

## CPD Online take-home notes

## Introducing eating disorders

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- Concerns about body weight and shape are prevalent in the general population.
- For some individuals however, attitudes to weight and shape become extreme and harmful.
- Self evaluation in terms of body image is a hallmark of the eating disorders, in association with low self-esteem.
- An individual may develop eating behaviours including dietary restriction, excessive exercise, bingeing, vomiting, laxative misuse to manage emotional distress.
- Anorexia nervosa, bulimia nervosa and EDNOS (Eating Disorders Not Otherwise Specified, including binge eating disorder) are the principal diagnostic groups of eating disorders in adults, as defined in DSM-IV.
- This module focuses principally upon anorexia nervosa and bulimia nervosa and describes clinical features, psychiatric comorbidity, physical complications and risks. However, it is emphasised that the EDNOS group includes a range of clinical presentations across the range of severity.
- Eating disorders are associated with high rates of depression, suicide and other psychiatric conditions.
- Starvation, bingeing and purging are associated with significant risks to physical health, in all organ systems.
- Early recognition and access to treatment improves prognosis. The SCOFF questionnaire is designed to aid identification of eating disorders and prompt more detailed assessment

### Reflection questions

(2.3) Which diagnostic features of anorexia nervosa does the case demonstrate?

(2.8) List the psychological features of anorexia nervosa demonstrated by the case.

(2.11) Think about Case A.

1. Is this an example of the restricting or binge-purge subtype?
2. If she also reported vomiting twice a day, what would the diagnosis be?
3. If she also reported binge eating and vomiting three times per week, what would the diagnosis be?

(2.19) Think about Case A. Does this patient suffer any comorbid condition(s)?

(2.35) List physical changes due to anorexia nervosa described in Case A.

(3.3) Think about Case B.

1. Which diagnostic features of bulimia nervosa does the case demonstrate?

2. Which sub-type of bulimia nervosa does the case demonstrate, purging or non-purging?
3. State why the diagnosis is not anorexia nervosa, binge-purge sub-type.

(3.9) Think about Case B.

1. List the psychological features of bulimia demonstrated by Case B.
2. What is meant by a 'binge'?
3. Make a list of behaviours used to compensate for weight gain in bulimia nervosa.

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