

Eating Disorders

If you have an eating disorder, there are serious changes to the way you eat. For example, you may eat far less or overeat. You may be distressed or concerned about your body shape or weight. This factsheet has information if you have an eating disorder or are worried that you do.



KEY POINTS

- Eating disorders are illnesses that develop when problems with food or eating patterns spiral out of control.
- Eating disorders often start during adolescence or early adulthood but you can get them in adulthood.
- It is common to have another mental health condition alongside an eating disorder.
- Eating disorders can lead to a wide range of physical health complications. This includes serious heart conditions and kidney failure which can be fatal.
- Medication, talking therapies and family therapy can all be effective treatments for eating disorders.

This fact sheet covers:

1. [What are eating disorders and what are the different types?](#)
2. [What are the symptoms of eating disorders and how are they diagnosed?](#)
3. [What causes eating disorders?](#)
4. [How are eating disorders treated and what treatment should I be offered?](#)
5. [What if I am not happy with my treatment?](#)
6. [Information for carers, friends and relatives?](#)

Anyone can develop an eating disorder regardless of their age, sex, cultural or racial background. Women are more likely than men to develop an eating disorder. However, experts think that eating disorders in men are under diagnosed. According to 'beat', the eating disorder charity, at least one in ten people diagnosed with an eating disorder are men.¹

[Top](#)

1. What are eating disorders and what are the different types?

There are a number of eating disorders, and this factsheet covers the following:

[Anorexia nervosa](#)

[Bulimia nervosa](#)

[Other eating disorders](#)

Anorexia

Anorexia usually starts when you are a teenager. About 1 in 250 teenage girls and young women and 1 in 2000 teenage boys and young men have anorexia.² If you have anorexia, you try to keep your weight as low as possible. It can make eating very distressing and you may have a distorted view of how you look. You are likely to think you are overweight even if you have become dangerously thin.

It helps to get early treatment, but you may not want to get help.³

You may not always notice that you are having problems with eating or you may not accept that you might have an eating disorder. If you are concerned though, you may want to change. You might need help to do this.

Bulimia

Bulimia often starts when you are a teenager, although it can sometimes happen later.⁴ Men can also have bulimia but it is less common than in women. You can develop bulimia if you have had anorexia in the past.

Bulimia is linked with emotional problems and how you feel about yourself. If you have bulimia, you try to keep your weight as low as possible. You will often binge eat and then try to make up for the amount you have eaten. You might do this by vomiting and/or taking laxatives. This is often referred to as 'purging'. You may starve yourself or exercise excessively to work off the calories.

You may do these things secretly. Many people feel disgusted and ashamed when they binge eat but feel relieved once they purge. You may often be fascinated by food, buy magazines and cook-books to read recipes and enjoy discussing dieting issues. You may use strict diet plans and exercise.

You will usually have an average body weight so other people may not notice you are having these problems for a long time.

If you are vomiting regularly, this can be very bad for your teeth. You should not brush your teeth after vomiting. Instead, you should use a non-acidic mouthwash and should avoid acidic food and drinks, such as 'fizzy drinks'.⁵

Other eating disorders

You may not have all the symptoms of a particular eating disorder. If so, you might have a diagnosis of a 'partial syndrome'.

You might have a particular eating problem, such as chewing and spitting food without swallowing, or swallowing food and then bringing it back up. You may eat items such as tissues to fill up on without eating calories.

You may have elements of an eating disorder, or have symptoms that do not normally fall within the diagnosis of one of the main eating disorders. If so, a doctor will diagnose you with an 'atypical eating disorder' or an 'eating disorder not otherwise specified' (EDNOS).

Binge eating disorder (BED)

If you have binge-eating disorder you may eat large quantities of food in a short period of time uncontrollably, with the same binge-eating symptoms as bulimia. The main difference is that you do not try to get rid of the food afterwards. This can mean you may be overweight for your age and height.⁶

You may binge as a way to cope with difficult emotions such as unhappiness, guilt or low self-esteem and to cope with daily stresses and problems in your life.

Compulsive overeating

If you have compulsive overeating you pick at food all day. You might do this to deal with difficult feelings and for similar reasons to people with binge eating disorder.

[Top](#)

2. What are the symptoms of eating disorders and how are they diagnosed?

You may develop unusual eating habits in order to avoid eating properly.

