

The Many Faces of Eating Disorders

Keisha Adams, MD

Tasneem Alaqzam, MD

Medical College of Wisconsin

Division of Adolescent Medicine

Disclosure

- We have no commercial interests to disclose.

Objectives

- Review the Epidemiology of Eating Disorders
- Highlight New Diagnostic Criteria
- Recognize early manifestations of Eating Disorders in Adolescent in the Primary Care Setting
- Manage common medical problems associated with eating disorders

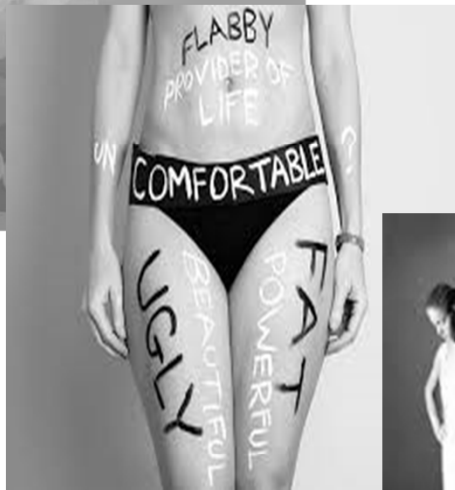
NATIONAL INSTITUTE OF MENTAL HEALTH

Eating Disorders: *About More Than Food*

Has your urge to eat less or more food
spiraled out of control?

Are you overly concerned about your
outward appearance?

If so, you may have an eating disorder.



Did you know...

**4 out of 10 Americans have
either suffered or have
known someone who has
suffered from an eating
disorder**



Introduction

- Understanding the complexities of eating disorders, such as influencing factors, comorbid illness, medical and psychological complications, and boundary issues, is critical in the effective treatment of eating disorders”

-- American Dietetic Association Position Statement, J Am Diet Assoc.2006 Dec;106(12):2073-2082





Eating disorders are not just a disease of teenage girls

The early phase of the disease is often silent or hidden

By the time symptoms are obvious, eating disorder thought patterns and behaviors have been present and worsening for months

Why we care

- #1 Fatal Psychiatric Disorder
- Death rates 3-15%
 - 50% from direct complication of Anorexia Nervosa
 - 25% suicide
 - Death rate 12 X higher than normal for women 12 to 24 years

Why you Should Care


3rd most common chronic condition in adolescence behind Obesity and Asthma

Eating Disorder Statistics

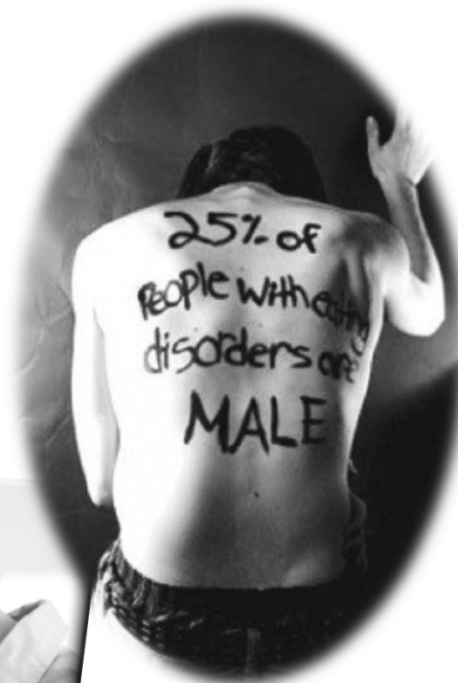
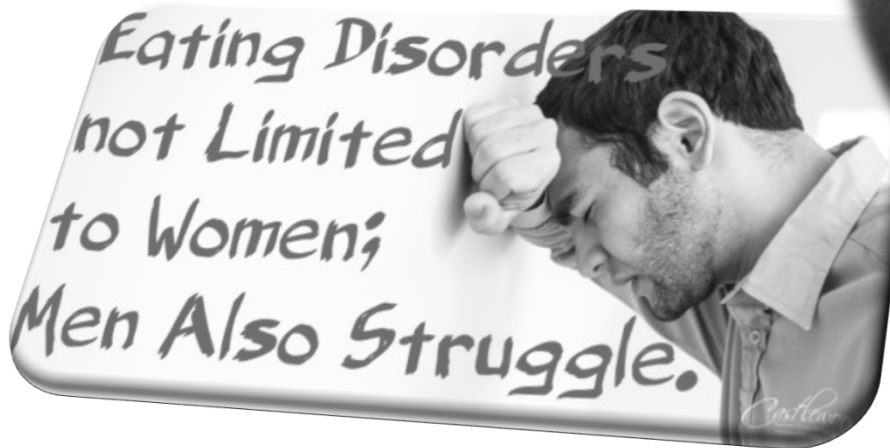
- Anorexia 0.5 – 2% (500-2000/100k)
 - 85% with onset under 20 years old
- Bulimia 1 – 3% (1-3,000/100k)

Mehler in Annals of Internal Medicine 2001

Think eating disorders are only suffered by females?



