

中青新世纪英语阅读文库

社会热点系列
Need to Know Series

饮食紊乱

Eating Disorders

Caroline Warbrick

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中国青年出版社
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Eating disorders

When Nikki Hughes died of starvation at the age of 23 she weighed just 30kg (4st 11lb). Nikki died after an 8 year struggle with the eating disorder, **anorexia nervosa** which locked her into a battle with food and her body.

Nikki was 16 when she first became concerned about her weight. She started to diet, cutting back on food whenever she could. Often her meals would consist solely of a slice of tomato and a slice of pepper. By the time she died, Nikki was living on just sips of water. Nikki's sister remembers: 'I saw her getting thinner and thinner. I remember the shock of realizing what had happened the day my mother carried her upstairs like a baby. She looked just like the pictures you see on television of people in famines, starving to death. She was so thin but she still saw herself as a size 20.'

Nikki's story is not an isolated case. In the UK it is estimated that 1 in 25 women aged between 15 and 35 have an eating disorder. The figures for the USA are similar. Men are also affected, and the Eating Disorders Association currently estimate that approximately 10 per cent of people with eating disorders are men.

Big news

Eating disorders are such big news it may make you wonder if it is normal to have one! Every week we seem to hear of someone's battle with anorexia, **bulimia** or **bingeing**. Newspapers love to speculate about whether a celebrity has an eating disorder and we like to read such stories. There are talk shows on television devoted to people's **agonies** with their weight and eating habits. Problem pages in magazines are full of people's misery as they fight with secret bingeing, **obsessions** with food, hatred of their body and punishing diets and exercise schedules.

Is there a difference between having an eating disorder and the day-to-day concerns that people have about their diet, weight and body? Is feeling dissatisfied with your body, going on a diet or thinking carefully about what you eat necessarily a problem? Or is it the beginning of the slippery slope down into eating disorders and illness? This book will help to make clear what eating disorders are. It will explain how professionals describe eating disorders, and the signs they look for to decide if someone has an illness. It will also explain why some people develop eating disorders and suggest ways of coping with these illnesses.



What are eating disorders?

An eating disorder is the name given to a range of problems that people have with eating and the way they think and feel about their bodies. Some of these problems are caused by people eating too little, and others by eating too much. Other eating disorders are caused by the things people do to keep their weight down.

There are three main types of eating disorders: anorexia nervosa, bulimia nervosa and **compulsive** eating disorder (also known as **binge** eating disorder). Those who suffer from anorexia nervosa, or anorexia, are known as **anorexics**. Sufferers of bulimia nervosa are called **bulimics**.

Anorexia is characterized by deliberate attempts to lose weight by the individual. It is likely to be the condition that comes most readily to mind when people are asked to talk about eating disorders. Most people are able to describe some of its **symptoms** – for example, excessive dieting, extreme thinness and a **distorted** body image.

Bulimics experience episodes of uncontrollable eating, called bingeing, followed by periods of **purging**. Purging is where the bulimic attempts to get rid of all the food they have eaten by either making themselves sick or by taking **laxatives**.

People with compulsive eating disorders also find it hard to stop eating or thinking about food. However, unlike bulimics, they do not engage in purging. Many people with compulsive eating disorders also have problems with being overweight.

What are eating disorders?

Eating disorders:

- are not primarily about food but about underlying emotional **turmoil**
- include anorexia nervosa, bulimia nervosa, and compulsive eating disorder
- can affect women and men of all ages, from all backgrounds and ethnic groups.



Eating disorders are not just about food, but underlying emotional turmoil.

What are eating disorders?

Recognizing the signs

Often doctors and other professionals have to decide whether someone has an eating disorder. They look for a number of signs and then try to make judgements about how much of a problem these things are for the person. Some of the signs are easy to recognize, for example, the physical symptoms that are a direct result of some eating disorders. Other signs are much harder to detect, for example, the way someone feels and thinks about themselves and how they behave around food. It is relatively easy to tell when someone has extreme problems. However, it is much more difficult to make judgements about thinking, feelings and behaviour which are only slightly different from normal. Here are some of the things professionals might look for as clues of eating disorders:

Physical symptoms

Excessive dieting, bingeing and purging all cause physical changes in the body. These are relatively easy for a doctor to detect and are discussed in more detail later in the book.

Feelings

Eating disorders are not primarily about food, they are about underlying emotional **distress**. Very often people with eating disorders feel deeply unhappy and are in considerable distress about themselves and their eating habits. They talk about feeling ugly and hating themselves. They also feel a lot of guilt, anxiety and fear about their eating and their bodies. They often feel out of control, particularly around food.

Thoughts

People with eating disorders are often troubled by **obsessive** thoughts about food, their weight and their bodies. Often, these thoughts are very negative. For example, an anorexic might be troubled by how many **calories** they have eaten. Or, if they haven't managed to exercise, how much weight they might have put on in a day. Bulimics might not be able to get out of their mind their walk home past a cake shop. Often people with eating disorders think about themselves in distorted ways.

