Anorexia Nervosa

“A fun house mirror can cause a temporary distortion of everyone’s appearance. People with anorexia nervosa report a similar distortion of body image at all times, describing themselves as much fatter than they really are,” (Kalat, 2002, p. 427). Anorexia nervosa is a serious disease that affects five to ten percent of the population, 95 percent of which are women (Cahill, 1996). The literal translation of anorexia is “loss of appetite” and nervosa meaning “for reasons of the nerves” (Kalat, 2002). A more general definition of the disease is “the self-imposed starvation resulting from a distorted body image and an intense and irrational fear of gaining weight,” (Cahill, 2002, p. 36).

The cause of anorexia nervosa is unknown although there are estimations of reasoning for the occurrence of the disease. The most common thought for the onset of anorexia is the inaccurate depiction of the female form in magazines, television, movies and modeling advertisements (Cahill, 1996). These “perfect women” are far from the healthy weight of a woman. It is thought that once a person perceives this thin body type as the “ideal form,” the need to be thin increases. Once that person begins to lose weight at a normal rate, they can become obsessed with their weight and diet beyond what is healthy. Another reason that is thought to provoke the onset of anorexia is one’s need to have a feeling of control over an aspect of their life (Kalat, 2002). The one thing that no one can control but one’s self is that act of eating. By not eating, an anorexic may feel a certain power because they are in control (Cahill, 1996). Some anorexics display high energy levels and can “run long distances, compete in sports, work diligently on their school assignments, and sleep very little,” (Kalat, 2002, p. 426). The motivations for someone to become anorexic are still unknown, but the most common
attributers to the disease are women’s need to be perfect and their pride in “the extreme self-control they demonstrate by refusing to eat” (Kalat, 2002, p. 426).

The symptoms of anorexia nervosa are hard to detect in the early stages. The main sign of the disorder is a 25 percent or greater weight loss in a short amount of time for no apparent organic reason (Cahill, 1996). This quick loss of weight, when coupled with a compulsive need to be thin and fear of becoming fat, is almost always classified as anorexia nervosa (Cahill, 1996). Another sign that someone may be suffering from the disease is if a decrease in food consumption is noticed. If the person refuses to eat, even healthy foods, that is a sign that they may be suffering from anorexia. Sometimes the victim may feel the need to eat, and will consume very small portions of low calorie foods such as vegetables, especially salads. If the sufferer is not satisfied with the low calorie food that they are consuming in small portions, they may also binge on sweets and high carbohydrate foods (Cahill, 1996). To binge means to eat a large amount of food at one time. Ones the person has binged, they commonly purge, or throw up, the food that they just consumed so that they do not digest it, and gain the calories. This act of binging and purging is known as bulimia nervosa, and commonly coincides with anorexia nervosa (Cahill, 1996). Both eating disorders are commonly associated with a state of depression. The victim may have feelings of worthlessness along with suicidal thoughts. These feelings may be due to the social pressures to be thin and beautiful (Cahill, 1996). Although the signs of anorexia nervosa are hard to detect when in the early stage, it is best to notice the slight signs before the disease progresses to a dangerous level.

In my own experience I have seen that anorexia is a scary and dangerous disease. My sister experienced this disorder when we were both in high school and on the dance team. She would see the models in the magazines, and the other dancers from other schools and always tell
me that she thought she was fat. No matter how many times I would tell her that she was perfect just the way she was, she would insist that she was fat and needed to lose weight. She was already at a healthy weight of 110 pounds for her height of five feet, four inches, and she did not need to lose any weight. At first it was hard to notice the signs because she just cut back on her amounts of food that she would eat. Instead of eating her whole sandwich at lunch, she would only eat half, but still eat all her fruit and drink her whole soda. At dinner, she would take smaller portions of all the dishes and she would not finish it all. She would exercise outside of dance practice, which would total to about five or six hours of exercise each day. After about a month or two, she would become obsessive about her exercise routines and if she could not fit them into her schedule she would become very angry. It was then that I began to notice she was losing a lot of weight. She looked much thinner then she was before and her bones were becoming more noticeable. She did not look as bony as the people in the pictures they show in books of anorexic people, but I could notice a definite difference since I see her everyday. When I would talk to her about it, she would tell me that there was nothing wrong and that she was just trying to look like all the other dancers. I was beginning to get worried about her. When my parents finally noticed what was going on with her, they began to monitor her food and make sure that she ate everything that she put on her plate. They would watch her and make sure that she did not go to the restroom directly after having eaten. Although they could not take her off of the dance team, they did restrict her exercise at home. They watched out for her and made sure that she was back at a healthy weight. Soon enough, we graduated high school and were off the dance team. Now she knows that she is fine that way she is, and when she sees pictures of herself from months ago when she was anorexic, she can tell that she looked unhealthy, and I am happy that she is better now.
Depending on the severity of the person’s anorexia, the treatments may vary. Treatment is aimed to promote weight gain and control the victims need to binge and purge when eating. The victim also needs to work on correcting the underlying malnutrition that is caused from the lack of eating (Cahill, 1996). In some cases the sufferer may need to undergo hospitalization for anywhere from two weeks to two years. During hospitalization, the patient may be referred to a psychologist to help resolve the feeling of worthlessness and depression as well as their obsessive need to be perfect (Cahill, 1996). Clinical treatments are not always effective, and now hospitals are developing an outpatient as well as the inpatient programs that are specifically aimed for eating disorders (Cahill, 1996). Treatment is always possible not matter how mild or severe the condition may be.

The distortion of one’s own body image is a serious disease. Anorexia nervosa is a serious disease that affects five to ten percent of the population, 95 percent of which are women (Cahill, 1996). The signs of anorexia are hard to notice when mild, but if they are detected, treatment should begin as soon as possible. Although the causes are unknown the most common attributer to the disease is underlying psychological problems or low self-esteem, depression, a feeling of worthlessness and a need to be perfect. From this need to be perfect comes the feeling of being fat because of the social pressures to look like the models in magazine and on television (Cahill, 1996). Through personal experience and research I have found that anorexia nervosa is a dangerous and scary disease that affects millions of women all over the United States.
References
