



# The Mulberry Report

Solutions For Life

June 26, 2009

## Eating Disorders: It's Not Just About Food

By Mary Lou Petrisko, LCSW, ACSW and Stephanie Titzer, Psy.D, HSPP

Do you or a family member have a good or bad day depending upon the number on the scale? Do you or a family member decide when to quit eating by what others leave on their plate rather than whether you are full or not? Have you or a family member not engaged in an activity due to being too "fat" to wear clothes needed to engage in the activity? If you answered "yes" to any of these questions, an eating disorder may be present.

Eating disorders involve extreme emotions, attitudes, and behaviors surrounding weight and food. They are serious emotional and physical problems that can have life-threatening consequences for females and males.

- Close to 10 million females and 1 million males in the U.S. are battling eating disorders such as anorexia and bulimia, while millions more suffer from binge eating disorder.
- Ten percent of all eating disorders occur in males.
- The onset of eating disorders most commonly occurs during puberty and the late teen/early adult years, but symptoms can occur as young as kindergarten.

According to the National Eating Disorders Association (NEDA), over one-half of teenage girls and nearly one-third of teenage boys use unhealthy weight control behaviors such as skipping meals, fasting, smoking cigarettes, purging, and taking laxatives.

Eating disorders typically are of three types: anorexia nervosa, bulimia nervosa, and binge eating disorder.

- **Anorexia Nervosa** is characterized by self-starvation and excessive weight loss.
- **Bulimia Nervosa** is characterized by a secretive cycle of binge eating followed by purging. Bulimia includes eating large amounts of food in short periods of time, then getting rid of the food and calories through vomiting, laxative abuse, or over-exercising.
- **Binge Eating Disorder (also known as Compulsive Overeating)** is characterized primarily by periods of uncontrolled, impulsive, or continuous eating beyond the point of feeling comfortably full. While there is no purging, there may be repetitive diets and feelings of shame or self-hatred after a binge.

Eating disorders are complex conditions that arise from a combination of long-standing behavioral, emotional, psychological, interpersonal, and social factors. While

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### The Mulberry Report

The Mulberry Report is a publication of Mulberry Center, Inc. for our patients and area companies served by our Employee Assistance Program (EAP).

If there is a topic that you'd like to see covered in a Mulberry Report issue, please contact Ralph Nichols, executive director, at [eap@mulberrycenter.org](mailto:eap@mulberrycenter.org) or 812-423-4700. Visit our website at [www.mulberrycenter.org](http://www.mulberrycenter.org).

**“No one is free who is a slave to the body.”**

-Seneca, Roman Statesman, ca. 4 B.C. – A.D. 65

For more information on symptoms, physical complications, and treatment, as well as additional information on what to do if you suspect someone has an eating disorder, visit the following web sites:

[www.somethingfishy.org](http://www.somethingfishy.org) - general information and personal experiences

[www.edap.org](http://www.edap.org) - Eating Disorders Awareness and Prevention

[www.edreferral.com](http://www.edreferral.com) - eating disorders referral site

[www.AEDweb.org](http://www.AEDweb.org) - The Academy for Eating Disorders

[www.NationalEatingDisorders.org](http://www.NationalEatingDisorders.org) - NEDA

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eating disorders may begin with a preoccupation with food and weight, they are most often about much more than food. For an individual with an eating disorder, food is often the means to an end in an effort to attain some sense of control when the rest of their life seems chaotic. In individuals with eating disorders, the use of food or the control of food comes to serve as a way to deal with the conflicts, pressures, and stresses of life or to manage feelings and emotions that are otherwise overwhelming. Although dieting, bingeing, and purging may begin as a way to cope with painful emotions and to feel in control of one's life, these behaviors ultimately damage a person's physical and emotional health.