For example, anorexics often see themselves as fat even though they are very thin.

Behaviour

Many people with eating disorders often behave in odd ways, particularly around food. For example, an anorexic might show a great interest in food – preparing and serving it for others – but then refuse to eat it themselves. People suffering from bulimia might always avoid other people after eating. Or they might have certain times in the day when they are very angry about being disturbed. This is because they want to make themselves sick in secret.

People with eating disorders do not fit into neat categories. However, there are some useful guidelines to help professionals decide whether someone is experiencing problems:

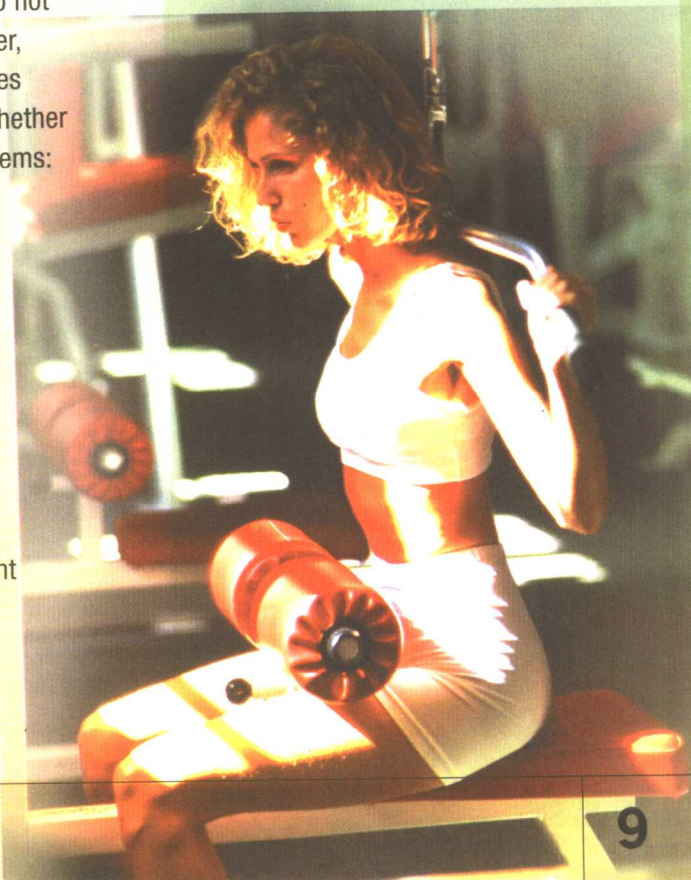
People with compulsive eating disorders or bulimia may:

- overeat in secret, either all or some of the time
- feel guilty that their eating is not normal
- feel guilty about what they have eaten and feel like a bad person
- try constantly to lose weight but fail in their attempts

- think about food much of the time
- feel out of control around certain kinds of food or any food
- make themselves **vomit** or take laxatives to get rid of unwanted food.

People with anorexia may:

- be underweight but feel overweight
- be terrified of gaining weight
- be very fearful of eating
- eat extremely little food or only a few types of foods
- exercise excessively.



Anorexia nervosa

Anorexia nervosa is the best known eating disorder. Most people are able to describe some of its symptoms – for example, excessive dieting, extreme weight loss and fear of food.

