

“Bulimia”

What is it?

- Bulimia is an eating disorder. Someone with bulimia might binge on food and then vomit (also called purge) in a cycle of bingeing and purging. Binge eating refers to quickly eating large amounts of food over short periods of time. Purging involves forced vomiting, laxative use, excessive exercise, or fasting in an attempt to lose weight that might be gained from eating food or bingeing.

- A person with bulimia often feels a loss of control over their eating as well as guilt over their behavior. They are usually aware that their behavior is abnormal. Bulimia is most common in adolescent and young adult women. People with bulimia are often of normal or near-normal weight, which makes them different from people with anorexia (another eating disorder in which the person does not eat).

Causes

Though the exact cause of bulimia is not known, a number of factors appear to influence its development.

- Studies have shown eating disorders occur more frequently in relatives of people with bulimia than in others. This frequency appears to be related to genetics, but family influences may also be important.
- Researchers have suggested that altered levels of the chemical serotonin in the brain play a role. Serotonin levels can be related to the development of clinical depression.
- Experts agree that cultural factors are very important in the development of eating disorders. Modern society's emphasis on health, in particular thinness, can greatly influence those who seek the acceptance of others.

Synthoms

- Probably the earliest and most obvious sign of bulimia is an overconcern with weight and body shape. People with bulimia will try to hide their bingeing and purging behavior from others. This secrecy often makes it difficult to identify the actual problem until a serious complication from the physical self-abuse occurs. People with bulimia may complain of generalized weakness, fatigue, abdominal pain, and loss of menstrual cycles. They may even complain of vomiting or diarrhea without revealing that it is self-induced.

- ◉ A physical exam may reveal signs of chronic bingeing and purging.
 - > Dental cavities, loss of tooth enamel, enlarged salivary glands, and scars on the knuckles may be present as a result of chronic self-induced vomiting.
 - > Signs of malnutrition or dehydration may be present including dry skin, changes in the hair and nails, swelling of the lower legs and feet, or loss of sensation in the hands or feet.

Treatment

- Most people with eating disorders are treated by doctors and psychologists without being admitted to the hospital unless a serious physical complication requires hospitalization.
- Early treatment is important, because over time this behavior pattern becomes more deeply ingrained and harder to change. People with bulimia who are treated early in the disease have a better chance of full recovery than those who have the disease for years before treatment begins.
- As part of a support circle for a person with bulimia, you can be of help at home by monitoring the person's behavior and helping them maintain a reasonable eating pattern. Offer support and encouragement to help the person get and stay in treatment. You can also ensure that the person keeps appointments with doctors and other therapists.

- Treatment of bulimia usually involves counseling and behavioral therapy. Most eating disorders are not about food but about self-esteem and self-perception. Therapy is most effective when it concentrates on the issues that cause the behavior, rather than on the behavior itself.
- Individual therapy, combined with group therapy and family therapy, is often the most helpful. Group therapy, where people with the same disease get together and share their experiences, seems to work well for people with bulimia. Often counseling is combined with the use of antidepressant medication. Facilities experienced in the treatment of eating disorders are recommended.
- Any serious medical problem related to an eating disorder may require hospitalization. Electrolyte imbalances will be corrected and fluids will be given to rehydrate. IV nutrition may even be required. Even if immediate hospitalization isn't needed for medical treatment, the doctor may request an urgent referral to a psychiatric facility for evaluation.

Prevention

- ◉ Removing the emphasis on physical appearance in our culture and in particular within the family is the best way to prevent thought processes and behavior that put people at risk of developing eating disorders.
- ◉ The National Eating Disorders Association may be able to assist with further information as well as referrals: (800) 931-2237.
- ◉ Also, Overeaters Anonymous may help you determine if you are on the road to an eating disorder.