



## Commonly Asked Questions: Anorexia Nervosa <sup>1</sup>

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Garret D. Evans, Psy.D., and Samuel F. Sears, Ph.D., and Heidi Radunovich, Ph.D.<sup>2</sup>

### What is It?

Anorexia nervosa is an eating disorder that has been gaining a lot of attention in the last 20 to 25 years. People with anorexia use extreme measures to lose weight. They often become dangerously thin and suffer significant health problems as a result.

Sometimes people confuse anorexia nervosa with bulimia nervosa, or binge eating disorder. While people with anorexia may binge eat from time to time, they tend to exercise, diet, or eliminate food from their system so frequently that their body weight becomes dangerously low. In contrast, people with bulimia usually stay at an average or above average weight for their height despite the fact that they purge after binging on large quantities of food.

### Who Has It?

Approximately 90 percent of the people diagnosed with anorexia are female, although the incidence of anorexia in adolescent males is increasing. Currently, males make up about 20 to 30% of the cases of anorexia among youth. Anorexia is a condition that is seen most commonly in industrialized countries. It rarely is diagnosed in

children before puberty or adults over age 40. In fact, anorexia is diagnosed most commonly in females ages 14 to 18. In the past, this disorder occurred more commonly among Caucasian women, but now it occurs just as frequently among Hispanic women, and the incidence among African-American women is rising.

### What causes Anorexia?

There does not appear to be one specific cause of anorexia, and researchers still are not sure why some people get anorexia while others do not. A combination of many factors, including genetic factors, metabolism, personality issues, coping skills, family functioning, psychological issues, and social factors appear to contribute to the risk for anorexia. People who have a close relative with anorexia have an increased risk of getting the disorder. Young people involved in sports, particularly those in which weight is a consideration, such as gymnastics or wrestling, also are more at risk for developing anorexia.

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  2. Garret D. Evans, Psy.D., associate professor, Clinical Psychology, Department of Family, Youth and Community Sciences, Samuel F. Sears, Ph.D., associate professor, Department of Clinical and Health Psychology, and Heidi Radunovich, Ph.D., assistant professor, Department of Family, Youth and Community Sciences, Cooperative Extension Service, Institute of Food and Agricultural Sciences, University of Florida, Gainesville, 32611.

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## What are the Symptoms?

If you are wondering if someone you know may have anorexia, here are critical characteristics to look for. To be diagnosed with anorexia, a person must display *all* of the following symptoms.

### Extremely Low Body Weight and Related Behaviors

Health practitioners use 85 percent of the expected weight for a person's height and age as a minimum weight standard. These figures usually are taken from the Metropolitan Life Insurance Height and Weight Tables or pediatric growth charts. Those who fall below 85% of their expected weight are showing a symptom of anorexia.

Another characteristic is that people with anorexia typically go to extreme measures in order to lose weight. One sub-group, called the ***Restricting Type***, attempts to lose weight through extreme dieting. When they eat, they typically eat only very low calorie foods. They also may stop eating entirely for extended periods of time. People with anorexia may exercise several times a day to burn off calories.

A second sub-group, the ***Binge-Eating /Purging Type***, also may attempt to lose weight through diet or exercise regimens. However, these people also occasionally eat excessive amounts of high-calorie foods and may attempt to *purge* any food they have eaten. *Purging is defined as trying to eliminate any recently eaten food from the body.* Purging includes such activities as self-induced vomiting, and use of laxatives, enemas, and diuretics (medications that make one urinate). While the person with this subtype of anorexia may binge more than once a week, they continue to succeed in their attempts to lose weight to the point that they become dangerously thin.

### Intense Fear of Gaining Weight or Becoming Fat

Another symptom of anorexia is an extreme fear of gaining weight or becoming fat. While many of us are concerned, or even fearful, about becoming overweight, individuals with anorexia seem to be consumed by this fear. They may weigh themselves several times per day to be sure they have not gained

weight. Ironically, their success in losing weight often makes them more fearful of gaining it back in the future.

### Distorted Views of Body Weight and Shape

Some people believe that very thin people are just trying to attract attention or compliments when they complain about being "too fat." This kind of thinking is dangerous when it comes to dealing with anorexia. Regardless of how thin they are, people with anorexia are sincere when they say that they believe they are too fat. They might admit that they are thin in most places but are troubled by a "flabby tummy" or "sagging thighs." They focus on these "imperfections" and ignore the thinner parts of their bodies. Their view of their body shape is truly distorted and not based in reality.