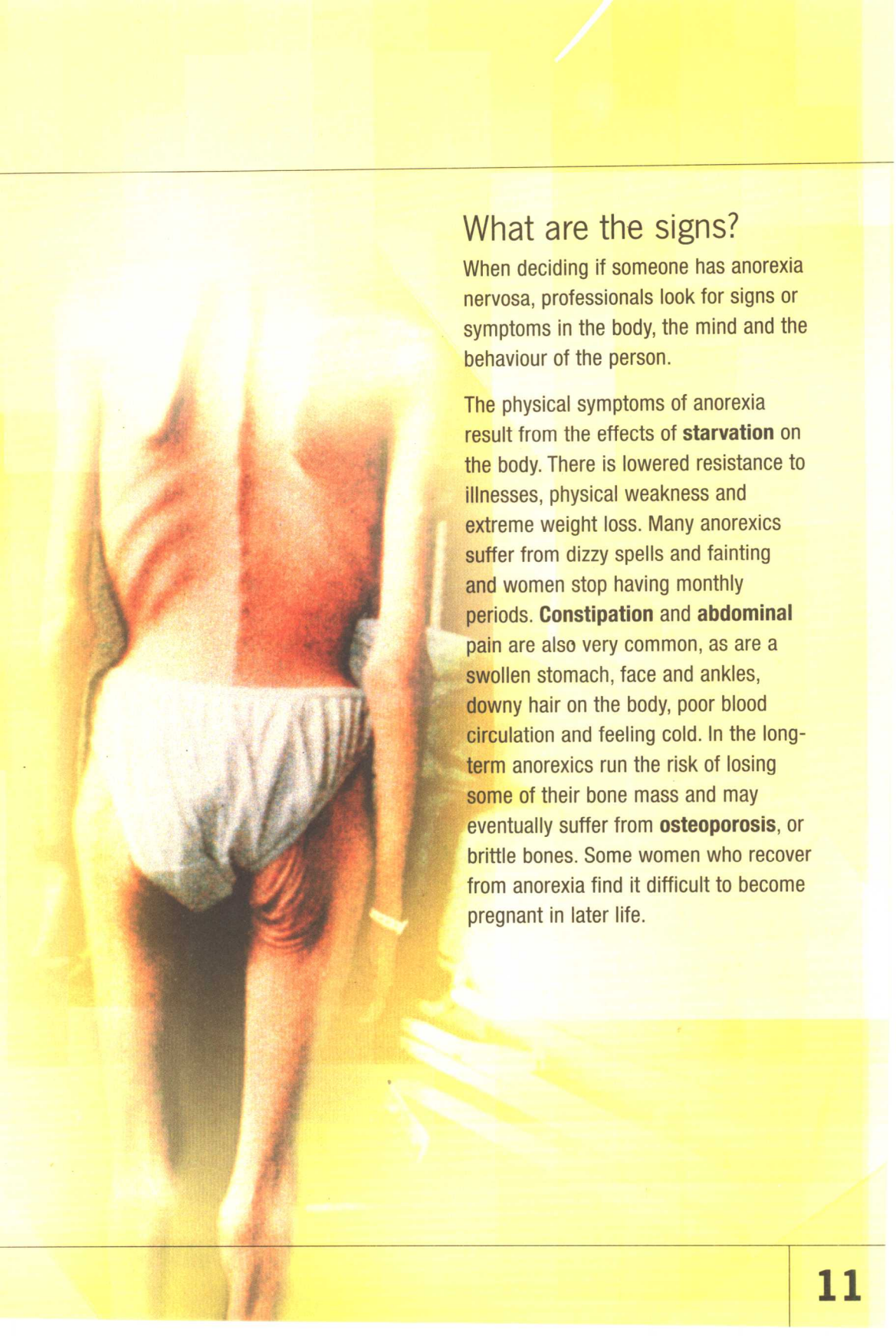
‘Anorexia nervosa’ literally means ‘loss of appetite for nervous reason’. However, this definition is slightly misleading because the sufferer has, in fact, not lost their appetite. Anorexics often feel extremely hungry and think about food all the time. They do not allow themselves to eat because they are afraid of what the food will do to them, or are disgusted by the act of eating itself. People with anorexia try to avoid eating by avoiding food altogether, or by reducing their calorie intake. They may also get rid of calories eaten by exercising excessively or purging. Some anorexics restrict, to a dangerous level, the amounts they eat and drink.

“Sometimes there were days I would eat hardly anything at all. Even so, every morning I would get up early so that I could cycle to the local pool and do lengths before school.”

(Maria 15)

The deeper problem

Anorexics devote so much energy to food that it is hard to realize that anorexia is not really about food at all. In fact, the roots of anorexia lie in deep unhappiness, anxiety and low **self-esteem**. These feelings lead the anorexic to develop ways of behaving that help them to feel better about themselves and more in control. However, since this behaviour does not solve their problems, the anorexic is locked into a continuing battle, with very negative effects.



What are the signs?

When deciding if someone has anorexia nervosa, professionals look for signs or symptoms in the body, the mind and the behaviour of the person.

The physical symptoms of anorexia result from the effects of **starvation** on the body. There is lowered resistance to illnesses, physical weakness and extreme weight loss. Many anorexics suffer from dizzy spells and fainting and women stop having monthly periods. **Constipation** and **abdominal** pain are also very common, as are a swollen stomach, face and ankles, downy hair on the body, poor blood circulation and feeling cold. In the long-term anorexics run the risk of losing some of their bone mass and may eventually suffer from **osteoporosis**, or brittle bones. Some women who recover from anorexia find it difficult to become pregnant in later life.

Anorexia nervosa

Many anorexics think about themselves in distinctive ways. For example, they have an intense fear of gaining weight, and often have a very distorted picture of their body shape and weight.

Anorexics see themselves as fat although they are extremely thin.

Depression and unhappiness are very common feelings in people with this eating disorder.

Often when people develop anorexia they show distinct changes in the way they behave. A person may change from being focused and clear-minded, to

being indecisive and having problems concentrating. Often anorexics behave in strange ways around food. They may be anxious to cook for others but unwilling to eat themselves. Sometimes they develop **rituals** when preparing or eating food – eating very slowly or only off ‘their own plate’. Anorexics often change the way they dress – wearing large sweaters and baggy clothes to disguise their thinness. It is also likely that a previously sociable person will start to become withdrawn.

