Categories

Thomas & Schaefer: Ch. 1

Outline

Categories

Eating continuum

Commonalities

Differences

Categories:

Anorexia Nervosa

Bulimia Nervosa

Binge Eating Disorder

OSFED

Activity Disorder

Disordered Eating Behaviors (“Almost Anorexic”)

When thoughts and behaviors about food, self-image, and self-worth become illogical, out of control and cause a medical condition called eating disorders

Anorexia Nervosa

Self-starvation

Ignores hunger cues

Restrict amount of food

Restrict kinds of food

Results in starvation and even death

Bulimia Nervosa

A binge-purge disorder

Gorges on enormous amounts of food

Then gets rid of food/calories by vomiting, excessive use of laxatives or other means

Dangerous to physical and mental health

May result in death

Binge Eating Disorder

FKA: compulsive over eating

Consuming large amounts of food w/o purging

Feeling a lack of control

Fear never getting enough food, nourishment, love to satisfy feelings of emptiness

Strong shame, guilt or disgust associated w/ behavior

Other Specified Feeding and Eating Disorders (OSFED)

Subclinical AN, BN, BED

Purging disorder

Night eating syndrome

Activity Disorder

Compulsive over-exercising despite negative consequences

Continuum Previous

Variety of eating behaviors

Commonalities

**Always a symptom that something is going awry**

Use of food masks what really needs to be addressed

Affects more females than males

Onset usually before 20 y.o.

1/3 between 11 & 15 y.o.

Often triggered by a change in relationships

Commonalities - cont.

Causes:

Personal & unique

Triggered by desire to be “in” with friends

Romantic break-up, family crisis, school problems, leaving home for first time, Freshman “15#”

Derogatory comment about appearance by a parent, sibling, teacher, friend, classmate or coach

Begin as a useful tool for handling life’s challenges

Gives feeling of power or boosts self-esteem

Commonalities - cont.

Create a temporary illusion of safety & independence

Focus on food & body size to limit one’s social world, talents & **feelings**

Results in stunted physical & emotional growth

Miss out on relationships and rich experiences

Commonalities - cont.

All are serious

Impacting physical, emotional, social, intellectual and economic health

Diagnosis and treatment is not as straightforward as for a medical condition

Prevention is key

Education

Exercise critical thinking about culture, gender roles, what makes one unique, advertisements

Change attitudes and values rather than body shapes, weight & size

Differences

Relationship with food

Associated with different psychiatric conditions

Resulting in different body weights

Different health consequences

Summary

ED are ways of protecting oneself

Differences include the nature of the relationship with food, age of onset, health implications, and more

Eating Attitudes Test-26 (EAT-26)

https://psychology-tools.com/eat-26/