

Characteristics of Eating Disorder: Anorexia Nervosa

Not all characteristics are required for diagnosis
Consult DSM IV-V for Diagnostic Criteria

- Weight of 85% of expected weight for height/age
(Weight changes in athletes may vary)
- Dieting/Restrictive Eating
- Refusing to admit there may be a problem with food, mood, & body image
- Preoccupation with weight and body shape
- Use of weight loss drugs or supplements
- Passive-aggressive, manipulative, overly compliant demeanor
- Drug and/or alcohol abuse/use
- Avoidance of eating with others ("we/I never see her eat")
- Absence of periods (amenorrhea)
- Excessive loss of hair
- Fine, downy hair on arms and face
- Dry, brittle, fragile looking hair
- Suicide attempts, thoughts
- Reluctance to talk about feelings, denial of having certain feelings
- Perfectionism
- May or may not purge (vomit, laxatives, compulsive/excessive exercise)
- Denial of needs for self and self-care
- Fills up very easily (ex. a handful of grapes)
- Social isolation, withdrawal, decreased time with friends and family
- Loss of interest and pleasure in activities
- Lack of ability to concentrate and/or easily frustrate
- Improved or declining grades
- Elimination of a number of foods previously eaten and whole food groups for any reason.
- A few bites of any food make them feel full, bloated, out of control
- Tendencies toward hyperactivity and a denial of fatigue ("I have to run, I have too much energy")
- Constipation, diarrhea, intestinal upset (due in part to malnutrition, high fiber, inadequate Kcals)
- Similar characteristics to depression
- Preoccupation with food "I think about it all day long"
- Wearing extra layers, bulky clothes
- Lying about what and when they ate
- An all-or-nothing approach to situations (black and white, right and wrong thinking and judging)
- Very sensitive to even the smallest forms of criticism.
- Fear of growing up, fear of taking responsibility for actions, wanting to stay in the perceived safety and ease of childhood.
- Inability to make decisions for self regarding personal wants & needs.
- Tendency to be caretakers, great listeners, pleasers, compliant.
- Masters of self-denial (smallness of body corresponds to the smallness of self)
- Painful feelings related to:
 - ___ Lack of worthiness ___ Feeling invisible ___ Guilt
 - ___ Lack of value ___ Lack of self-respect
- Feelings of guilt when they allow themselves pleasure

Characteristics of Eating Disorder: Bulimia Nervosa

Not all characteristics are required for diagnosis
Consult DSM IV-V for diagnostic criteria

- May be of normal or above normal weight for height
- Recurrent binge eating (a binge can be perceived as any number of kcals, ranging from one food eaten in a small quantity to 7000-10,000 kcals)
- Eating that is abnormal and feels out of control
- Depression and self-deprecating thoughts following a binge
- Any three of the following 5 characteristics
 1. Consumption of high calorie "junk food" during a binge
 2. Hiding food and/or secretive eating
 3. Termination of the binge by abdominal pain, sleep, or vomiting (compensating purge activity: laxatives, exercise, enemas)
 4. Repeated weight loss and attempts to control weight by cathartics and diuretics.
 5. Weight fluctuations of over 10 pounds in one year
- Denial that a problem exists
- Distorted body image
- Lack of self-esteem
- Lack of understanding about self
- Restrictive-binge cycle of food intake
- Decline in social eating
- Long times in bathroom, visiting bathrooms right after meals
- Consuming large amounts of food without seeming to gain weight
- Choosing the binging activity over other social events
- Drop in energy level
- Decreased ability to concentrate, easily frustrated
- Gradual elimination of previously enjoyed activities
- Eating is a primary activity, pleasure and serves a friendship role
- Terrified of weight gain, obsessed with food

Binge Eating Disorder

Similar to Bulimia nervosa with following exceptions and considerations

1. Does not typically include a compensating behavior
2. Individual is likely to be overweight
3. Prevalent in men and women
4. Later onset as compared to AN and BN

EDNOS

Eating Disorders Not Otherwise Specified

Though Binge Eating Disorder is considered apart of EDNOS, trend it towards it's own ED classification Other disordered eating that does not fit the full DSM-IV diagnostic code but fits the psychopathology with perhaps "lesser" or less frequent symptoms. This group accounts for over 80% of dysfunctional eating issues and can be equally as problematic and also a sub-clinical form that can easily progress to AN, BN, DED