

Eating Disorders (including Anorexia and Bulimia) in Children and Youth: Information for Parents and Caregivers



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Summary: Eating disorders (such as anorexia and bulimia) are unfortunately all too common in a society that creates unrealistic expectations for body image. Anorexia (anorexia nervosa) is a condition where individuals eat so little that they become malnourished. Symptoms may include loss of menstrual periods, feeling cold, or troubles with mood or thinking. Bulimia is a condition where individuals maintain a somewhat normal weight, but have problems with bingeing (eating large quantities of food at once) and/or purging (making themselves throw up or vomit). The good news, is that there are many effective ways to support and help individuals with eating disorders.

What are Eating Disorders?

Eating disorders are a group of potentially fatal conditions where people experience severe problems with their eating, which affect them physically and emotionally.

Things may start off as a diet, where your child is doing something to try and feel better about him or herself. From there, however, it can quickly escalate into a dangerous, life threatening eating disorder.

On the outside, you may notice the visible signs of an eating disorder in your child, such as not eating, binge-eating on food, vomiting, or being obsessed with how his or her body looks. On the inside, your child may be haunted with overwhelming thoughts of worthlessness, self-hatred, and feeling "not good enough".

Once the illness takes hold of your child, it is very difficult for them to stop the eating disorder behaviours. Eating disorders rob the person of their judgement and force the person to become obsessed with food. Starvation can lead to all types of mood problems, including tremendous sadness, irritability and anger. Despite these terrible feelings however, the person feels compelled to continue these behaviours in the desperate hope that eventually s/he will feel better on the inside.

The main types of Eating Disorders are:

1. Anorexia Nervosa

Anorexia nervosa is when a person restricts eating so much that the person loses a significant amount of weight (or in a child, when they stop growing). The severe food restriction is frequently accompanied by excessive exercise.

You may also notice changes in personality such as becoming more focused or obsessed with school work, being more irritable, and isolating oneself from friends and family.

Anorexia nervosa affects up to 1% of adolescent girls. It also occurs in boys and in younger children.

Sometimes a person with anorexia nervosa can switch to having bulimia nervosa over time. However, since this pattern takes years to develop, it is more commonly seen in adults rather than youth.

2. Bulimia nervosa

Bulimia nervosa is characterized by cycles of binge-eating and purging. A cycle usually starts when a person goes on a significant diet and restricts their food intake. The body responds by driving the person to binge eat a large amount of food in a single sitting. This often leaves the person feeling very ashamed and anxious and needing to compensate by vomiting, exercising, skipping meals, using laxatives, or diuretic pills.

Similar to anorexia nervosa, a person with bulimia nervosa may become very irritable and distant. Unlike people with anorexia nervosa, however, people with bulimia may not have any significant weight loss.

Bulimia Nervosa affects up to 4% of teenage girls, and normally develops later than anorexia nervosa. Bulimia nervosa can also affect adolescent boys.

3. Eating Disorder NOS (Not Otherwise Specified)

Eating Disorder NOS is diagnosed when a person has a serious eating disorder, but the condition does not meet the formal criteria for anorexia nervosa or bulimia nervosa. This is a frequent diagnosis for children and youth.

4. Binge Eating Disorder (BED)

Binge Eating Disorder is a new diagnosis for children and youth. It occurs when a person is driven to binge eat, without making themselves compensate afterwards (by vomiting or skipping meals for example).

Food seeking is frequently caused by difficult emotions that the child does not know how to handle. They also experience a lack of control when overeating. People with BED are often overweight or obese.

What are the Warning Signs of an Eating Disorder?

The following are **warning signs** that an eating disorder may be present or developing:

- Unexplained weight loss
- Fear of gaining weight
- Dieting behaviour
- Increased picky eating, especially eating only "healthy foods"
- Hiding food in napkins, or cutting food in tiny pieces
- Always going to the bathroom immediately after eating
- Large amounts of food missing
- Evidence of visiting pro anorexia or eating disorder websites

The following are **serious signs** of an eating disorder

- Excessive weight loss
- Fasting and skipping meals on a regular basis
- Refusing to eat with the family
- Two skipped menstrual periods (in girls)
- Any binge-eating episodes
- Any purging episodes
- Discovery of diet pills or laxatives
- Exercising because one has to and not because one wants to
- Persistent and unremitting refusal to eat non diet foods
- Refusing to allow others to prepare foods

- Extreme calorie counting or portion control (weighing and measuring food amounts)
- Refusing to eat with friends
- Little or no growth in height, when your child should be growing

What Causes Eating Disorders?

