

Anorexia Nervosa (AN)

Berkshire Eating Disorders Service (BEDS) Information Booklet

What is Anorexia Nervosa (AN)?

Anorexia Nervosa comprises three main symptoms:

1. Significantly low body weight, which may be below normal for your sex, physical health, age, and height.
2. An intense fear of gaining weight/becoming fat.
 - a) Individuals engage in persistent behaviour interfering with weight gain, despite already being a significantly low weight.
3. Disturbed perception of body weight or shape. Self evaluation is based on weight or shape.

There are two different “sub-types” of anorexia:

1. Restricting: weight loss is accomplished mainly through dieting, fasting and/or excessive exercising.
2. Purging: In the last 3 months you have engaged in recurrent binge/purging episodes (e.g. self-induced vomiting or misuse of laxatives, diuretics, or enemas).



General Signs and Symptoms:

- Strict dieting and/or avoiding certain foods
- Counting the calories in food excessively
- Missing meals (fasting)
- Avoiding eating with other people
- Hiding food
- Excessive exercising – this might involve exercising when not physically well enough to do so, or feeling guilty or anxious about not exercising
- Vomiting or misusing laxatives (purging)
- Social withdrawal and isolation
- Wearing baggy clothing to hide your body
- Compromise of education and employment plans
- Constant preoccupation with food, weight and shape
- Irregular menstrual cycle or no periods

Physical Impact:

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

- Feeling tired and lethargic
- Physically feeling weak, tired, and cold
- Weak bladder
- Constipation as a result of gut function decreasing
- Feeling bloated
- Reduction in the quality of the hair, skin, and nails
- Cholesterol level increases
- Excess hair on the face, arms, and body (lanugo)
- Loss of bone mass (osteopenia and osteoporosis)
- Frequently your libido may reduce, and periods may stop
- Organ damage - continued starvation affects the major organs as the body will start to eat itself as a result of depleted stores
- Slowed/abnormal heart rhythm and heart failure - the heart is a muscle which shrinks and becomes weaker with AN
- Excessive exercise may cause substantial physical damage especially if pre-osteoporosis or osteoporosis is present

It is likely that you will 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

Patients who present with high risk will be given a “High Risk Alert Card” for use in the event of a medical emergency only.



Facts and Figures:

- Anorexia has the highest mortality rate of any psychiatric disorder, from medical complications associated with the illness as well as suicide.
- 33 - 50% of anorexia patients have a comorbid mood disorder, such as depression.
- About half of anorexia patients have comorbid anxiety disorders, including obsessive compulsive disorder and social phobia.
- Although anorexia appears to be more common in females, researchers and clinicians are becoming aware of a growing number of males and nonbinary individuals who are seeking help for anorexia nervosa.
- 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. Starvation can lower your mood and reduce your ability to think clearly. Interest in relationships decreases and loneliness and feelings of isolation increase. 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 below for support. You have made a positive step to support yourself by coming for your assessment. Please remember that typically, all of the above start to improve as eating gets under control and you restore some weight.

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.



NHS

SHaRON

Berkshire Healthcare NHS Foundation Trust
Eating Disorders

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 **Anorexia Nervosa**. This will allow you to connect with individuals who can relate to your experiences and develop an online community of hope and understanding.



berkshirehealthcare.nhs.uk