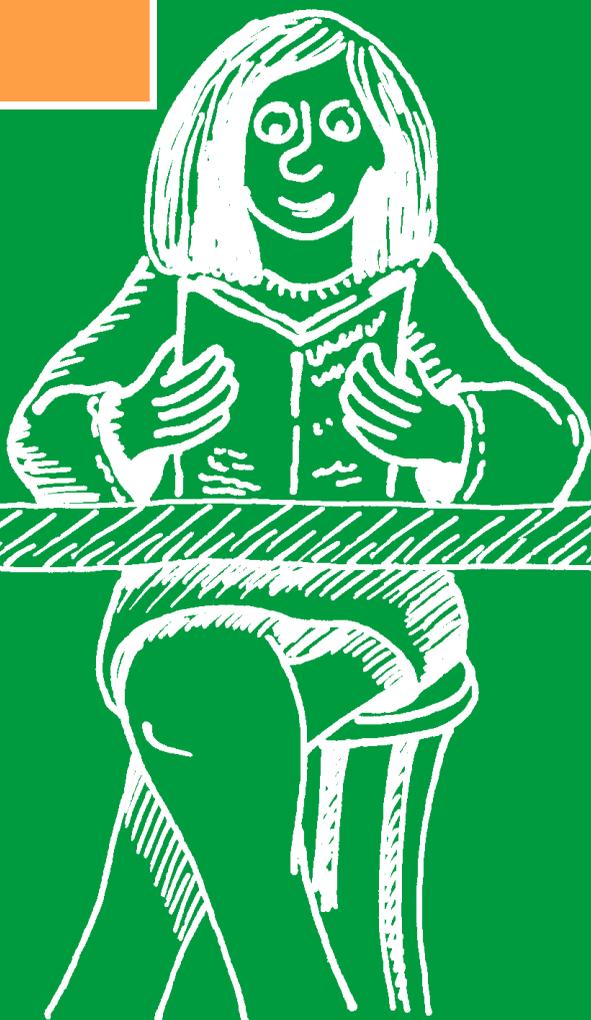


All About Anorexia Nervosa

A booklet for those wanting to
know more about anorexia nervosa



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The Mental Health Foundation has published two booklets on eating disorders. This one looks at anorexia nervosa and its companion booklet covers bulimia nervosa. We have produced two separate booklets because there are some very important differences between the two. There is however inevitably some overlap, particularly in the discussion about causes. There are also people who have experience of some or all of the symptoms of both conditions or who alternate between the two at different times.

If you would also find it useful to have a copy of the bulimia nervosa booklet, please call us on 020 7802 0300.

What is anorexia nervosa?

Anorexia nervosa is a disorder which makes eating very distressing. It makes people obsessively anxious to maintain or reduce their body weight through rigid control of their calorie intake. People with anorexia nervosa often have a very distorted perception of how they look and continue to feel the need to lose weight even when they are so thin that their health is very seriously at risk. They have an intense fear of gaining weight and feel that their value as a person is directly affected by their body shape.



Who has anorexia nervosa?

Current estimates suggest that up to 1% of women in the UK between the ages of 15 and 30 suffer from anorexia nervosa. Girls under 15 can also be affected and it seems that anorexia nervosa is becoming an increasing problem in these younger children. Some women over 30 also have anorexia nervosa, although the condition generally first occurs earlier than this.

90-95% of people with anorexia are women, but it is important to realise that it is a condition which can occur in young men as well as women. There is also evidence to suggest that in the younger age group (7-14 yrs) up to 25% of cases are boys.

It is difficult to judge exact numbers of people who have anorexia nervosa as many cases are not reported or not diagnosed. Some people experience many of the symptoms of the condition but would not be formally diagnosed. This may be because their weight has not fallen below the level identified by eating disorder experts (usually 15% below 'normal' body weight) or because they do not fit the diagnostic models in some other way.

What causes anorexia nervosa?

There is a lot of uncertainty about the causes of all forms of eating disorder. Many people still think of them as 'slimmer's diseases'. While it is true that both anorexia and bulimia nervosa can develop from a strict diet, the reasons for a diet turning into an eating disorder involve more than just the wish to lose weight. The name 'anorexia' is confusing as literally it means 'loss of appetite'. People with anorexia nervosa do not lose their appetite, they still feel hungry, but fear weight gain

so much that they lose the ability to eat a normal diet.