Men of all ages, backgrounds and sexualities can be affected by eating disorders.



"For the first time I saw another man with an eating disorder. I saw that I was not the only one"
(Focus Group Comment)

"I was told males are not seen here and that there isn't anything for males with eating disorders"
(Interview comment)



Etiology



Sara

16 years old, high school junior

May 2014 - 115 lbs (BMI 20.7, 50thile)

- Decided to “eat right ”and exercise more to “get in shape”

May 2015 - 105 lbs (BMI 18.6, 18thile)

- Avoids eating with family
- Periods stopped 3 months ago



Parents: “Is she pregnant? Using drugs? I knew that new friend was a bad influence!

We need help now! Let’s go see PCP!”

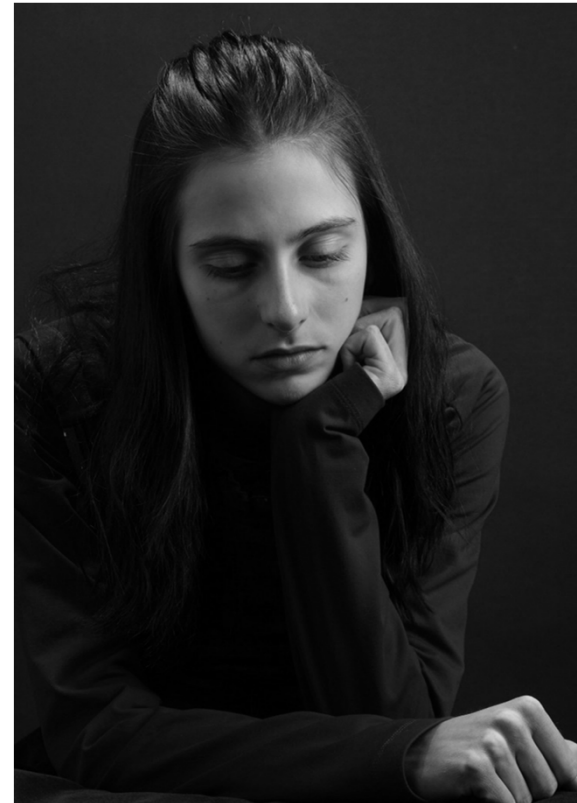


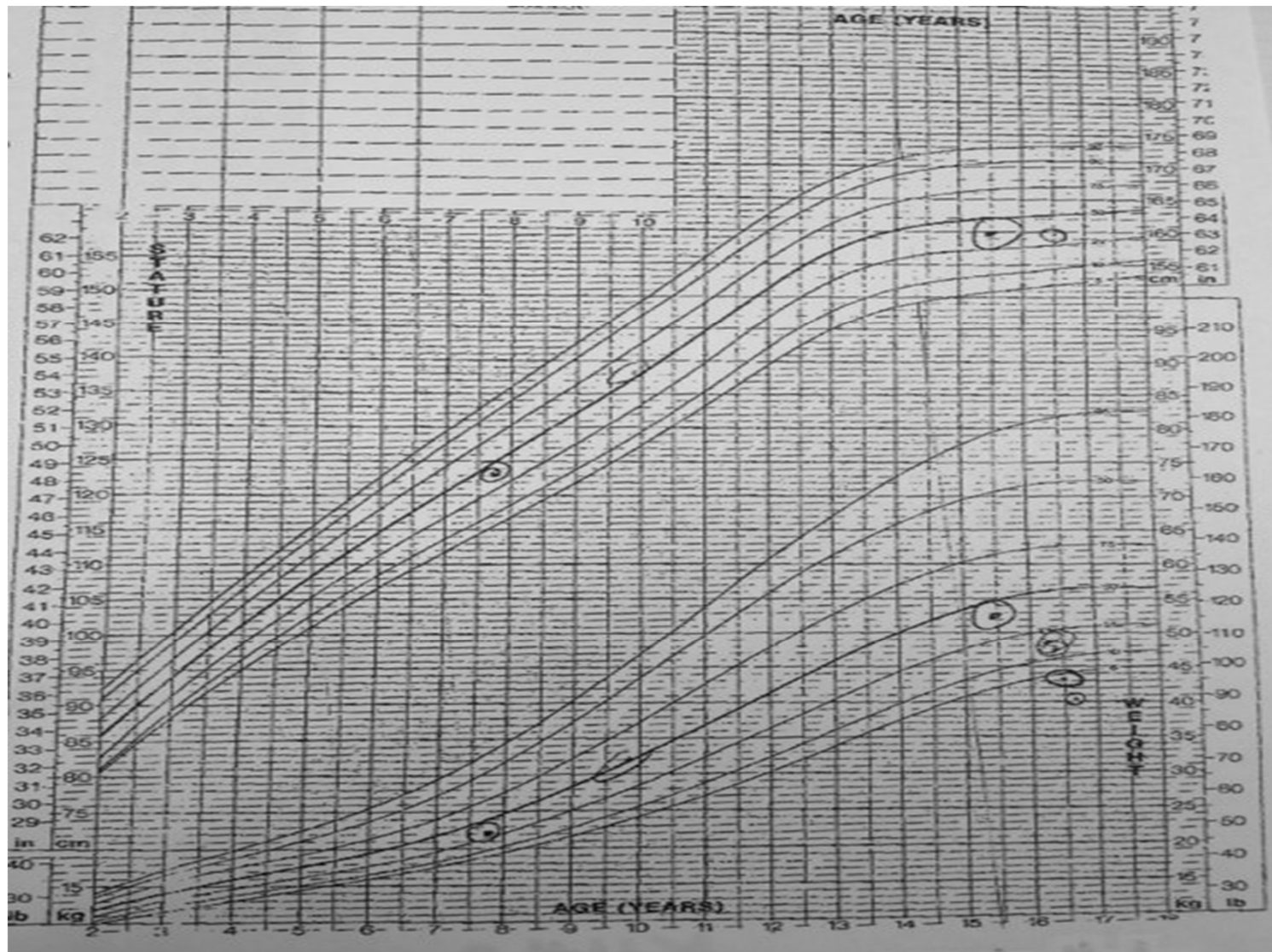
Aug 2015 – 95lbs (BMI 16.9, 5th%ile)

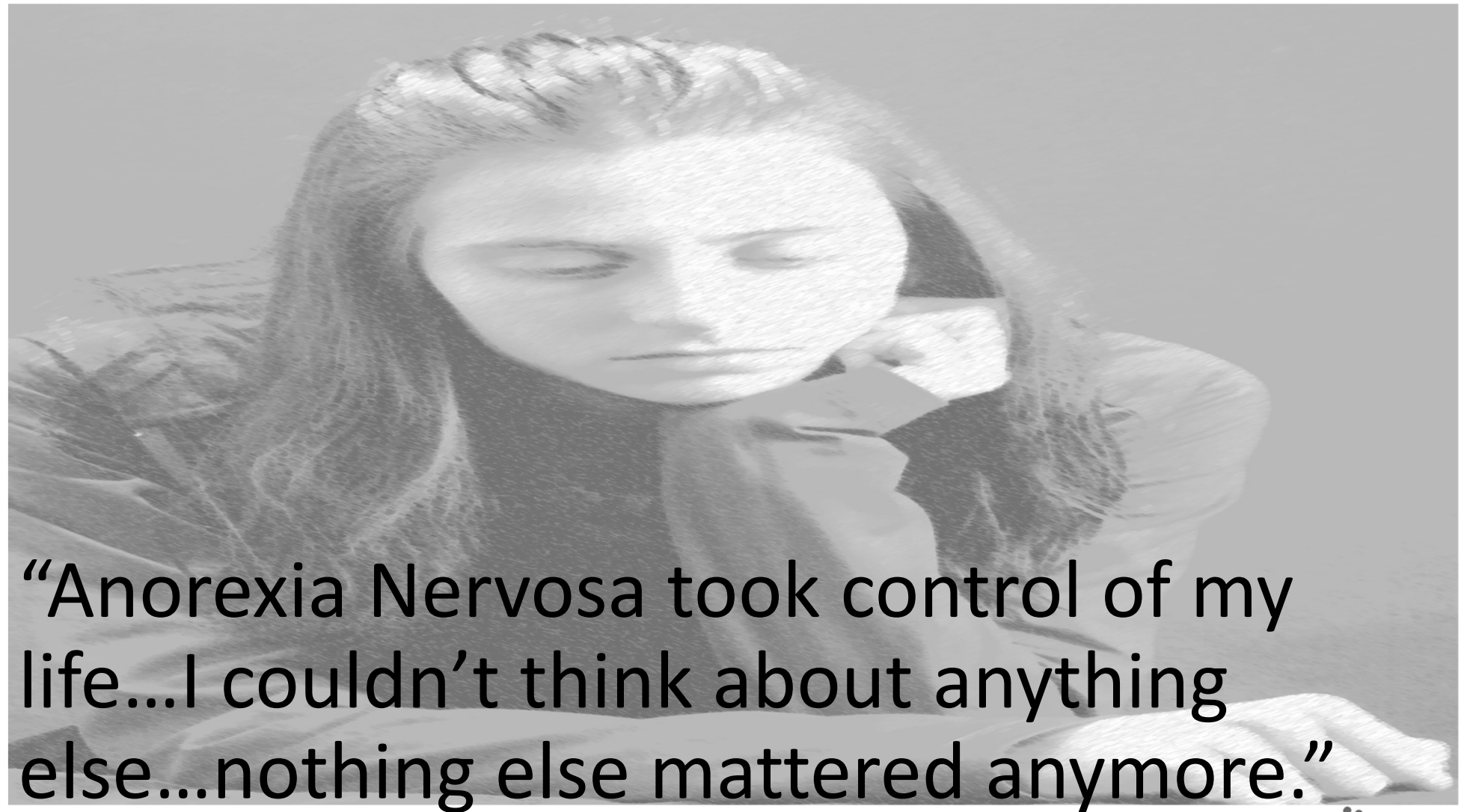
- Exercise is driven and compulsive
- “I can’t eat if I haven’t exercised enough”.
- “I am not happy with the way that I look” I see myself fat!!!

