

ANOREXIA BASICS

Written by elementaryeatingdisorders.blogspot.com

Anorexia is a biologically-driven brain disorder. When a genetically vulnerable person experiences an environmental trigger, anorexia can develop. Environmental triggers include an injury or illness that reduces calorie intake, increased exercise such as training for a race, voluntary dieting, and other situations that cause calories expended to exceed calories consumed.

Genetics play a major role in anorexia. Genes contribute 50-80% of the risk of developing anorexia. Having family members with a brain disorder contributes to a person's genetic vulnerability. Brain disorders that create anorexia susceptibility include depression, anxiety, eating disorders, ADHD, autism, schizophrenia, bipolar disorder, and others.

When anorexia is triggered, the person feels comforted by the lack of eating. While the average person feels agitated when a meal is delayed or missed, an anorexic feels calm, and maintains a reasonable energy level. Being able to remain active despite a lack of food is a biologic advantage during times of famine. A person can be profoundly ill with anorexia, yet appear to live a full life, even excelling in school or work. Achievements and grades do not indicate the severity of illness.

People with anorexia tend to be perfectionists, and exhibit black and white thinking. They may be more likely to have anxiety, to be rigid in their thinking, and to be pessimistic. They may be rule followers and adhere literally to instruction, which is why nutrition messages that focus on categorizing foods as "good" or "bad" is so dangerous to vulnerable people.

Prior to diagnosis, anorexics may avoid eating by claiming they've recently eaten or are not hungry. They may withdraw socially, especially shunning food-centered celebrations. They may become obsessed with watching cooking shows, baking desserts or reading cookbooks. They may have rules and rituals about what they eat and how it is consumed, such as limiting foods to a small selection, eating only at certain times, or cutting food into small pieces.

After diagnosis, eating becomes required and monitored, which is called "refeeding." Refeeding tends to make the person react with anger and fear. They often attempt to avoid eating by hiding plated food, throwing food away when they aren't supervised, becoming violent, and lying about eating. Many families use Family Based Therapy (FBT) to treat anorexia. FBT involves the parents making all food choices, including shopping, cooking, and plating. The concept of Magic Plate involves the plate of food "magically" appearing with no input from the anorexic, and all food presented must be consumed. Using Magic Plate decreases the person's distress by removing the choices of eating, quantity, and selection.

Anorexia is a disease of secrecy. It flourishes when the person is trusted to complete meals without supervision, to be alone with required food, to have access to garbage cans, and to select appropriate food. A sufferer may become very manipulative and sneaky, and employ many tactics to avoid eating. Trust simply cannot be granted. Trust creates opportunity for anorexia, and increases anxiety by requiring the person to "choose" to eat.

After the anorexic is weight restored, they may look "healthy." While the person's weight may be restored within months, the brain can take years to heal. It is not uncommon for it to take 3 to 7 years or longer for an anorexic to begin eating intuitively, and without anorexic thoughts. Anorexics report hearing a voice that tells them not to eat, that food will make them sick, or that they don't deserve to eat, among other negative messages. These messages can continue for years, which is why people can be critically ill with anorexia but be at a normal or greater weight.

The National Institute of Mental Health reports that anorexia is the most fatal mental disorder. Deaths can be caused by organ failure, electrolyte disturbances, dehydration, cardiac events, and suicide. Inadequately treated, the mortality rate of anorexia is estimated to be 20% of those affected, which is why early, aggressive, and continuous treatment is vital.

Anorexia can affect both males and females of any age. It is a brain disorder marked by an intense motivation to avoid eating. It is not a disease of vanity, and body dysmorphia and a desire to be thin are often not present. It is largely determined by a person's genes, and is not a choice. It cannot be diagnosed by a person's appearance. Weight is not a measure of health or severity of disease. Recovery is possible, but may take years with constant supervision.