Signs of anorexia

- avoid food and meals
- pick out a few foods and eat these in small quantities
- carefully weigh and portion food
- carefully check calories and fat content of food
- keep lists of food or keep a food diary
- deny you are hungry

- make excuses to avoid eating
- hide food you claim to have eaten
- repeatedly check your body weight
- try other ways of controlling your weight, such as intense and compulsive exercise
- get rid of what you have eaten by vomiting or using laxatives, enemas or diuretics
- put yourself down as being 'fat' or say you do not matter
- try to please everybody or get approval from other people.

Effects of anorexia on the body

- Severe weight loss
- Constipation and stomach pain
- Dizzy spells and feeling faint
- Downy, fine hair on your body
- Your hair falling out
- Poor circulation and feeling cold
- Dry, rough or discoloured skin
- Your periods stop or do not start
- Dehydration

Physical effects often improve when you recover, but there is a risk of long-term damage such as osteoporosis or not being able to have a child (infertility). It may be useful to talk to your doctor about any steps you can take to reduce your risk of developing long-term problems.

There is a list of organisations at the end of this factsheet that you could contact if you feel that you may have an eating disorder and would like further advice and information.

Signs of bulimia

- Urges to eat large amounts of food
- Moods swings
- Anxiety and depression
- Not feeling good about yourself (low self esteem)
- Feeling ashamed or guilty
- Vomiting after you eat
- Excessive use of laxatives, diuretics or enemas
- Periods of fasting
- Excessive exercise
- Secrecy and reluctance to socialise

Effects of bulimia on the body

- Sore throat
- Bad breath
- Bad skin
- Irregular periods
- Tiredness
- Puffiness of face and fingers

Signs of binge eating disorder and compulsive eating⁷

- Fear of not being able to control eating, and of not being able to stop eating
- Fear of eating around others
- Believing that life will be better if you lose weight
- Putting yourself down with comments after eating
- Blame your failure in social and professional life on your weight
- Depression/ mood swings
- Fatigue
- Using a variety of popular diet plans
- Hiding food in strange places to eat later
- Vague or secretive eating patterns

Effects of binge eating disorder and compulsive eating on the body⁸

- Getting out of breath after light activity
- Excessive sweating
- High blood pressure and/or cholesterol
- Leg and joint pain
- Weight gain
- Decreased mobility due to weight gain
- Loss of sexual desire or promiscuous sexual activity
- Insomnia
- Poor sleeping habits

[Top](#)

3. What causes eating disorders?

We do not know exactly why someone develops an eating disorder. There is not one single cause. It seems to be a combination of factors, which can include:

- your personality
- your culture
- your family life
- things that have happened to you or that you have seen
- feeling that you need to act on impulse
- feeling that you need to achieve perfection
- physical or genetic factors.⁹

Some people believe that eating disorders are a direct result of the pressure from media and fashion to be thin. Whilst this kind of pressure can play a part in dieting behaviours, there are more complicated issues that could cause you to lose control of your eating behaviours.

Causes of anorexia

If you have anorexia, your obsession with weight loss may be because you believe that your value as a person depends on your weight and body

shape. This can lead you to experience an intense fear of being overweight and eating that most people do not experience, even when dieting.

Anorexia stems from some emotional need, which could be lack of stability in your current relationships, anxiety about growing up or experiencing body change, or trying to cope with something traumatic such as sexual abuse. You can develop anorexia even if you have a very supportive family, partner or friends, so it's important to remember that it is no one's fault.

Causes of bulimia

You may develop bulimia because you need an emotional release for a range of issues, such as experiencing physical, emotional or sexual abuse, or problems with family or other relationships. It might be that there isn't an obvious reason but you still need an emotional outlet.

Bulimia and other eating disorders are not helpful ways of coping with problems. If you are feeling this way, you may need support to recover.

You can find out more about getting help for your mental health in our '**Are you worried about your mental health?**' factsheet. You can download our factsheets for free from www.rethink.org/factsheets or call 0300 5000 927 and ask for a copy to be sent to you.

[Top](#)

4. How are eating disorders treated and what treatment should I be offered?

Your first step for getting help is usually through your GP. They can pass your details to specialist services or therapy if you need this.