Some people attribute anorexia nervosa to media and fashion and it is clear that they both play their part. Many people who do not conform to the ideals presented by the fashion industry and the media feel that they need to diet. For some people this presents no problem while for others it can turn into anorexia nervosa.

The media can also perpetuate problems for people who have an eating problem as it is very difficult to break away from the dieting cycle if you are constantly being presented with images of desirable thin models.



People with anorexia nervosa develop a fear of fatness which goes far beyond that which most dieters feel. For someone with anorexia nervosa, the need to make themselves thinner dominates all other emotions. Some people with the condition

lose their ability to see themselves as they really are, and instead become terrified that they are fat even when they have become seriously malnourished and underweight. Others are able to see that they are thinner than most other people, but still strive to lose whatever body fat they feel remains. In many cases, they feel driven to continue to lose weight because they feel that their value as a person depends on their weight and body shape and that they will only be liked and appreciated if they are able to make themselves increasingly thinner.

People who develop anorexia nervosa often have emotional needs which are not being met in their lives. They may not have a stable family background, may have trouble making friends socially or at work or feel uncomfortable about sexual relationships. It is important to realise though that anorexia nervosa is not anyone's fault. It cannot be seen to hinge entirely on relationships, this is simply one factor which may play a part. People can develop anorexia nervosa even if they have very supportive families and partners and a wide circle of friends.

Anorexia nervosa often starts in teenage years and can be a mechanism for dealing with all the complicated emotions connected with becoming an adult. Some teenage girls are terrified of becoming women. This may be because they have been abused as children, because they have seen their mother or other female relatives being unhappy, because they are concerned about their sexuality or simply because they are anxious about all the changes which they can feel taking place within them. Anorexia nervosa can offer them a way of delaying some of the physical signs that they are becoming women. Teenage girls with anorexia nervosa do not have such developed breasts or hips as other girls their age because they have so little body fat. They may also delay the start of their periods. This can be very comforting for girls who do not feel ready for these physical developments.

People who have anorexia nervosa often feel that they are underachievers in academic or work life. This is usually not the case and evidence has shown that many people with anorexia nervosa are in fact very high achievers. They are, however, often people who set themselves standards which are simply impossible to achieve and leave them with feelings of inadequacy.

For a person with little confidence, their eating problems may seem to be the only thing about them which is special or different. Their ability to feel hungry and yet refuse to eat can feel like a special talent that most people are unable to achieve and can give a real sense of pride. It feels very disciplined to be able to count calories and to be able to impose strict limits on how much you consume. For people who have low self-esteem and who can see virtually no other area in their lives in which they are successful, this can suddenly offer them a sense of purpose.



Anorexia nervosa can also be a way of coping with difficult emotions. The amount of time and energy spent thinking about food and weight loss can leave very little room to deal with any other emotions. Anorexia nervosa can therefore act as a kind of protective barrier against the difficulties and emotional pressures of everyday life.

It is important to understand that anorexia nervosa can fulfil some needs and not to expect someone to give it up without having their needs met in some other way.

What are the effects of anorexia nervosa on someone's health?

A significant number of people with anorexia nervosa die as a result of the condition, either as a direct physical consequence of the weight loss or through suicide.

People with anorexia nervosa have very low body weight and this can cause serious medical problems. The most common of these are:

- Poor circulation
- Low blood pressure
- Brittle bones
- Increased facial hair
- Loss of periods/infertility
- Fainting and dizziness
- Hair loss
- Dehydration
- Kidney damage
- Low body temperature

Some of these problems will get better when the person recovers from anorexia nervosa. Other problems, particularly damage caused to bones, may never improve. It is important to seek help as early as possible as many of the more serious medical consequences of anorexia nervosa are only associated with long-term eating problems.

Will someone with severe anorexia nervosa have to go into hospital?

Occasionally when weight loss becomes so severe that it is a threat to someone's life, hospital may need to be considered as an option. Doctors need to be very careful about taking people into hospital, however, as the immediate physical need for medical intervention can impact on the more long-term need for autonomy. What people with anorexia nervosa generally need above all else is to feel that they are in control of their own lives. Being admitted to hospital and having responsibility for their intake of food or fluids managed by others can be extremely distressing.

If doctors feel that someone's life is in immediate danger, and they see no other option, they can force someone to go into hospital for treatment - this is allowed under the Mental Health Act. Compulsory treatment is always seen as a last resort and will only be continued for as long as doctors and other professionals see it as the only solution. If hospital treatment is going to be effective, then it must be seen as part of a much wider approach to the anorexia nervosa which includes looking at the reasons why the condition first started and why it is so difficult to give up.

