Information brochure

Anorexia nervosa-
Does it concern me ?
June 2010

With the methodological partnership
and the financial support of

With the partnership of
I am concerned about my weight, my diet, and my physical appearance

But how can I tell if these concerns have got out of hand?

Here are a few questions you can ask yourself

Below you will find questions that could tell you more about yourself – and there could be others

1. Do I make myself sick because I feel uncomfortable after eating too much?
2. Do I worry that I might have lost control over what I eat?
3. Have I recently lost more that 6 kilos over a period of 3 months?
4. Do other people tell me I am too thin, while I find myself too fat?
5. Would I say that food dominates my life?

If you answered yes to at least two of these questions, it is very likely that you have an eating disorder known as "Anorexia Nervosa", or Anorexia with bulimic episodes, which means that you alternate bouts of dieting and periods when you lose control over your eating patterns, which results in the need to compensate – such as making yourself vomit, exercising excessively and so on.

The individuals who are the most likely to be concerned are

- pre-adolescent girls;
- adolescent girls;
- young women;
- fashion models, dancers, and people practising sports that require weight control or endurance sports.
Eating Disorders (ED) are eating habits or behaviours that are different from those of other people living in the same nutritional, social and cultural environment. They lead to mental and bodily disturbances. The most common disorders, apart from snacking and overeating, are anorexia nervosa and bulimia. In 9 cases out of 10 it is a girl or a woman who is affected, but boys and men can also be concerned.

Anorexic behaviours can be summed up as refusing food while you are in fact starving to death (anorexia nervosa) or refusing weight gain despite the fact that your body is emaciated (anorexia nervosa, or anorexia with bulimic (binge-eating) episodes). To avoid putting on weight, an anorexic person may resort to physical hyperactivity, and/or to self-induced vomiting, and/or to the excessive use of laxatives, and obsessive weight monitoring. These different obsessions end up governing the person's life. Their self-esteem becomes dependent on their ability to control their weight, and this creates a dependency towards deprivation.

The consequences are very serious: they are physiological (risk of osteoporosis, increased cardiac risk, possible fertility problems and others) mental (difficulty controlling emotions, anxiety, loss of self-esteem, risk of depression, etc) and social (isolation, withdrawal).

For all these reasons it is important not to try to cope with these difficulties alone, because they rarely resolve themselves on their own. They can also genuinely ruin your life.

What can I do?

You can, in your own time and at your own pace, opt for one of the following solutions:

- **Consult a GP, a paediatrician and/or a psychiatrist**, with whom you can establish an appropriate care plan to help you to manage better and feel better. This doctor can be the person who will coordinate care, by organising the way in which different people become involved to tackle the mental, nutritional and bodily aspects of your problem.

- **Consult a psychotherapist** to put your feelings into words and understand what they mean, to help you overcome your worries and get on with your life, and to help you alter your habits and feel better.

- **Join a support group or organisation** specialised in eating disorders. Members of these organisations often have wide experience of these matters. Some of them have experienced the problems themselves and have recovered.

- **Get support from a person who is close to you**, and who can help you in your everyday life to become more aware of what is wrong, provide emotional support when you are doubtful or anxious, and be a reassuring presence on your way to recovery.
With those close to you and/or your doctor, you can also discuss the possibility of an admission to hospital, particularly if you feel extreme physical or mental exhaustion, or if your family is experiencing extreme exhaustion because of your condition. Today, a person who is hospitalised and his or her family are treated with respect. This solution can provide “a break” for all concerned. Programmes involving several disciplines or specialities are available (an individually tailored nutritional programme, daily therapeutic encounters, and group activities such as support groups, art therapy, drama groups, sports and cultural activities).

There are websites where you can find help in obtaining care:


---

**Can I get better?**

😊 Yes you can, but remember:

- The earlier you consult, the more likely you will be to avoid anorexia taking over your life and becoming chronic, and the better your chances of avoiding the most serious physical consequences.

- The earlier you consult, the easier it will be to relieve your physical and mental pain and distress, and that of the people close to you.

—with yourself in body and mind.

---

This document was developed by FNA-TCA (French federation of eating disorder associations).