While up to 90% of teenage girls and many teenage boys will try to diet, only a smaller number will go on to develop an eating disorder.

In most cases, several different factors likely come together to lead to an eating disorder. Possible influences are:

- being frightened by changes during puberty,
- peer pressure to look and act a certain way,
- family history of an eating disorder,
- personality traits such as perfectionism and low self-esteem,
- cultural influences and societal pressure focused on having a thin body ideal.

At one time, families were blamed for causing eating disorders. This is simply not true. Although there are family situations that can cause stress to the family (as well as your child), it is unlikely that any one situation actually caused the eating disorder.

In fact, families are an important part of the solution. Families play a major role in supporting and assisting their child to recover from an eating disorder.

What are the Consequences of an Eating Disorder?

Physical:

- Cold intolerance (the person feels cold all of the time)
- Loss of hair
- Loss of menstruation in young women
- Osteoporosis (extreme thinning of the bones), broken bones
- Decreased blood pressure / decreased heart rate
- Decreased size of heart which can lead to heart failure or death.
- Heart arrhythmias (irregular heart beat)
- Stomach ulcers
- Stunted growth
- Dehydration
- Breakdown of tooth enamel

Psychological:

- Poor memory and concentration
- Irritability or severe mood fluctuations
- Perfectionism (e.g. spending excessive time on school work)
- Anxiety
- Sadness / Depression
- Difficulty sleeping
- Crying spells
- Loss of interest in regular activities
- Withdrawal from family and friends
- Thoughts of self-harm or suicide

If you Suspect an Eating Disorder

If you suspect that your child has an eating disorder, have your child seen by a doctor (such as a family physician or paediatrician). The doctor may recommend more specialized mental health services, or help with referrals to mental health professionals such as a psychologist, or psychiatrist.

Become as educated as you can. Eating disorders are challenging illnesses that often appear to defy logic, and can cause great anguish and distress at home. Arm yourself with the knowledge that this is not a phase. Your child cannot help the way s/he is acting, nor can s/he get over the eating disorder on their own. They will need your help and support, as well as the support of professionals.

How Are Eating Disorders Treated?

Because these are difficult and complicated disorders, it often takes a team of professionals, working together, to treat an eating disorder. Team members may include physicians (such as family doctors, paediatricians or psychiatrists), therapists (such as psychologists, or social workers), dietitians, and of course, the family.

Parents and/or caregivers are an essential part of treatment. As you would support your child through any other serious medical conditions (such as diabetes or cancer) your child needs your constant support to recover from an eating disorder.

Typical Treatments

- **Individual Counselling/therapy** helps a person to learn more about eating disorders, and examine some of the difficult feelings that lie underneath. They will work on improving their self-esteem and developing new coping strategies. Therapy or counselling also helps a child to become motivated over time to recover from an eating disorder.
- **Family therapy** focuses on education about eating disorders, and helping parents develop the tools and strategies needed to support their child's recovery. Once the eating disorder behaviours have improved, family work may also focus on reducing any other stress in the family, and on adolescent issues in general.
- **Medications** can be used to help reduce binge-eating and purging in bulimia nervosa. There are no medications proven to treat anorexia nervosa. Medications, however, may be looked at to treat overwhelming anxiety and depression, or when a patient is very stuck and not getting better with other supports.
- **Hospitalization** may be required if a patient is medically unwell, and needs intensive care and monitoring. Hospitalization can also be helpful when a person is not getting better outside of the hospital despite support from their family and professionals.

