# **BULIMIA NERVOSA**



#### What is Bulimia Nervosa?

Bulimia Nervosa – frequently just called Bulimia – is an eating disorder characterized by patterns of bingeing (consuming a large amount of food in a short amount of time) and purging (eliminating calories consumed). Among the most common means of purging are:

- Vomiting
- Laxative use
- Diuretic use
  Excessive exercise

Binge/purge behaviors are generally accompanied by negative body image – in other words, an unhealthy relationship with one's body size, weight and shape, as well as obsessive thoughts about food and eating.

Bulimia is also commonly accompanied by mood, anxiety and substance use disorders including depression, anxiety, obsessive compulsive disorder and alcohol/drug use.

## Symptoms and Signs

If you or someone you know is engaging in binge/purge behavior, you should be aware that there are serious health risks and complications that can occur as a result of this eating disorder. Below are some symptoms and warning signs for Bulimia Nervosa.

### Common Bulimia symptoms include:

- Bingeing more than once/week
- Purging more than once/week (self-induced vomiting; laxative, diet pill and/or diuretic abuse; exercise; chewing and spitting of food; insulin misuse)
- Bradycardia and orthostasis (a form of low blood pressure that happens when you stand up from sitting or lying down)
- Low normal to abnormal labs; can include electrolyte abnormalities
- Swelling of the cheeks or jaw area
- Calluses on the back of the hands and knuckles

## Common warning signs of Bulimia include:

- Consuming large amounts of food in a short period of time
- Use of behaviors to compensate for calories consumed, including purging (making yourself vomit), restricting/fasting, over-exercising or using laxatives, diuretics, ipecac syrup or enemas
- Evidence of binges, including disappearance of large amounts of food or appearance of wrappers/packaging
- Evidence of purging, including trips to the bathroom during or after meals, packaging of laxatives or diuretics, rigid adherence to exercise schedules, etc.
- Feeling "out of control" or shame over how much you eat
- Fear of gaining weight or being "fat"
- Self-esteem and self-worth tied heavily to body shape and weight
- Withdrawal from friends, family and "normal" activities/routines
- Failing performance in work, school and athletic engagements

#### **Health Risks**

The health risks of Bulimia can be very serious. Binge/purge episodes, particularly recurrent and/ or chronic episodes, have profound effects on the body's systems. Bulimic behaviors can disrupt the delicate balance of electrolytes and chemicals that keep vital organs functioning effectively and wreak havoc on the digestive system.

- Cardiac complications (irregular heartbeat and heart failure stemming from electrolyte imbalances)
- Dehydration
- Edema (stemming from periods of purging cessation)
- Loss of potassium, sodium and chloride from the body
- Ulcers, pancreatitis

- Esophageal inflammation and/rupture (resulting from vomiting)
- "Bulimia teeth" or tooth decay and staining (caused by stomach acids/frequent vomiting)
- Digestive irregularity (chronic irregular bowel movements and constipation, stemming from laxative abuse)
- Fatigue, muscle weakness (from over-exercise)

# **FACTS & STATISTICS**

Bulimia is a complex eating disorder shrouded in secrecy. Sufferers work hard to hide their bingeing and purging behaviors from others. It's only through shining a light on its pervasiveness and the potentially life-threatening consequences can we help increase awareness.

- 1.5% of American women suffer from bulimia nervosa in their lifetime.1
- Standardized Mortality Ratio (SMR) for Bulimia Nervosa is 1.93 (SMR is a ratio between the observed number of deaths in an study population and the number of deaths would be expected).2
- Nearly half of bulimia patients have a comorbid mood disorder.3
- 1 in 10 bulimia patients have a comorbid substance use disorder, usually alcohol use.3

### We're here to start the conversation with you

Recovery can begin with a single conversation. If you are feeling isolated and suffering – or you suspect someone else is - we urge you to reach out to us. Please call our master's-level clinicians today at 877-825-8584.

- 1. Hudson, J. I., Hiripi, E., Pope, H. G., & Kessler, R. C. (2007). The prevalence and correlates of eating disorders in the national comorbidity survey replication. Biological Psychiatry, 61(3), 348-358.
- 2. Arcelus, J., Mitchell, A. J., Wales, J., & Nielsen, S. (2011). Mortality rates in patients with anorexia nervosa and other eating disorders: a meta-analysis of 36 studies. Archives of General Psychiatry, 68(7), 724-731.
- 3. Ulfvebrand, S., Birgegard, A., Norring, C., Hogdahl, L., & von Hausswolff-Juhlin, Y. (2015). Psychiatric comorbidity in women and men with eating disorders results from a large clinical database. Psychiatry Research, 230(2),