How can I help if I suspect someone has anorexia nervosa?

If you suspect that someone you know has anorexia nervosa or is showing signs of developing it, you should try to talk to them about your worries and urge them to seek help. If they seem unwilling to discuss their eating problems with you, or become aggressive, try suggesting that they at least read about the condition. This will help to get them used to being confronted with some of the terminology as well as alerting them to some of the dangers. They may not realise that they have such a serious a problem or may be anxious about giving up something which they feel helps them to cope.



Try to learn as much as you can about the condition and be prepared to offer whatever support your friend or relative needs. Be guided by what they say they need rather than by what you think they should be doing. You must realise that it can be very frightening to give up a regime which is at the very centre of someone's life. Talk to your friend about why they

think they need their anorexia nervosa and what they fear about giving it up. It may be that they need something to feel proud of, or something over which they have complete control. If this is the case, then you may be able to help them to think of other areas in their lives in which this can be achieved.

You may find it helpful to use some of the self-help books listed at the end of this booklet. They are generally written by medical professionals with many years experience in treating eating disorders but most of them also have input from people who have lived with the condition themselves. These books can be very helpful in showing you how you can structure the recovery process, giving practical suggestions for ways forward and explaining why people may act as they do. You and your friend or relative may also find it very reassuring to see that the way they are feeling is a recognised condition and that there are effective ways of dealing with these feelings.

Once you have got someone to talk about their condition, you should try to stress the importance of getting professional help. There are effective treatments for anorexia nervosa, and the earlier your friend or relative has access to these treatments, the better their chance of recovery (see Getting help below).

What should I do if I have anorexia nervosa?

The first thing you should try to do is to talk to someone about your anorexia nervosa. If you are already very underweight, you may not need to tell anyone that you have a problem, but you should try to talk to someone about why you think you are starving yourself. Unlike bulimia nervosa, anorexia nervosa is a difficult condition to keep secret because there are very

obvious changes in your appearance. Your friends and family will have noticed that you are losing weight and will almost certainly be worried about you.

Try to explain to someone you trust what you get from having anorexia nervosa. If you feel you need to starve yourself in order to maintain control over your life, or to suppress other emotions you may not feel able to deal with - then tell someone this. The people close to you will be able to understand the dangers associated with your extreme weight loss. Those who have been on diets or who struggle to control their own weight may also be able to understand how frightened you feel about gaining any weight. What people may need help with is understanding that in some ways your anorexia nervosa can help you to cope with other pressures you face. Try to be honest with yourself about your condition and share your thoughts with someone else if you can.

You probably feel very afraid of putting on any weight. You must try to begin to understand that this fear is part of your condition and try to listen to people when they tell you that you should not be losing any more weight.

You may also find it helpful to read more about anorexia nervosa or talk to other people who live with it. The Eating Disorders Association can send you information and has self help groups you can join. There are useful books and leaflets listed at the back of this booklet.

Getting help

Before you decide to get help, you must be honest with yourself about whether you are ready. Nobody will be able to help you get better unless you are able to accept that you will have to at least maintain your current body weight. There are all

sorts of ways you can approach your condition and you must choose one which suits you. Remember that if you have managed to open up to someone and started to think and talk about your anorexia nervosa, you have already taken a big step forward. Do not try to rush your recovery, but feel proud of each advance you make.



Professional help

If you decide that you are ready to seek professional help, you should first approach your own doctor (GP) for advice. Not all GPs are expert in eating disorders, but they can help you to access specialist services. They can also be very helpful in discussing your physical needs and in helping you to adjust to a healthier way of eating. If you have been fasting for a long time you may find that you have problems with certain food. Your digestive system will not be used to coping with normal amounts of food and you may need to start by eating small portions of easily digested foods until your system catches up. Your GP can tell you which foods should cause you least

problems whilst still providing you with the nourishment you need. He/she may also want to weigh you regularly as a means of monitoring your progress. Do not be afraid of this - try to see it as a challenge and aim to have maintained your body weight or even have gained a few pounds each time.

Your GP should also refer you to a psychiatrist or therapist specialising in eating disorders. This can be very helpful as they will have experience of treating many people with anorexia nervosa and will be used to the challenges. If you are sent for specialist help, see this as a valuable opportunity and try to be open to the suggestions they make. You should also be prepared to tell them what you feel works best for you or what your particular fears are - after all, we are all different.

