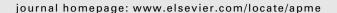


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Review Article

Eating disorders – Malnutrition for women



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ABSTRACT

Increasing number of individuals is being diagnosed with eating disorders, as social media and western culture portray thinness as signs of happiness and well-being.

Individuals with eating disorders are obsessed with food, body image, and weight loss. Depending on the severity and duration of their illness, they may display physical symptoms such as weight loss, amenorrhea, loss of interest in sex, low blood pressure, depressed body temperature, chronic and unexplained vomiting and the growth of soft, fine hair on the body and face.

There are four types of behavioral manifestations occurring from eating disorders:

a) Anorexia nervosa b) Bulimia nervosa c) Binge eating disorder d) Eating disorder not otherwise specified.

Today's theorists usually apply a multidimensional risk perspective to explain eating disorders, and identity several key factors that place a person at risk for an eating disorder: society's emphasis on thinness, family environment, ego deficiencies and cognitive disturbances, mood disorders and biological factors (including hypothalamic reactions to excessive dieting).

Treatments for anorexic nervosa include increasing caloric intake and restoring the person's weight quickly. The next step is to address the underlying psychological problems, so that improvement may be lasting, by employing a mixture of individual, group and family therapies.

Treatments for bulimia nervosa focus on eliminating the binge-purge pattern and addressing the underlying causes of the disorder. Often several treatment strategies are combined, including individual insight therapy, group therapy, behavioral therapy and antidepressant medications.

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1. Introduction

Anorexia nervosa and bulimia nervosa are characterized by severe disturbances of eating behavior. The salient feature of anorexia nervosa (AN) is a voluntary restriction of food intake relative to caloric requirements leading to an inappropriately low body weight. Bulimia nervosa (BN) is characterized by

recurrent episodes of binge eating followed by abnormal compensatory behaviors, such as self-induced vomiting. AN and BN are distinct clinical syndromes but share common features. Both disorders occur primarily among previously healthy young women who become overly concerned with body shape and weight. Many patients with BN have past histories of AN, and many patients with AN engage in binge

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eating and purging behavior. In the current diagnostic system, the critical distinction between AN and BN depends on body weight: patients with AN are, by definition, significantly underweight, whereas patients with BN have body weights in the normal range or above. Binge eating disorder (BED) is a more recently described syndrome characterized by repeated episodes of binge eating, similar to those of BN, in the absence of inappropriate compensatory behavior. (18 Edition Harrisons's principles of Internal Medicine chapter 79 page 636).

2. Eating disorders

Eating disorders affect both the mind and the body. It was first identified as a medical condition by the British physician Dr. William Gull in 1873. The incidence of eating disorders increased substantially throughout the twentieth century and in 1980 the American Psychiatric Association formally classified these conditions as mental illnesses.



Sir William Withey Gull 1860 - 1890

Mental and psychological factors can affect your nutrition, with depression being a common cause of weight loss and malnutrition in adults. Stress and anxiety can also cause you to eat less or more than you need. Dementia and confusion can impair an adult's desire to eat and their ability to feed themselves by interfering with choosing which foods to eat, getting food into the mouth and chewing.

3. Diagnosis

Individuals with eating disorders are obsessed with food, body image, and weight loss. They may have severely limited food choices, employ bizarre eating rituals, excessively drink fluids and chew gum, and avoid eating with others. Depending on the severity and duration of their illness, they may display physical symptoms such as weight loss, amenorrhea, loss of

interest in sex, low blood pressure, depressed body temperature, chronic and unexplained vomiting and the growth of soft, fine hair on the body and face.

4. Types of eating disorder

There are four types of behavioral manifestations occurring from eating disorders. The American Psychiatric Association has classified the same as following¹:

- e) Anorexia nervosa
- f) Bulimia nervosa
- g) Binge eating disorder
- h) Eating disorder not otherwise specified.





Sketches of Miss A & Miss B published in Sir William Gull's seminal work "Anorexia Nervosa" in 1873. Miss A & Miss B were referred to Gull between 1866 and 1868 and are one of the world's first anorexia nervosa case studies. Under Gull's observation, the two young women seem to have made significant recovery.

Source: http://en.wikipedia.org/wiki/Anorexia_nervosa

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