How To Help Your Child with an Eating Disorder

Do's

- **Do get help and support immediately**, even if your child is refusing any help or support.
- **Do let your child know that you are concerned**, and you are going to get them help.
- **Do tell your child that you want to hear** what s/he has to say, and want to know how they are feeling inside.
- **Do understand that your child is feeling awful about him or herself** and is overwhelmed by self-criticism. Adding extra blame, criticism or guilt only adds to the child's stress, and can make their eating disorder stronger.
- **Do deal with any of your own issues.** If you want to help your child, make sure you deal with any of your

own eating disorder or body image issues. Speak to your family physician and/or see a mental health professional. It's a lot harder to help someone else if you're struggling yourself.

Don'ts

- **Don't waste your energy on blaming your child.** Once an eating disorder has taken over, your child is no longer in control of what they are doing. Underneath, your child is just as upset by this as you are.
- **Don't waste your energy on blaming yourself.** Eating disorders happen to the loveliest of children, in the most wonderful of families. If there is a problem that you feel might be affecting your child's mental health, then think of working on this issue, or discussing it in treatment.
- **Don't think that an eating disorder is a form of slow suicide.** Quite the contrary. It's your child's way of trying to feel better.
- **Don't think of your child's refusal to eat as "bad behaviour".** Your child is stuck in a pattern of doing what s/he thinks will make things better. In addition, starvation dramatically alters a person's mood and behaviour.
- **Don't spend endless time trying to figure out "why has this happened".** There does not have to be an underlying problem or secret at the root. Devote your energy to getting your child help and being a support.
- **Don't make comments or have conversations focused on weight or appearance, in front of your child.** Even if you are giving compliments to your child about his/her appearance, this can reinforce the importance of appearance and weight.

Frequently Asked Questions

1. Will my child just grow out of this?

Once a diagnosis of an actual eating disorder has been reached, your child will need a team of professionals to help overcome the illness. This is long and hard work. Eating disorders rarely just go away on their own.

2. What has happened to my child's personality? How did my child go from being so sensitive to being dishonest, angry and secretive?

You may have noticed many changes in your child's personality. These are the effects of starvation and the Eating Disorder itself. Most likely, however, underneath this appearance, your child is very upset about how they are acting, and is unable to help themselves.

Summary

Eating disorders are a potentially life threatening condition where an individual's eating patterns become severely disrupted.

The good news is that help and support exists both for families and the individual with an eating disorder.

Recommended Readings and References

Herzog, D., Franko, D. & Cable, P. (2008). *Unlocking the Mysteries of Eating Disorders, A Life-Saving Guide to Your Child's Treatment and Recovery*. New York: McGraw-Hill.

Katzman, D. & Pinhas L. (2005). *Help for Eating Disorders: A Parent's Guide to Symptoms, Causes and Treatments*. Toronto, ON: The Hospital for Sick Children.

Leichner, P., Hall, D., Calderon, R. & Caufield, S. (2003). *An Introduction to Effective Meal Support: A Guide for Family & Friends [DVD]*. Vancouver, BC: BC Children's Hospital. Available from <http://edreg.cw.bc.ca/BookStore>

Lock, J. & Le Grange, D. (2005). *Help Your Teenager Beat an Eating Disorder*. New York: Guildford Press.
Musby, E. (2014). *Eating Disorders: How to help your child eat well and be well*. Practical solutions, compassionate communication tools and emotional support for parents of children and teenagers.

Recommended Websites

National Eating Disorder Information Centre (NEDIC), is a Canadian, non-profit organization which provides information on eating disorders and weight preoccupation.

Web: www.nedic.ca

Children's Mental Health Ontario is the professional association representing children's treatment centres throughout Ontario, however they also have an excellent section of reviewed links to useful websites with child and youth mental health information.

Web: <http://www.kidsmentalhealth.ca>

The National Institute of Mental Health (NIMH) is part of the National Institutes of Health (NIH), a component of the U.S. Department of Health and Human Services, and has information about eating disorders.

Web: <http://www.nimh.nih.gov/health/publications/eating-disorders/summary.shtml>

Information from the [Eating Disorder Specialists of Illinois](#).

Web: www.empoweredparents.com

The Maudsley approach is an evidence-based treatment for eating disorders. Using this approach, parents play a key role in helping their child work towards recovery.

Web: www.maudsleyparents.org.

About this Document

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Disclaimer

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