Nov 2015 – 88lbs (BMI 15.6,
<<3rd%ile)

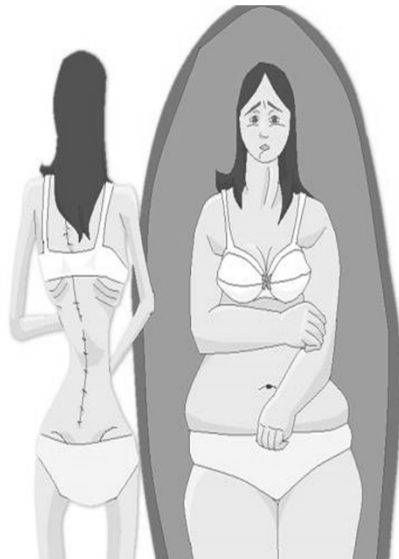
- HR 30
- 74% of IBW







“Anorexia Nervosa took control of my life...I couldn't think about anything else...nothing else mattered anymore.”



Anorexia Nervosa

information

Anorexia is not an illness of the body, it is an illness of the mind.
Lynn Crilly



DSM-V: Anorexia Nervosa

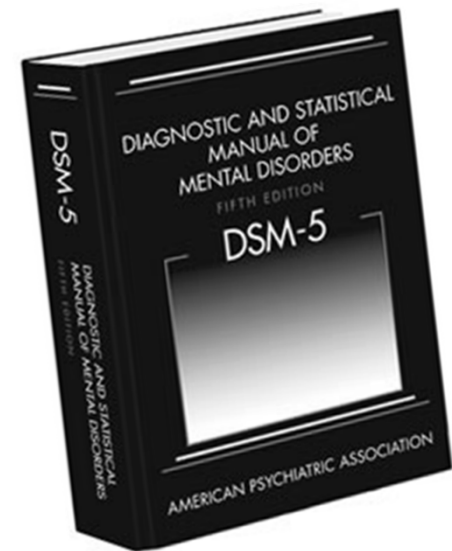
Diagnostic Criteria:

A. Restriction of energy intake relative to requirements leading to a significantly low body weight.

B. **Intense fear of gaining weight** or becoming fat, or persistent behavior that interferes with weight gain, even though at a significantly low weight.

C. **Disturbance** in the way in which one's **body weight** or shape is experienced, undue influence of body weight or shape on self-evaluation, or persistent **lack of recognition of the seriousness of the current low body weight**.

Two types- Restrictive or Binge-eating/purge type



Clinical Manifestations

Behaviors to look for :

- Dieting
- Pursuit of Thinness
- Distorted body image
- Unusual eating attitudes and behaviors
- Increased physical activity
- Purging behaviors
- Frequent weighing
- Wearing baggy or layering clothing
- Isolation
- Irritability and mood changes
- Inflexibility

Clinical Manifestations

- Signs:
 - Weight loss/failure to gain weight
 - Amenorrhea
 - Pubertal Delay
 - Dry Skin with hyperkeratotic areas
 - Lanugo hair
 - Hypothermia
 - Bradycardia
 - Hypotension
 - Acrocyanosis
 - Edema, usually dependent
 - Pitting and ridging of the nails