Along with their fear of becoming fat, people with anorexia often are obsessive about checking their weight or body shape. They may weigh themselves, look at themselves in a mirror while unclothed, or measure parts of their body several times a day.

### Failure to Menstruate

Because people with anorexia eat so little, and in a very real sense are starving themselves, they often have a host of related health problems. One of the most common symptoms of anorexia among women is the failure to menstruate (have a period). Women diagnosed with anorexia typically have missed at least three consecutive menstrual cycles. For girls who are approaching puberty, anorexia typically causes menarche (first period) to be delayed by months, years, or until they gain weight. These menstrual problems typically are caused by very low levels of the hormone *estrogen* in the blood due to malnutrition and low body fat.

### Are There Other Effects on Health?

The malnourishment and purging associated with anorexia often cause other significant health problems. People with anorexia often are diagnosed with anemia, cardiovascular (heart and blood circulation) problems such as hypotension (low blood pressure) and irregular heart beat (arrhythmia), tooth

decay from repeated vomiting, poor kidney functioning, and osteoporosis (a decrease in bone mass). Perhaps most importantly, approximately 10 percent of all people diagnosed with anorexia die because of starvation, suicide, or electrolyte imbalances due to malnutrition.

### **What are the Associated Psychological Characteristics?**

People diagnosed with anorexia often tie their self-esteem with their ability to lose weight and stay thin. They view their weight loss as a sign of their self-worth. Weight gain is seen as a sign of weakness, poor self-discipline, and failure.

Many folks with anorexia become obsessed or preoccupied with thoughts of food. Some count calories or weigh every bite of food that they intend to eat, even though they are eating very little. Others may collect recipes, cook meals for their families that they do not eat, or hide away large stashes of food.

People with anorexia often are very concerned about controlling all aspects of their lives. They may seem rigid, inflexible or strict in their views of the world. Interestingly, many people develop anorexia after experiencing a stressful event that is outside their control (e.g., moving to a new home, changing schools, entering college, family problems, etc.).

These individuals also are more likely to experience significant levels of depression compared to people without an eating disorder. They may often appear sad or irritable. People with anorexia often have trouble sleeping or staying focused on tasks, and they may withdraw from social interactions or lose interest in activities that used to give them great pleasure (e.g., hobbies, sports, sex, etc.).

Finally, denial is a hallmark psychological characteristic of anorexia. People with this disorder may deny that they have irregular eating patterns or are too thin. Rather, they appear to be sincerely convinced that they are quite overweight. Even when confronted by family and physicians, they may deny that their attempts to lose weight have caused significant health problems.

These individuals often refuse to accept, or simply don't understand, that there may be links between recent life events, their emotional condition, and their current eating patterns. Such denial and lack of insight often frustrates friends and family members, causes conflict with others, and adds to the person's sense of social isolation.

### **Can Anorexia be Treated Successfully?**

Fortunately anorexia can be treated successfully. Physicians, mental health professionals, registered dietitians, and other health professionals, working together, have developed several successful treatments for anorexia. However, these treatments often are complicated by the aforementioned medical and psychological factors associated with anorexia. Beyond the significant health problems that can be caused by this condition, people with anorexia often do not believe that they have a problem, and do not see the need for medical or psychological treatment.

The first step in getting help for people with anorexia is to have them seen by a doctor. A physician can assess their general health and determine if they need to be hospitalized due to severe malnutrition or other health problems. Typically, when hospitalized, a person with anorexia will remain in the hospital until they begin to gain weight and other health professionals can be consulted to establish outpatient treatment. Long-term nutritional counseling often is necessary to help the patient establish an acceptable eating regimen that will improve their nutritional status and health. This counseling can best be accomplished by a registered dietitian who can assess the individual's current dietary practices and establish an eating plan that meets their individual needs. Nutrition counseling should be done in consultation with mental health professionals on the health care team.

Mental health professionals, such as psychologists, often provide psychotherapy for people with anorexia. They help these individuals understand their perceptions and unrealistic expectations for themselves, family members and significant others, or the world in general. Individual or family therapy often is used to address the person's

perceptions of food and body image, as well as help to resolve family issues that may be contributing to, or resulting from, the diagnosis of anorexia.

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