

Condition:



Eating Disorders

Bulimia Nervosa

Covered in this fact sheet

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What is Bulimia Nervosa?

Eating disorders are illnesses in which you can experience severe disturbances in your eating behaviours and related thoughts and emotions. You can become pre-occupied with food and their body weight.

In many cases, eating disorders may occur together with other psychiatric disorders i.e. Anxiety, panic, obsessive compulsive disorder, alcohol and drug abuse problems and body dysmorphia (distorted body image).

Bulimia Nervosa

People with bulimia nervosa have recurrent and frequent episodes of eating unusually large amounts of food and feeling a lack of control over these episodes. This binge-eating is followed by behaviour that compensates for the overeating such as forced vomiting, excessive use of laxatives or diuretics, fasting, excessive exercise, or a combination of these behaviours. Unlike anorexia nervosa, people with bulimia nervosa usually maintain what is considered a healthy or relatively normal weight.

Bulimia Nervosa and work

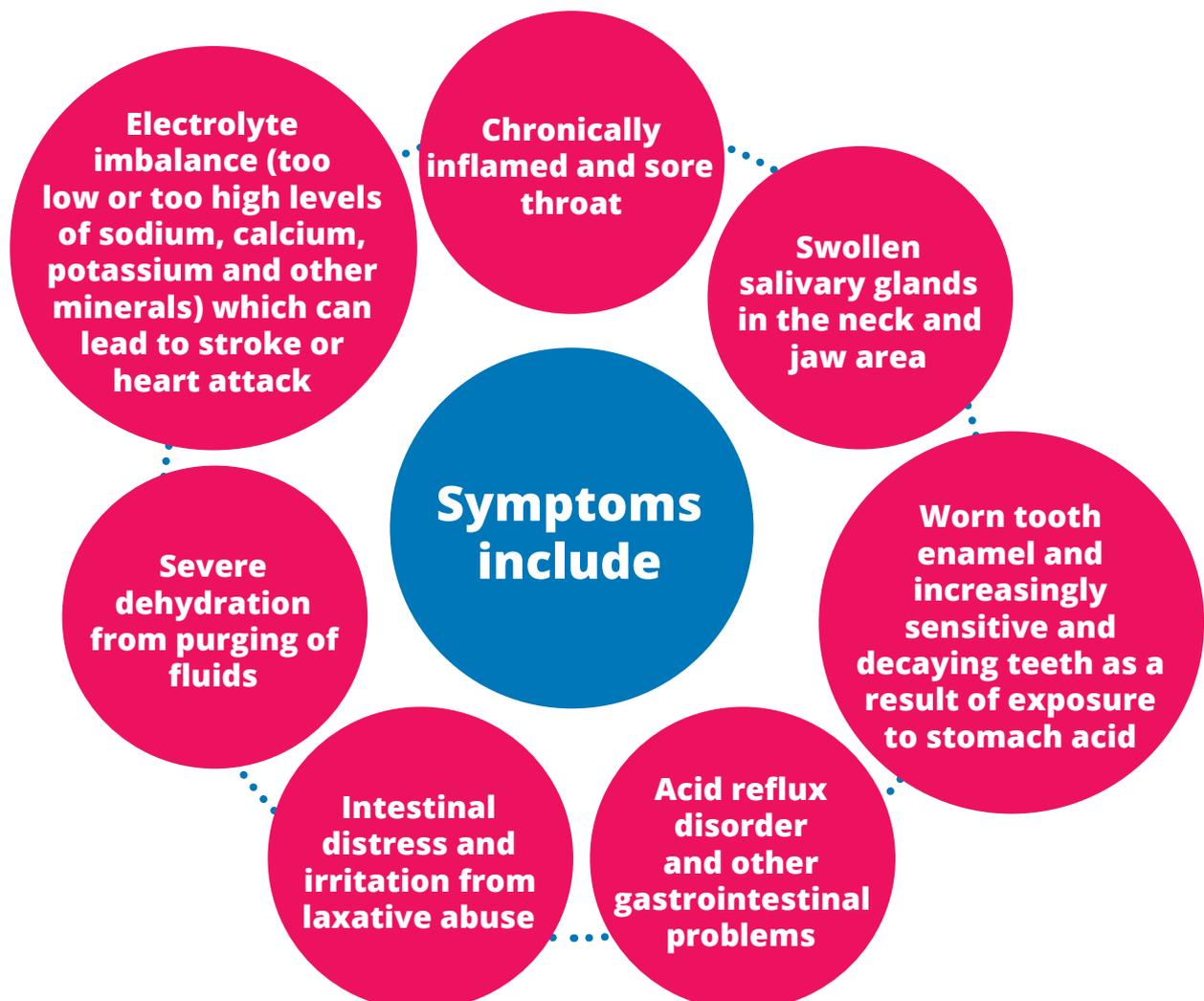
Bulimia Nervosa in itself is not a barrier to work however it can be a psychological or emotional response to stress or low moods experienced at work.

Some common stressful factors may be:

- Pressure of deadlines
- Not meeting work objectives or targets
- Feeling bullied or harassed at work
- Not having a social network of friends or friendly colleagues
- Feeling persecuted or discriminated by employer

It is recommended that you read through the self-management and self-care part of this worksheet to help develop more positive coping strategies to emotional distress whether this is at work or in your home/personal life.