There are different types of treatments for eating disorders, and you may be offered a combination of these:

- If your body weight is very low, doctors will focus on increasing your weight before starting any therapy. You may stay in hospital or a specialist facility for this.
- Talking therapies are often an important part of eating disorder treatments and may include counselling, cognitive behaviour therapy (CBT), interpersonal therapy (IPT), group therapy, and family therapy. The most suitable treatment for you will depend on your age, weight and situation. You can find out more about different talking therapies in our '**Talking Therapies**' factsheet.
- Family support to help your family address any issues which may have led to your eating disorder and to support the family as a whole
- Sometimes doctors will prescribe medication, such as antidepressants. However, it should not be the only treatment for eating disorders.¹⁰

The National Institute for Health and Care Excellence (NICE) produces guidelines for the treatment of eating disorders. These guidelines recommend that if you have anorexia or bulimia you should be offered psychological therapy. This should be intensive CBT if you have bulimia.

Special forms of CBT have been developed for bulimia and binge eating disorder and you should be able to access these through the NHS.

There is no legal right to specific treatments on the NHS. However, you should get treatments that are recommended in the NICE guidelines unless your doctor has strong clinical reasons why not.

Family members should be included in treatments for all eating disorders.

If you would like more information on the recommended treatments for eating disorders then please see the NICE guidelines for eating disorders. You can find these at

<http://www.nice.org.uk/nicemedia/live/10932/29217/29217.pdf>

According to the Royal College of Psychiatrists, more than half of people with anorexia recover after being ill for an average period of five to six years.¹¹

People who have the most severe cases of anorexia can die. This is less likely if you stay in touch with medical care. As long as your heart and other organs are not damaged, the other complications caused by anorexia will improve slowly when you are eating again.¹²

[Top](#)

5. What if I am not happy with my treatment?

If you ever feel unhappy with how your treatment or care is being handled, or feel that the relationship between yourself and a professional is not working well, the Patient Advice and Liaison Service (PALS) at your NHS trust could be contacted. They can try to resolve any problems or questions you have. You can find your local PALS' details at

[www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/LocationSearch/363](http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/LocationSearch/363)

If you wish to put in a complaint then PALS will also be able to advise you on this. Further information can be found in our factsheet '**Complaining about the NHS or social services**', which is available to download for free from www.rethink.org/factsheets or call 0300 5000 927 and request that a copy is sent to you.

The help of an advocate may be useful in this type of situation. Advocacy can help you understand the mental health system and enable you to be fully involved in decisions about your care. An advocate is someone independent from mental health services who can help to make your voice heard with problems you may come across. They may be able to help with writing letters for you or attending appointments or meetings.

There may be a local advocacy service in your area which you can contact for support. You can search online for a local service or the Rethink Mental Illness Advice Service could search for you.

[Top](#)

6. Information for carers, friends and relatives

If someone you know thinks you may have an eating disorder, they could talk with you about what they have noticed. You might be willing to see a doctor to talk about your feelings or eating patterns. They could offer to support you with this if you wanted them to.

A supportive environment can help someone with an eating disorder to recover. You could ask your friend or relative how best you could help them.

If someone has an eating disorder, you may deny that anything is wrong if someone tries to talk to them about the issue. If you are determined not to talk about it, they could suggest that you look at information about eating disorders to help them understand your situation. They could feel relieved that others are going through similar things and that there is support and treatment available.

They could try to seek emotional support for themselves if they are struggling to cope. They could check whether there are any local support groups for carers, friends and relatives where they live.

If your loved ones need additional support to care for you, they could ask for a carer's assessment. You can find more information in our '**Carers Assessments**' factsheet.

You can download our factsheets for free from www.rethink.org/factsheets or call 0300 5000 927 and ask for a copy to be sent to you.

[Top](#)



beat (formerly the Eating Disorders Association UK) national charity based in the UK providing information, help and support for people affected by eating disorders.

Tel: Adult helpline: 0845 634 1414 Monday to Friday, 10.30am to 8.30pm, Saturday 1pm to 4.30pm

Youthline (up to 25 years): 08456 347650 Monday to Friday 4.30pm to 8.30pm, Saturday 1pm to 4.30pm.

