

Eating Disorders

Eating disorders often run in families. They are also becoming more common. As many as 1 in 10 young women suffer from an eating disorder.

Eating disorders are characterized by a preoccupation with food and a distorted body image (a child thinks he or she is fat when he or she is really underweight or of normal weight). Although it is normal for children to be occasionally concerned with their appearance, weight, and the type of food they eat, a child who is obsessed with food and his or her shape or weight may have an eating disorder. The level of preoccupation relates to the seriousness of the condition.

Anorexia Nervosa (also called Anorexia) and Bulimia are the two most common eating disorders. They occur mostly in teenage girls and young women and less often in teenage boys and young men. A child with Anorexia often refuses to eat, eats very little, or exercises more often than necessary. A child with Bulimia often eats large amounts of high calorie or high fat foods and then tries to counteract this by vomiting, overexercising, or using laxatives.

SIGNS AND SYMPTOMS

Identifying symptoms of Anorexia or Bulimia in your child may be very difficult. Often, children hide these illnesses from their families and friends. In fact, one common sign of an eating disorder is pulling away from friends and spending more time alone.

Typical signs and symptoms of eating disorders include:

- Perfectionism and an excessive drive for high achievement in school
- Low self-esteem
- Believing he or she is fat regardless of how thin he or she becomes
- The need to feel control over his or her life
- Dramatic weight fluctuations

EVALUATION AND DIAGNOSIS

Eating disorders can lead to serious medical problems. Early detection and intervention is important. However, eating disorders can be difficult to recognize and diagnose because children will often go to great lengths to hide their behaviors. Although an eating disorder can be diagnosed at any point in childhood, it is more typical in adolescence. If you think your child has an eating

disorder, your child may need a comprehensive psychiatric evaluation or psychotherapy evaluation. For more information, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

TYPICAL CO-EXISTING DIAGNOSES

Common mental health diagnoses that co-exist with eating disorders include:

- Anxiety Disorders (p48)
- Body Dysmorphic Disorder (BDD) (p62)
- Depression (p67)
- Substance Abuse and Dependence (p94)

Your child may also have a medical problem that is causing his or her symptoms. Talk to your child's pediatrician about your child's symptoms.

TREATMENT

Treating an eating disorder can take time. Treatment is usually most effective when a team approach is used. The team should consist of a psychiatrist, a psychotherapist, and a nutritionist, as well as the child's pediatrician and parents. For more information on mental health specialists, turn to page 106 in **MENTAL HEALTH SUPPORT**.

Most likely, the team will suggest a number of treatment strategies, including individual and family psychotherapy and anti-depressant or anti-anxiety medications. For more information, turn to **MENTAL HEALTH TREATMENT (p147)**.

If the eating disorder is affecting the child's ability to learn, adjustments may need to be made in his or her education program. For more information on the school system, turn to page 118 in **MENTAL HEALTH SUPPORT**.

For both evaluation and treatment of an eating disorder, it is important to find a mental healthcare provider who specializes in eating disorders.

RESOURCES

Life Without Ed: How One Woman Declared Independence from Her Eating Disorder and How You Can Too (2003)
By Jenni Schaefer and Thom Rutledge

National Eating Disorders Association
800-931-2237
www.edap.org

Wise Girl: What I've Learned About Life, Love, and Loss (2002)
By Jamie-Lynn Sigler and Sheryl Berk