“Both my family and friends would question me endlessly on why I was not eating. Was I ill, worried about my exams? They also noticed that I was always cold. Even in the middle of summer I would be wearing a big sweatshirt. Eventually my mum made me go to the doctors.”

(Julie 15)



Jenny

Jenny had always been popular and successful at school. She was good at most subjects but had a special talent for music. At the age of 14 Jenny was asked to play in a school concert. The next day one of the boys in her class made a nasty comment about her weight. Although Jenny knew the boy was trying to be funny in front of his friends, she took the comment to heart and decided to go on a diet.

Jenny became **obsessed** by her diet and losing weight. There were days when she hardly ate anything at all. Jenny also started to spend a lot more time on her own in her room, studying or practising, and no longer wanted to go out with her friends.

Everyone noticed a gradual change in Jenny. Besides losing weight they also saw her becoming more **introverted** and unhappy. She seemed to lack the enthusiasm and energy she had shown when she was younger. Jenny's mother eventually persuaded her to visit the doctor. At the time her weight was below 6 stones (41kg). She was diagnosed as anorexic.

Both dancers and models are under pressure to maintain ultra-thin bodies required for their professions.



Bulimia

It is only in the last 30 years that bulimia nervosa has been recognized by doctors as an eating disorder in its own right. Professionals involved in the study of eating disorders noticed that there were significant numbers of people who were not anorexic but still had problems with eating and their weight. However, instead of starving themselves these people admitted to hating their bodies and weight yet regularly, and often secretly, eating large quantities of food. Then, unable to stop eating even when physically full, they would attempt to control their weight by making themselves vomit, by crash dieting or by using laxatives. Most of these people were disgusted by their behaviour and aware that it could not be normal. However, they were unable to overcome their need to eat and then get rid of the food. At first bulimia was thought to be a rare disorder. Now recent studies show that it is strikingly common among young women.


Binge eating

The term bulimia is used to describe an illness that contains a range of very specific behaviours. Bulimics have regular episodes of binge eating, usually in private. Foods eaten during a binge

often include biscuits, chocolate, crisps, bowls of cereal, large amounts of toast with butter, cakes and ice cream.

Sometimes the food is enjoyed, but it is more likely to be eaten quickly and without really tasting. Often this kind of eating will be accompanied by feelings of anxiety, guilt and **remorse**. Following a binge, but not always immediately afterwards, bulimics attempt to get rid of the food they have eaten. They do this by making themselves sick, and/or by taking laxatives. Some bulimics try to compensate for a binge by excessively exercising or by crash dieting.



A photograph of a woman with short brown hair, wearing a light blue shirt, eating a large sandwich. She is smiling and looking towards the camera. In the foreground, there is a large pile of fast food: a red bowl of french fries, a large bag of red and white striped chips, a bottle of orange juice, and a large container of food. The background is slightly blurred, showing a kitchen setting.

The characteristic cycle of bingeing and purging can vary from person to person. Some people binge and purge several times a day, and others only once or twice a month. The average is once daily, with the number of calories consumed in the binge ranging from 1200 to 11,500. This compares to an average intake for a healthy young woman of around 2000 calories during the course of a whole day.

Bulimia

Like anorexia nervosa, the roots of bulimia lie in the way people feel about themselves. Their attitude to food is a symptom of unhappiness, for example, not of a dislike of food.

The difficult thing about bulimia is that once someone gets into the cycle of bingeing and purging it is very hard to break. Purging causes the person to become hungry which in turns triggers thoughts of food and eating. This thinking about food becomes obsessional and continues until the bulimic starts to eat again, often uncontrollably. Driven by thoughts of guilt, disgust and **self-loathing** the person purges themselves of all they have eaten and the cycle begins again.

What are the signs?

Bulimia is far harder to detect than anorexia. Bulimics are often of normal weight and usually take great care to make sure that their illness is kept a secret. However, there are some signs that suggest someone might be experiencing problems.

If someone has been suffering from bulimia for some time there can be physical changes in the body, some of which can be quite dangerous. Many of these changes are caused by excessive vomiting and laxative use. Regular vomiting can lead to a sore throat, erosion of the teeth, swollen **salivary glands** and poor skin condition. It can also upset the body's fluid and mineral balance. Lower amounts of **potassium** in the body can lead to muscle cramps and weakness, kidney damage and irregular heartbeat. There is also a possibility of irregular periods, tiredness and general lack of energy. Through binge eating, the stomach can become swollen and sometimes painful. Laxatives can lead to **dehydration** and constipation and, with long term use, the possibility of **incontinence**. However, once cured of bulimia the individual returns to normal, relatively quickly.