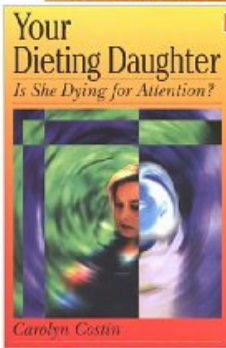
For parents, do not think you are a “bad parent” if your child's friend or school personnel contact you about the possibility of your child having an eating disorder as individuals with eating disorders are good at hiding their condition. Here are some warning signs to pay attention for if you think someone may have an eating disorder:

General Signs:	Anorexia Nervosa:	Bulimia Nervosa:	Binge Eating Disorder:
<ul style="list-style-type: none"> <li>- Makes excuses to skip meals and eats alone</li> <li>- Preoccupation with food-related subjects in conversations</li> <li>- Has difficulty admitting to problems and expressing feelings</li> <li>- Makes self-critical statements about body and other aspects of self</li> <li>- Worries excessively about other's opinions</li> <li>- Begins to isolate</li> <li>- Becomes increasingly perfectionistic of self and others</li> </ul>	<ul style="list-style-type: none"> <li>- Significant weight loss</li> <li>- Focus on "good" foods and "bad" foods</li> <li>- Drastically reduces fat in diet</li> <li>- Makes statements related to perceptions of oneself as overweight (though thin)</li> <li>- Verbally denies being hungry</li> <li>- Skips meals and may also purge food</li> <li>- Engages in food rituals such as cutting food into small pieces, leaving food on plate, eating very slowly</li> <li>- Engages in excessive exercise</li> <li>- Develops other rituals such as difficulty changing pen colors when note-taking; rigid schedule</li> <li>- Wears multiple layers of clothing</li> </ul>	<ul style="list-style-type: none"> <li>- Goes to restroom after meals</li> <li>- Eats large quantities of food without gaining weight</li> <li>- Eats rapidly</li> <li>- Unexplained disappearance of food</li> <li>- Has mood swings</li> <li>- Appearance of laxative or diuretic wrapper in trash</li> <li>- Swelling around the jaw, blood shot eyes; dental problems</li> </ul>	<ul style="list-style-type: none"> <li>- Weight gain (though not always)</li> <li>- Frequently eats large amounts of food rapidly</li> <li>- Eats to the point of being overly full</li> <li>- May eat only in isolation</li> </ul>

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### Recommended Reading

[Your Dieting Daughter](#)  
(1997) by Carolyn



### References

The information in this article is from the following web sites:

[www.eatingdisorders.cc](http://www.eatingdisorders.cc)

[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

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The following are tips to prevent eating disorders that the National Eating Disorder Association publishes on its web site:

- Learn all you can about anorexia, bulimia, and binge eating disorders. Awareness will help you avoid judgmental or mistaken attitudes about food, weight, body shape, and eating disorders.
- Discourage the idea that a particular weight or body size will lead to happiness and fulfillment.
- Avoid categorizing foods as “good/safe/no-fat” vs. “bad/dangerous/fattening.”
- Make a decision not to judge others and yourself on the basis of weight or body shape.
- Become a critical viewer of the media and its messages about self-esteem and body image and help children challenge the ways in which television, magazines, and other media imply that a slender body means power, popularity, happiness, or perfection.
- As a parent, be a good role model in regard to sensible eating, exercise, and self-acceptance.
- Encourage your child to be active and to enjoy what their bodies can do and feel like.
- Promote self-esteem and self-respect in children on the basis of intellectual, athletic, and social endeavors.
- Be a model of healthy self-esteem and body image. Choose to talk about yourself with respect and appreciation. Choose to value yourself based on your goals, accomplishments, talents, and character.
- Embrace the natural diversity of human bodies and celebrate your body's unique shape and size.

If you suspect someone has an eating disorder, communicate your concerns in a calm manner sharing observations of their behaviors that have led to your concerns. Telling someone with an eating disorder to “eat” or “stop eating” or “go exercise” is not helpful. Gently but firmly encourage the person to seek help from a trained professional. If treatment is warranted, a multidisciplinary team approach, including a physician, nutritionist, therapist, and possibly a psychiatrist and fitness trainer, is recommended.

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