Youthline text service: 07786 201820 (service replies within 24 hours)

Address: beat,
103 Prince of Wales Road,
Norwich,
NR1 1DW

Youthline email service: fyp@b-eat.co.uk

Email: help@b-eat.co.uk

Website: www.b-eat.co.uk

National Centre for Eating Disorders

An independent organisation set up to provide solutions for all eating problems, compulsive or "binge" eating, failed or "yo-yo" dieting, bulimia and anorexia. They provide information and counselling.

Tel: 0845 838 2040

Address: National Centre for Eating Disorders, 54 New Road, Esher, Surrey KT10 9NU

Email: message service via website

Website: www.eating-disorders.org.uk

Something Fishy

A pro-recovery internet based resource site for people with eating disorders. You can contact them with questions or queries through their on-line contact section and filling out the request form. This is a US site so the therapist directory won't apply for the UK, but you might find the information, recovery stories and bulletin boards helpful.

Web: www.something-fishy.org

NICE (National Institute for Health and Care Excellence) produces national guidance on how to treat health conditions. They have produced guidance on eating disorders, which you may find helpful. You can download it for free from the NICE website (www.nice.org.uk) or you can contact NICE publications on 0845 003 7783 for a hard copy. NICE writes copies of these guidelines especially for people with eating disorders and their carers, family and friends.

The **NHS** has information about eating disorders.

Website: www.nhs.uk

The **Royal College of Psychiatrists** has information about eating disorders.

Website: www.rcpsych.ac.uk

You can find free self-help information for anorexia and bulimia on the Get Self Help website:

<http://www.getselfhelp.co.uk/docs/AnorexiaSelfHelp.pdf>

<http://www.getselfhelp.co.uk/docs/BulimiaSelfHelp.pdf>

Northumberland, Tyne and Wear NHS Foundation Trust has produced a free self-help guide to eating disorders, available at

<http://www.ntw.nhs.uk/pic/leaflets/Eating%20Disorders%20A4%202010.pdf>

[Top](#)



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- ¹http://www.b-eat.co.uk/index.php/download_file/view/70/83/,
- ² National Institute for Health and Clinical Excellence (2004) Eating disorders. CG9. London: National Institute for Health and Clinical Excellence. Page 7
- ³ As note 2, page 62
- ⁴ NHS Direct Wales. Encyclopaedia: Bulimia. <http://www.nhsdirect.wales.nhs.uk/encyclopaedia/b/article/bulimia/> (Accessed 12/09/13)
- ⁵ As note 2, page 62
- ⁶ As note 2, page 21
- ⁷ NHS Choices: Binge Eating. <http://www.nhs.uk/Conditions/Binge-eating/Pages/Introduction.aspx> (Accessed 19/09/13)
- ⁸ NHS Choices: Binge Eating <http://www.nhs.uk/Conditions/Binge-eating/Pages/Symptoms.aspx> (Accessed 19/09/13)
- ⁹ As note 2, pages 24-27
- ¹⁰ There is much more detailed guidance on the treatment of eating disorders in the National Clinical Practice Guidance – referenced at note 2.
- ¹¹ Royal College of Psychiatrists. Eating disorders. <http://www.rcpsych.ac.uk/mentalhealthinfoforall/problems/eatingdisorders/eatingdisorders.aspx> (Accessed on 12/09/13)
- ¹² Hoek, H. W, et.al. (2006). Incidence, prevalence and mortality of anorexia nervosa and other eating disorders. *Current Opinions in Psychiatry*, 19, 389-94.

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This factsheet is available
in large print.



Rethink Mental Illness

Phone 0300 5000 927

Monday to Friday, 10am to 2pm

Email advice@rethink.org

Did this help?

We'd love to know if this information helped you.

Drop us a line at: feedback@rethink.org

or write to us at Rethink Mental Illness:

Feedback

PO Box 68795

London SE1 4PN

or call us on 0300 5000 927.

We're open 9am to 5.30pm, Monday to Friday.



Leading the way to a better
quality of life for everyone
affected by severe mental illness.

For further information
on Rethink Mental Illness
Phone 0300 5000 927
Email info@rethink.org

www.rethink.org

Need more help?

Go to www.rethink.org for information on symptoms, treatments, money and benefits and your rights. Or talk to others about your problem at www.rethink.org/talk.

Don't have access to the web?

Call us on 0300 5000 927. We are open 9am to 5.30pm, Monday to Friday and we will send you the information you need in the post.

Need to talk to an adviser?

If you need practical advice, call us between 10am and 2pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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