Anorexia Nervosa Essay, Research Paper

Anorexia Nervosa

In America, girls are given the message at a very young age that in order to be happy and successful, they must be thin. Given the value which society places on being thin, it is not surprising that eating disorders are on the increase. Every time you walk into a store, you are surrounded by the images of emaciated models that appear on the covers of fashion magazines. Thousands of teenage girls are starving themselves daily in an effort to attain what the fashion industry considers to be the “ideal” figure. The average model weighs 23% less than the average woman. Maintaining a weight 20% below your expected body weight fits the criteria for the emotional eating disorder known as anorexia. Most models, according to medical standards, fit into the category of being anorexic (Thompson, Colleen).

Anorexia has been known and recognized by doctors for at least 300 years. Most researchers agree that the number of patients with this life threatening disease is increasing at an alarming rate. The Rice Counseling Center defines anorexia as “an emotional disorder characterized by an intense fear of becoming obese, lack of self-esteem and distorted body image which results in self-induced starvation”. In accordance with information given by the Counseling Center at the University of

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Virginia, the development of this disease generally begins at the age of 11 or 18. Significantly, these ages coincide with new phases of a girl’s life, the commencement and ending of adolescence. Recent estimates suggest that out of every 200 American girls between this age span, one will develop anorexia to some degree. The disease develops over a period of time during which the sufferer changes her eating patterns from normal or near normal to a very restricted diet (S.C.A.R.E.D. Website). This process can take anywhere from months to years.

Clinically, an anorexic is diagnosed by having a body weight 20% below the expected body weight of a healthy person at the same age and height of the eating disorder patient. The anorexic often becomes frightened of gaining weight and even of food itself. The patient may feel fat, even though their body weight is well below the normal weight for their height. Some also feel they do not deserve pleasure out of life and will deprive themselves of situations offering pleasure, including eating. The fears of anorexics become so difficult to manage that the sufferer will gradually isolate him/herself from other people and social activities (S.C.A.R.E.D. Website). This happens so the sufferer can continue the exhausting anorexic behaviors. Although 30% of anorexics eventually die from the disorder, approximately one third overcome the disease with psychiatric help.

While the cause of anorexia is still unknown, a combination of psychological, environmental, and physiological factors is associated with the development of this disorder (Cove, Judy). The most common cause of anorexia in a girl is perception of

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her weight. Anorexics feel as if they are heavier than the others around them, and believe the quickest way to lose weight is to simply stop eating. “I became obsessed

with body image. I kept journals and in one pathetic passage I described how I went for sixteen days on water, and only about two glasses a day” says former anorexic Nanett Pearson, Miss Utah 1996. Ironically, when a person stops eating, their body goes into starvation mode losing very small amounts of weight. When the body receives food, it is then stored away until the next time food is obtained. At first, this method may seem to work and the subject loses weight, but as the body soon adjusts to the lack of food it learns to use the energy it is given stingily. Another cause of anorexia is the need to obtain perfection. A perfectionist desires excellence in all aspects of their life. When they cannot achieve perfection in their endeavors, they “punish” themselves by restriction or starvation. A perfectionist likes to be better than everyone else, if she sees someone with a waist an inch smaller, her waist must be two inches smaller.

Anorexics sometimes desire control over their lives, including their physical and emotional surroundings. Miss Pearson explains “I loved the power I felt in starving myself”. People who fall towards anorexia often times feel they have a lack of control in their lives and the only thing they can control is what they eat. They have control over their body and eat exactly what they want or eat nothing at all. It is not uncommon to find an anorexic that feels “high” after periods of starvation.

Overall, eating disorders can have a very “numbing” effect and give victims a feeling of power over their own emotions. Deep emotional conflicts can also contribute to the disease. When a child is told that she is fat, ugly, or stupid, often enough she

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believes those comments. As she grows into an adolescent, her hips begin to widen, acne appears on her face, and fat begins to deposit in places it never had before.

The names she was called as a child begin to seem true in her mind. She looks in the mirror and sees a fat girl. She begins dieting at first and soon decides to stop eating to acquire small features similar to when she was younger.

The effects of anorexia nervosa are severe and sometimes irreversible. It can cause changes externally, internally, and psychologically. The external changes can be dramatic weight loss, headaches, kidney infections, dry skin, hair loss, and growth of fine body hair. The internal changes include loss of menstrual cycle, low blood pressure, swelling, loss of bone density, liver damage, dental problems, constipation, infertility, extreme temperature sensitivity, cramps, poor circulation, diarrhea, dehydration, slowed or irregular heart rate, and dilation of intestines. Psychologically, the anorexic suffers with isolation from others, impaired neuromuscular functions, mood swings, fainting spells, insomnia, weakness, hyperactivity, low self esteem, fatigue, depression, self-hatred, electrolyte imbalance, loss of sexual desire, psychological, physical, and biochemical disturbances, and eventually death. It is said that up to 30% of anorexics either die from complications due to the eating disorder or commit suicide as a result of the emotional turmoil in their lives.

Treatment for anorexia nervosa usually consists of nutritional therapy, individual psychotherapy, and family counseling. A team made up of pediatricians, psychiatrists, social workers, and nurses often administer treatment. Some physicians hospitalize anorexia patients until they are nutritionally stable, while others prefer to work with

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patients in a family setting. The most urgent concern of the physician is getting the patient to eat and gain weight, this is accomplished by gradually adding calories to the

patient’s daily intake (Cove, Judy). When hospitalized, privileges are sometimes granted in return for gaining weight. Individual psychotherapy is also necessary in the treatment of anorexia to help the patient understand the disease process and its effects. Therapy focuses on the patient’s relationships with her family, friends, and the reasons she may have fallen into a pattern of self-starvation. As a patient learns more about her condition, she is often more willing to try to help herself recover. In treating anorexia nervosa, it is extremely important to remember that immediate success does not guarantee a permanent cure. Sometimes, even after successful hospital treatment and return to normal weight, patients suffer relapses. Follow-up therapy lasting three to five years is recommended if the patient is to be completely cured (Cove, Judy).

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