

Bulimia Nervosa (BN)

Berkshire Eating Disorders Service (BEDS) Information Booklet

What is Bulimia Nervosa (BN)?

Bulimia Nervosa comprises five main features/symptoms:

1. Recurrent episodes of binge eating accompanied by **both** the following:
 - a) Eating much more than most people would in a discrete period of time, e.g. within 2-hours, given the same circumstances.
 - b) A feeling of lack of control during the episode of eating, e.g. not being able to stop eating or control what/how much is eaten.
2. Recurrent inappropriate **compensatory behaviours** in order to prevent weight gain e.g. self-induced vomiting; misuse of laxatives, diuretics, or other medications; fasting; or excessive exercise
3. The binge eating and compensatory behaviours both occur, on average, **at least once a week for 3 months**.
4. Self evaluation is unduly influenced by body shape and weight.
5. Bingeing is not exclusively occurring during episodes of Anorexia Nervosa.

General Signs and Symptoms:

- Oscillating between controlled diet and uncontrolled and excessive eating
- Either frequently checking your body shape or weight or avoiding looking at your body or checking your weight.
- Comparing your body with those of others
- Organising your life around shopping, eating and compensatory behaviour
- Constant preoccupation with food, shape and weight
- Secrecy, especially about eating
- Hoarding and hiding food
- Social withdrawal
- Misuse of laxatives and diuretics
- Irregular menstrual cycle or no periods

Physical Impact:

Bulimia Nervosa puts you at higher levels of physical risk. Physical health problems increase with the severity of bulimia. Below are some of the physical symptoms that are associated with bulimia:

- **Vomiting may cause:**
 - Low potassium
 - Potassium plays a vital role in the function of nerves, particularly the nerves of the heart. If potassium levels fall, the heartbeat may become irregular and, in some cases, cause a heart attack.
 - Swollen glands in neck
 - Stones in salivary duct
 - Problems with teeth and gums caused by the acid from vomit.
 - Damage to the vocal chords and throat
- **Laxative misuse causes:**
 - Dehydration
 - Electrolyte imbalance (e.g. disrupted potassium levels)
 - Permanent bowel damage/weakening
 - This may lead to long-term and severe constipation
- **Diuretic misuse may cause:**
 - Metabolic imbalances e.g. insulin resistance
 - Increasing excretion of sodium
 - Low potassium
 - Hypotension and postural hypotension
 - Kidney failure.
- **Diet pills use/misuse requires medical monitoring and advice.**
- **Excessive exercise may cause substantial physical damage especially if pre-osteoporosis or osteoporosis is present.**

Medical Monitoring

You may require ongoing medical monitoring to minimise and/or detect physical health risks. Medical monitoring may include any of the following:

- Regular weight monitoring
- Regular blood tests
- Blood pressure monitoring
- ECG to assess heart rhythm
- Bone density scan



Facts and Figures:

- People with Bulimia Nervosa can be (and are often) within the 'normal' BMI range
- Bulimia Nervosa, contrary to popular misconceptions, does not always involve self-induced vomiting.
- Studies suggest around a quarter of people with eating disorders are male.
- BEAT estimate that around 1.25 million people in the UK have an eating disorder

Emotional Impact

Depression, anxiety, and low self-esteem are common difficulties for individuals with an eating disorder. Bingeing and chaotic eating may create chaos in your moods. You may experience difficulties in your relationships and feelings of loneliness or isolation. Rigid rules and patterns of thinking are common and being preoccupied with weight/shape can have a significant emotional impact.

If you find yourself not coping or in crisis, please contact the number on the back page for support. You have made a positive step to support yourself by coming for treatment. Please remember that typically, all of the above start to improve as eating gets under control.

In a crisis:

In our Service Booklet, you will find more details about useful contacts and resources. If you are experiencing an acute mental health problem or crisis, the below contacts will be able to help:

- Crisis Resolution and Home Treatment Team (CRHTT)
 - **0800 129 9999**
 - **24/7 text line - 07520 667 111**

This is a mental health crisis team operating 24 hours a day across the whole of Berkshire.

- Samaritans 24/7 helpline
 - **116 123**
- SHOUT 24/7 text helpline
 - **Text SHOUT to 85258**
- BEAT (The UK's Eating Disorder Charity)
 - **0808 801 0677**

BEAT's helpline is open 365 days a year midday-midnight (Mon-Fri) and 4pm-midnight (weekends). BEAT also has a number of alternative ways to access support, such as a webchat service and email support line. You will find more details on their website www.beateatingdisorders.org.uk.

In an emergency, or if you feel at immediate risk, please call 999.



SHaRON (Support Hope and Recovery Online Network)

Have you signed up to SHaRON yet? Our Support, Hope and Recovery Online Network (SHaRON) is a safe and confidential space where users can seek support and advice from BEDS staff (available 9am-5pm Mon-Fri) as well as each other (24/7). In addition to live chats, blogs and discussion forums, a library of resources and podcasts are accessible on SHaRON. When you sign up, you will be added to a 'subnet' specifically for other individuals diagnosed with **Bulimia Nervosa**. This will allow you to connect with individuals who can relate to your experiences and develop an online community of hope and understanding.



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