How do I know if I have Bulimia Nervosa?



Causes of Bulimia Nervosa

Bulimia is associated with many different factors. This does not mean that any of these things have caused the problem. All we can say with any certainty is that certain events and situations are risk factors for someone to develop an eating disorder. Even if there is one very significant event in someone's life, it may or may not be responsible for creating or even maintaining the eating problem.

Important factors include:

- Control - losing weight can make someone feel good and in control.
- Longstanding unhappiness which may show itself through eating.
- Puberty - anorexia reverses some of the physical changes of puberty. You can see it as putting off some of the challenges of becoming an adult.
- Family - saying "no" to food may be the only way you can express your feelings.
- Depression - binges may start off as a way of coping with unhappiness.
- Low self-esteem.
- Social pressure - Western culture, particularly the media, idealises being thin.
- Genetics may play a part.

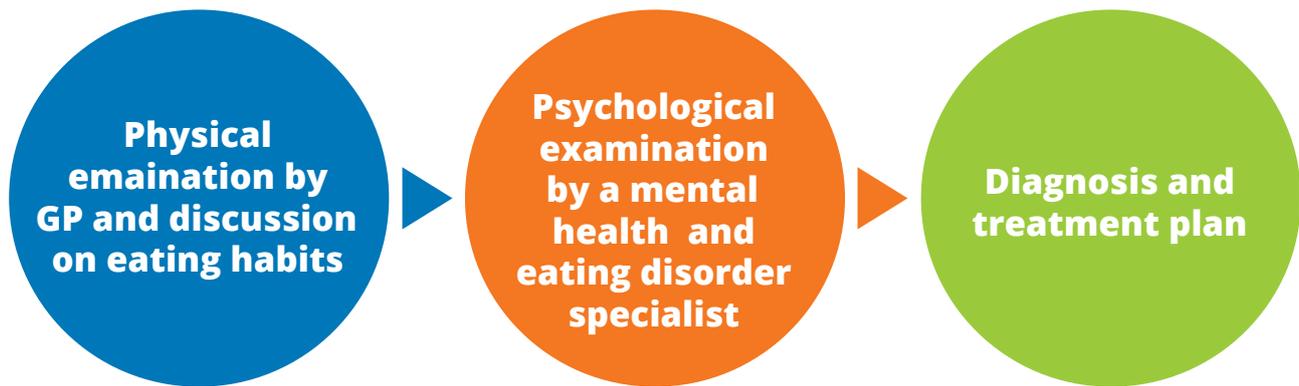
Talking to your GP/Health professional

Doctors will use physical and psychological evaluations to diagnose Bulimia Eating Disorder. They'll also make sure that you meets the diagnostic criteria for an eating disorder.

Doctors will not diagnose Bulimia eating disorder solely based on a physical exam. A psychological evaluation by a mental health specialist is also required.

A mental health specialist will ask questions about eating habits. The goal is to understand the patient's attitude toward food and eating. The doctor also needs to get an idea of how the patient perceives their body.

The questions can be personal, especially when talking about dieting, bingeing, purging, or extreme exercise habits.



Treatments

Psychotherapy

Cognitive Behavioural Therapy (CBT) - this can be done with a therapist, a self-help book, in group sessions. CBT helps you to look at the links between your thoughts, feelings and actions.

Interpersonal Therapy - this is usually done with an individual therapist. This treatment focuses on your relationships with other people.

Eating advice

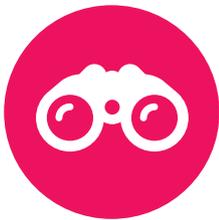
From a Nutritionist this helps you to get back to regular eating, without starving or vomiting.

Medication

Antidepressants can reduce the urge to binge. Unfortunately, without the other forms of help, the benefits wear off after a while.

Self-Management

There are some things you can do alongside medical treatment that can boost your mood. They can also help to distract you and look after your general health.



Take notice

Use mindfulness or relaxation techniques to help you manage your moods and stress levels more effectively.



Connect

Don't go it alone – talk and connect with other people even when you feel low.



Be Active

Exercise is evidenced to improve our moods so consider adding some light exercise to your daily routine.



Give Back

Look for opportunities to volunteer as this helps to build your confidence and self-awareness which can protect against your symptoms.



Keep learning

Learning something new works as both a distraction and a motivator - try to take opportunities that you have around you to learn something new and develop on skills that you already have.

Self-care

You can learn to manage your symptoms by looking after yourself. This is called 'self-care.' Self-care is how you manage your daily routine, relationships and how you are feeling. If you have an eating disorder it may help to improve your self-esteem. You could do this by:

- listing your good qualities,
- writing down the things you can do,
- learning a new skill,
- writing down your feelings,
- taking an assertiveness course to help your confidence, or
- writing about your life without an eating disorder.

It may help to think about what sets off your eating patterns. Certain times of year or events may make your eating worse. At those times you can ask for extra support from family or friends. You could try different things to improve how you see your body, such as:

- wearing clothes you feel comfortable in,
- not weighing yourself,
- doing nice things for your body, such as getting a massage or having a bath,
- not reading fashion magazines and comparing yourself.

Useful links

