



Remote  
Health

# Course Materials

## Eating Disorders

recognition and prevention



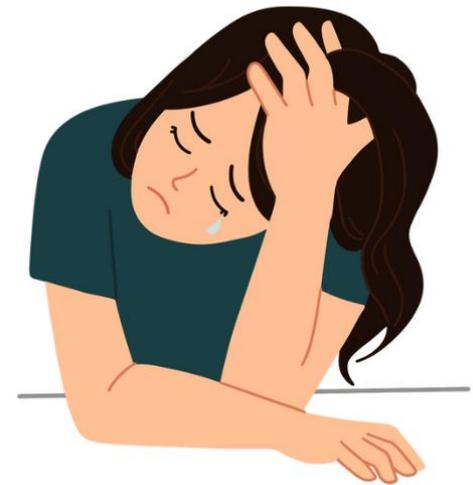
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## What are eating disorders? <sup>(1)</sup>



Eating disorders are serious illnesses in which the way people deal with food and their relationship to their own bodies is disturbed.



Someone who occasionally overeats or has lost a lot of weight does not automatically suffer from an eating disorder, but these behaviours, along with other factors, can contribute to it.



The transition to pathological behavior is usually insidious.

## Anorexia <sup>(1)</sup>

Recognition, causes and treatment



## Recognition

- Severe weight loss or persistent underweight
- Constant fear of gaining weight
- Strict control of food intake
- Excessive physical activity
- Feeling your own skin uncomfortable
- Possibly taking medication or self-induced vomiting to keep losing weight
- Initially feelings of lightness and euphoria, later indifference, depression, anxiety and obsessive-compulsive disorders



## Causes

The trigger is never just one factor. It is the combination of several factors which leads to anorexia:



- Genetic predisposition, disturbed eating behaviour in childhood, previous strict dieting behaviour
- Low self-esteem, emotional instability, concerns about appearance, figure and weight
- Slim ideal of beauty
- Stressful experiences
- Physical illnesses
- Physical changes during puberty
- Competitive sports (sports with a focus on body weight and slimness)

## Treatment

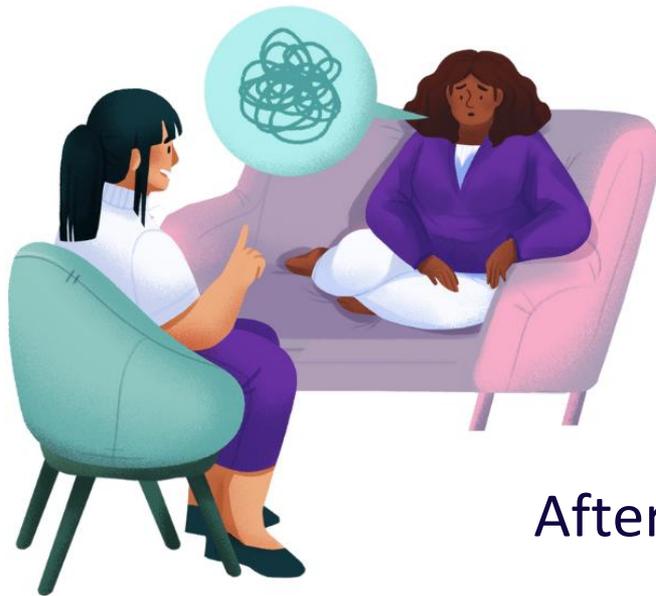
Relief of acute symptoms, weight gain, and development of healthy eating habits are primary goals of treatment.

The second part of therapy is to develop strategies to prevent a relapse.



Compulsory treatment may be required in life-threatening situations.

Depending on the severity of the disease, there are different treatments:



- Outpatient
- Day clinic
- Inpatient

Aftercare is particularly important.

## Bulimia <sup>(1)</sup>

Recognition, causes and treatment



# Recognition



- Binge eating, i.e. eating more than usual
- Loss of control
- Countermeasures through excessive exercise, starvation, fasting, taking medication (e.g. appetite suppressants, laxatives, dehydrating substances) and/or self-induced vomiting
- Body weight and figure have a strong impact on self-esteem.
- Body weight is in the normal range to slightly underweight.

## Causes

Bulimia is never triggered by just one factor. It is again the combination of several factors which leads to bulimia.

Many of the causes are consistent with those of anorexia.



# Treatment

Learning to eat normally and identifying factors that can lead to the disease in order to develop strategies to prevent recurrence are important points in treatment.

Depending on the severity of the disease, there are different treatments:

- Outpatient
- Day clinic
- Inpatient

Aftercare is particularly important.



