St Patrick'sMental Health Services



Bulimia Nervosa

Information Booklet



Nervosa

What is Bulimia Nervosa?

Bulimia Nervosa is one particular type of eating disorder which affects the person's relationship with food and their body. Bulimia Nervosa is a condition where you think a lot about your body weight and shape. It affects your ability to have a "normal" eating pattern.

Bulimia Nervosa is an eating disorder in which people suffer recurrent episodes of uncontrolled overeating (binges).

The three main features are:

- Intense preoccupation with body weight and shape
- Repetitive episodes of binge eating (uncontrollably eating large quantities of food, usually within 2 hours)
- Binge eating reinforces people's fear of becoming fat and leads to a cycle of repeated counteractive extreme weight control behaviour such as:
 - Self induced vomiting
 - Laxative and Diuretic abuse
 - o Fasting
 - o Excessive exercise

Symptoms

Binging and Purging are the main symptoms and are usually done in secret. Binging: Repeated episodes of eating large amounts of food and/or drinks. You feel out of control and unable to stop eating. Binge eating is often done very quickly until you feel physically uncomfortable. This happens just not on one occasion, but regularly.

<u>Purging</u>: This means you try and counteract the "fattening effects" of the food from binging. Self induced vomiting after a bout of binging is the most well known. Other purging methods include excessive laxative use, extreme exercise, extreme dieting or even periods of starvation, taking diuretics or other medication such as amphetamines.



Other Symptoms include

- Physical symptoms; increased risk of osteoporosis, Oesophagitis, oesophagus tears, electrolyte imbalance, Calluses, Inflamed pancreas, enlarged salivary glands and dental problems.
- Symptoms of depression, anxiety and obsessions.
- Preoccupation with food and body shape.
- Social withdrawal with few interests.
- Decreased concentration and energy.
- Menstrual cycle interference and possible infertility.

Problem?

If you answer yes to two or more of the following you should talk to your GP (Family Doctor).

- Do you make yourself sick because you are uncomfortably full?
- Do you worry that you've lost control over how much you eat?
 Have you recently lost more than 6kg (about one stone) in the past three months?
- Do you believe you're fat when others think you are thin?
- Would you say that food dominates your life?

Related Conditions

- Anorexia Nervosa
- Obesity
- Binge Eating
- Eating Disorder Not Otherwise Specified (EDNOS)
- Pica (Consuming things that are not food)
- Rumination Disorder
- Failure to Thrive and Feeding Disorders
- Functional Dysphagia
- Physical illness

Who gets Bulimia Nervosa?

Bulimia Nervosa is more common than Anorexia Nervosa and affects both sexes but 90% are women. About 30% of people with Bulimia Nervosa will have had Anorexia Nervosa.

Although the global levels of eating concern among Irish adolescents are comparable to those established internationally, there is a suggestion that Irish adolescents may demonstrate higher levels of bulimic type behaviours and concerns.

The overall prognosis for someone with Bulimia Nervosa is better than for Anorexia Nervosa with approximately one third of people remaining continuously ill. Relapses are extremely common and occur in 60% of people with Bulimia Nervosa.

Depression frequently co-occurs and is often seen with other externalising behaviour such as drug taking and self harm.

What causes Bulimia Nervosa?

There is no single cause of Bulimia Nervosa, it is described as "multifactorial" in origin. It may be a combination of Genetic, Psychological, Familial or Cultural factors.

Distinguishing "normal dieting" from Eating Disorder Symptoms

- Denial of being on a "diet"
- Denial of hunger or craving
- Claims to needing less food than others
- Change in food rules e.g. vegetarianism , or not eating after 6pm
- Hiding weight loss e.g. wearing baggy clothes
- Increased interest in foods / cooking for others
- Unusual eating behaviours, eating very slowly/very fast, chopping food up into tiny pieces, segregating foods.
- Eating alone
- Large amounts of food going "missing"
- Postprandial bathroom trips
- Ritualised behaviours
- Socially isolated, low mood
- Increased exercise



Treatment

If you are unsure that you need treatment, seeing your GP (Family Doctor) is a good way to start.

The overall aim of treatment is to get the young person to understand the importance of healthy eating with a regular diet .

- Behavioural Interventions
- Psychoeducation Individual and family interventions
- A range of Talking Therapies including CBT (Cognitive Behaviour Therapy) and IPT (Interpersonal Therapy)
- Family Therapy
- Dietetics
- Dual Diagnosis management
- Medication deemed necessary by your doctor or psychiatrist
- These treatments may be as an Outpatient, Day Patient or as a Inpatient

More Support & Information

- Bodywhys-phone 1890 200 444
- Samaritans phone 1850 60 90 90
- Teenline phone 1800 833 634
- Your Local GP / Mental Health Nurse
- In emergencies please call 112/999 or visit your local Emergency Department

Websites

Bodywhys - www.bodywhys.ie Headstrong - www.headstrong.ie SpunOut - www.spunout.ie Childline - www.childline.ie Look - For the signs and symptoms Listen - To your friends experiences Talk - About what's going on Seek Help

St Patrick's Mental Health Services

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