



# nutritional *consequences of eating disorders*

The health feature for the month of March is focused on eating disorders. Eating disorders are characterized by severe disturbances in eating patterns, and can be life-threatening. These conditions are associated with thought distortions about weight, food, and body shape. Individuals that suffer with these issues often equate self-worth with body image. While the feature will go into greater detail about causes and treatment, here are some of the nutritional consequences of anorexia and bulimia.

- **Bone loss and osteoporosis** - Anorexia and bulimia can lead to malnutrition, causing severe deficiencies in many nutrients, particularly calcium. Bone loss and osteoporosis is one of many consequences. As a person reaches a point of starvation, estrogen production ceases (which causes the loss of menstrual cycles), and cortisol levels are increased. Both factors decrease bone density and can lead to osteoporosis. Supplementation is essential, especially when the illness has progressed. The recommended dosage is 1200-1500 milligrams per day, 500 milligrams at each dose will allow for maximum absorption. All supplements contain a component that aids the absorption of calcium, such as vitamin D or magnesium. Any of these are sufficient.
- **Protein malnutrition** - Protein deficiency can cause many side effects: hair loss, brittle nails, dry skin, poor wound healing, and muscle wasting. During recovery, it is essential to consume high quality protein foods that include eggs, meats, beans, nuts, and dairy products.
- **Vitamin and mineral deficiencies** may cause an electrolyte imbalance (electrolytes maintain balance within cells). This can have very dangerous consequences, and can be fatal. Particularly in bulimia, electrolyte imbalance can occur from excessive vomiting, which causes fluid loss. Calcium, magnesium, phosphorus, potassium, and sodium are essential for electrolyte balance. Symptoms, which can remain mild for a long time, include nausea, weakness, slowed breathing, disorientation, and irregular heartbeat. Other less severe side effects are hair loss, dry and scaly skin, and brittle nails. Prolonged vitamin and mineral deficiency can also lead to respiratory infections, kidney failure, and heart attack.

- **Fatty acid deficiency** is commonly seen in people with eating disorders. Human bodies require fat for many functions, which include providing needed energy, hormone production, insulation from cold, maintaining cell membranes, and protecting organs. Fat is also necessary for a healthy brain, skin, hair, and nails. Fat is also required to absorb fat soluble vitamins A, D, E, and K. If you do not get enough fat, the body can suffer in numerous ways. Symptoms include hair loss, fatigue, lowered resistance to infection, and cold intolerance, to name a few.

It is sometimes difficult to treat women with eating disorders because many do not realize they have a problem, or simply don't want to get well. So what do you do and what are the signs that a real problem exists?

Many women today are conscientious about eating well, exercising, and maintaining a svelte physique. There are countless fad diets around, and many people obsess over the latest diet and exercise trends. This, however, does not necessarily define a life-threatening problem. So how do you know if you have a loved one who may be in danger? Some signs are the following: drastic weight loss, mood swings, fatigue, not eating in front of others, moving food around on the plate, going to the bathroom right after a meal, and becoming very defensive about weight loss when confronted.

The good news is if you have a friend or family member, or if you yourself are suffering with any of these symptoms, early intervention and counseling can be very effective. Combat the problems before issues progress and are more serious in nature. Nutritional counseling along with psychotherapy is usually most effective. Depending on the individual, anti-depressant drugs may be beneficial and warranted as well.

There are several websites that are easily and anonymously accessible to seek help. A good starting point is [www.anad.org](http://www.anad.org), [www.aluba.org](http://www.aluba.org) and [www.teenanorexiabulimia.org](http://www.teenanorexiabulimia.org).

*For more info, contact Elesha Kelleher, RD, LDN, MPH  
at (504) 842-6096.*