

Eating Disorder Definitions

What is Anorexia Nervosa?

Anorexia nervosa, in the most simple terms, is self-starvation. Anorexics (anorectic is also correct usage) are typically described as "walking skeletons", a graphic image that depicts the pallor and frailty of these struggling individuals. Anorexics are also often characterized as stubborn, vain, appearance-obsessed people who simply do not know when to stop dieting. But anorexia nervosa is much more than just a diet gone awry, and the sufferer more than an obstinate, skinny person refusing to eat. It is a complex problem with intricate roots that often begins as a creative and reasonable solution to difficult circumstances, and is thus a way to cope.

Anorexia is Greek word meaning "loss of appetite", which is misleading because only in the late stages of starvation do people in fact lose their appetites. Instead, an intense fear of weight gain leads anorexics to routinely and vehemently deny their hunger. In order to formally diagnose an individual with anorexia nervosa, clinicians turn to the fourth edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-IV, 1994). The DSM-IV lists four criteria that an individual must meet in order to be diagnosed as anorexic, generalized as follows:

1. The individual maintains a body weight that is about 15% below normal for age, height, and body type.
2. The individual has an intense fear of gaining weight or becoming fat, even though they are underweight. Paradoxically, losing weight can make the fear of gaining even worse.
3. The individual has a distorted body image. Some may feel fat all over, others recognize that they are generally thin but see specific body parts (particularly the stomach and thighs) as being too fat. Their self-worth is based on their body size and shape. They deny that their low body weight is serious cause for concern.
4. In women, there is an absence of at least three consecutive menstrual cycles. A woman also meets this criteria if her period occurs only while she is taking a hormone pill (including, but not limited to, oral contraceptives).

The DSM-IV also differentiates between two specific types of anorexia nervosa. "Restricting Type" denotes individuals who lose weight primarily by reducing their overall food intake through dieting, fasting and/or exercising excessively. "Binge-Eating /Purging Type" describes those who regularly binge (consume large amounts of food in short periods of time), and purge through self-induced vomiting, excessive exercise, fasting, the abuse of diuretics, laxatives, and enemas, or any combination of these measures.

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by Lindsey Hall and Monika Ostroff, Gürze Books, 1999.

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What is bulimia?

Bulimia is an obsession with food and weight characterized by repeated overeating binges followed by compensatory behavior, such as forced vomiting or excessive exercise. For an epidemic number of women and men, bulimia is a secret addiction that dominates their thoughts, undercuts their self-esteem, and threatens their lives.

The symptoms are described by the Egyptians and in the Hebrew Talmud; and bulimia (Greek for "ox-hunger") was widely practiced during Greek and Roman times. In the later half of the twentieth century, though, eating disorders, and particularly bulimia, have been identified as widespread cultural phenomena. Bulimia is also termed bulimia nervosa and bulimarexia. In 1980, the American Psychiatric Association formally recognized bulimia. In its fourth edition, the Diagnostic and Statistical Manual of Mental Disorders (APA, 1994) lists the following criteria that an individual must meet to be diagnosed:

1. Recurrent episodes of binge eating, with an episode characterized by (1) eating in a discrete period of time, usually less than two hours, an amount of food that is significantly larger than most people would eat during a similar period of time and under similar circumstances; and, (2) a sense of lack of control over eating during the episode, such as a feeling that one cannot stop eating.

2. Recurrent inappropriate compensatory behavior in order to prevent weight gain, such as self-induced vomiting, misuse of laxatives, diuretics, or enemas (purging type); or, through fasting or excessive exercise (nonpurging type).
3. These behaviors occur at least twice a week for at least three months.
4. Self-evaluation is unduly influenced by body shape and weight.
5. The behavior does not only occur during episodes of anorexia nervosa.

These cases are also life-damaging and need to be taken seriously. Although the overt symptoms of bulimia revolve around food behaviors and a fear of gaining weight, bulimia is actually a way to cope with personal distress and emotional pain. Eating binges take time and focus away from more disturbing issues, and purges are an effective way to regain the control and feelings of safety lost during the binge. Also, while bulimic behavior may have started as a seemingly-innocent way to lose weight, the cycle of bingeing and purging usually becomes an addictive escape from all kinds of other problems.

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by Lindsey Hall and Leigh Cohn, Gürze Books, 2000

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What is Binge Eating Disorder or Compulsive Eating?

Binge-Eating Disorder or Compulsive Eating is characterized primarily by periods of impulsive gorging or continuous eating. While there is no purging, there may be sporadic fasts or repetitive diets. Body weight may vary from normal to mild, moderate, or severe obesity.

A significant number of people suffer with "other" eating disorders which do not quite fit the criteria for anorexia nervosa and bulimia nervosa. Clearly there are some who abuse vomiting and/or exercise without bingeing as forms of weight management, while there are others who indulge in repetitive episodes of bingeing without purging.

Eating disorders arise from a combination of long-standing psychological, interpersonal, and social conditions. Feelings of inadequacy, depression, anxiety, and loneliness, as well as

troubled family and personal relationships, may contribute the development of an eating disorder. Our culture, with its unrelenting idealization of thinness and the "perfect body," is often a contributing factor. Once started, eating disorders may become self-perpetuating. Dieting, bingeing, and purging help some people to cope with painful emotions and to feel as if they are in control of their lives. Yet, at the same time, these behaviors undermine physical health, self-esteem, and a sense of competence and control.

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