keep secrets for you. Seek support in dealing with the disorder from a professional or a self-help group.

How to Help a Friend You Suspect Has Difficulties with Food

- Remember that your friend is a person first and someone who has difficulty with food second. Continue with whatever activities you would normally engage in together, and don't let issues around food dominate the friendship.
- Be supportive and encourage your friend to seek professional help. Ultimately, the problem is your friend's. If they won't seek help, the consequences will be theirs. Your responsibility is only to encourage them to seek help or in more extreme circumstances to alert others—even against your friend's wishes.
- Don't nag about food, spy on your friend or get drawn into imposing some form of external monitoring or control.
- Be available to listen when your friend can express his/her distress, but don't take on more than you can comfortably cope with. We all have limits—of knowledge, ability to help, understanding, time, etc. Offer the level of support you feel able to sustain. If you try to offer more than that, you are likely to feel burdened and in time, perhaps, annoyed or angry. This is unlikely to help either of you or the friendship.
- Take care of yourself. Maintain your normal range of friendships and balance in your activities. Don't let this one issue take up all your time.
- If you are unsure whether your style of supporting your friend is actually helpful or you have serious concerns, seek out the help of a professional such as a Kelly Center counselor.