If you are very thin, your doctor may want to admit you to hospital for a short time (see previous section - will someone with severe anorexia nervosa have to go into hospital?). This may be frightening and make you feel as if you are losing control. Make sure you keep as much control as you can - ask questions, make sure you understand what is happening and why and challenge anything you are not happy about. Your time in hospital should only be a small part of your overall treatment and you should try to see it in this context.

Self help

There are a number of very good self help books available. Some of these are listed at the back of this booklet. These books can tell you about ways other people have found to get better, can suggest some of the reasons why you may be feeling as you do and can give practical suggestions of measures you can take in your life to try to recover. They are almost always written with the help of people who have anorexia nervosa themselves and so do not make unrealistic claims.

You will probably find that as well as providing you with some practical ways forward, these books will also be very comforting as they will show you that others think and act as you do. The books are most effective when used by you and someone else together. If you can get someone to read through the advice and help you apply it to your own set of circumstances, then you should be able to develop a workable plan for getting better. If you do not have a friend or relative that you feel can help you with this, then your GP or practice nurse may be able to help.

Friends and family

Do not underestimate the effect of friends and family on your recovery. Their support can be invaluable. Not only can they help with practicalities, they can also support you through the bad times and help you celebrate your successes.



Recovering from anorexia nervosa is difficult. Many people only seek help when they have been living with the condition for years. Any way of thinking and behaving which has been established for a long period of time is difficult to overcome. People trying to recover from anorexia nervosa should be prepared for the process to take some time and be really committed to achieving results. Anorexia nervosa can be beaten and there are a range of very effective treatments which can be tried. On the next page you will find addresses where you can get further help, information and support.

Where to get further help

Eating Disorders Association

First Floor
Wensum House
103 Prince of Wales Road
Norwich
Norfolk NR1 1DW
Helpline: 0845 634 1414
(8.30am-8.30pm Mon-Fri)
Youth Helpline - 18yrs and under:
0845 634 7650
(4.00pm-6.30pm Mon-Fri)
Recorded message about
eating disorders: 0906 302 0012
(message lasts approx 10
minutes and costs 50p per
minute)
www.edauk.com

*The EDA provides telephone
helplines, information sheets,
leaflets and newsletters and runs
a national network of self-help
groups. They are able to advise
on both bulimia and anorexia
nervosa.*

MIND

Granta House
15-19 Broadway
Stratford
London E15 4BQ
Tel: 020 8519 2122
Information Line: 0845 660163
www.mind.org.uk

*National charity which offers
information on all mental
illnesses. MIND have leaflets and
information sheets on eating
disorders and sell some of the
self-help guides listed below.*

The Samaritans

Tel: 0845 909090
www.samaritans.org.uk

*UK Helpline for anyone
experiencing emotional distress.
Someone to talk to in confidence
24 hours a day.*

The Women's Therapy Centre

6-9 Manor Gardens
London N7 6LA
Tel: 020 7263 6200
(Mon-Fri 10am-12pm and 2-4pm)

*Individual and group
psychotherapy for women.*

Further reading about anorexia nervosa

The following list is intended as a guide to seeking further information and the Mental Health Foundation does not necessarily endorse or support the content of the publications listed.

General reading

Anorexics on Anorexia

Rosemary Shelley. Jessica Kingsley, 1997

The Anorexic Experience

Marilyn Lawrence. The Women's Press, 1995.

Eating Disorders: the facts

Suzanne Abraham and Derek Llewellyn-Jones.
Oxford University Press, 1989.

Talking About Anorexia

M Monro. Sheldon, 1996.

Self-help books

Anorexia and Bulimia: your questions answered

Julia Buckroyd. Element Books Ltd, 1996.

Anorexia Nervosa: a guide for sufferers and their families

PL Palmer, Penguin, 1989.

Leaflets

Anorexia and Bulimia. Help is at Hand Guide

Royal College of Psychiatrists - call 020 7235 2351.

Understanding Eating Distress

MIND - call 020 8519 2122

The Eating Disorders Association also produces a range of leaflets on eating disorders - call them on 0870 770 3256 for further details.

As the UK's only charity concerned with both mental health and learning disabilities, the Mental Health Foundation plays a vital role in pioneering new approaches to prevention, treatment and care. The Foundation's work includes: allocating grants for research and community projects, contributing to public debate, educating and influencing policy makers and health care professionals.