## Binge eating disorder <sup>(1)</sup>

Recognition, causes and treatment



## Recognition

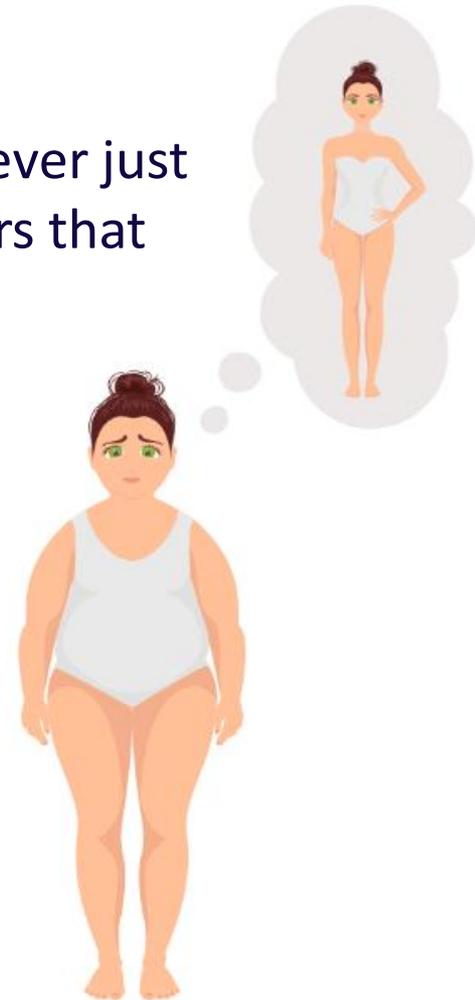


- Binge eating, i.e. eating more than usual
- Loss of control
- Gulping down food
- Eating alone and hiding the binge eating
- Shame, disgust, depression and guilt after a binge eating session
- No or only rarely countermeasures through excessive exercise, starvation or self-induced vomiting
- Mostly overweight to obese

## Causes

Like with other eating disorders, the trigger is never just one factor. It is the combination of several factors that leads to binge eating disorder.

- Frequent dieting, high BMI
- Role models in the family with similar eating habits
- Little support from others
- Emotional problems
- Low self-esteem, dissatisfaction with own body, care about external appearance



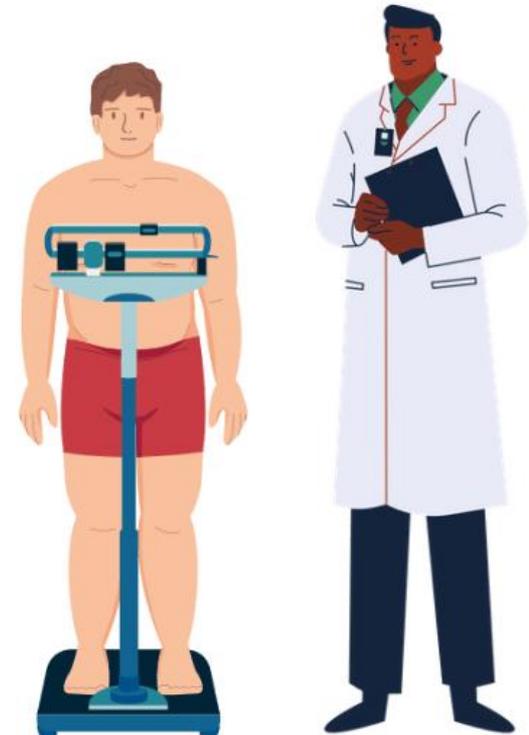
# Treatment

Identifying the triggers and avoiding their occurrence is part of the treatment, and it is also important to learn healthy and regular eating habits. Taking healthy measures to lose weight often helps.

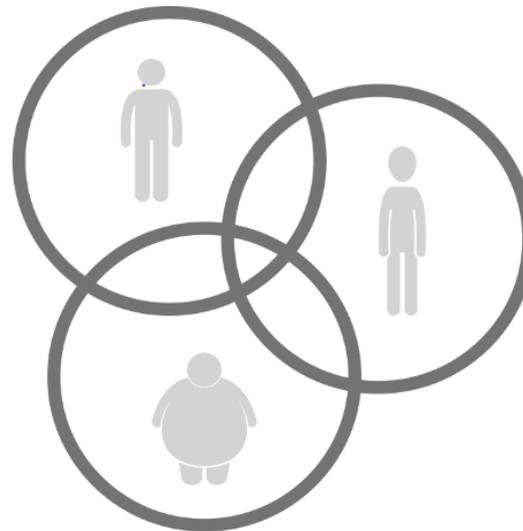
Depending on the severity of the disease, there are different treatments:

- Outpatient
- Day clinic
- Inpatient

Aftercare is particularly important.



## Mixed forms<sup>(1)</sup>



The mixed form is also called “atypical anorexia” or “unspecified eating disorder”.

This form of eating disorder is the most common. Mixed forms are equally serious and require professional treatment.



If characteristic symptoms of eating disorders occur without meeting the criteria for a specific eating disorder, one speaks of a mixed form.

## Obesity (2)

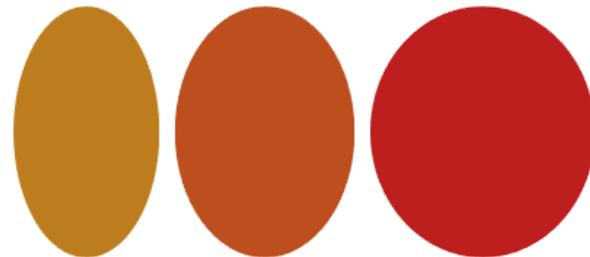


Obesity is defined by a very high body weight, which is associated with a high fat content.

The diagnosis is made using the body mass index (BMI), the BMI divides the disease into three degrees of severity.

A BMI of 30 or more is considered obesity.

30-34,9	Obesity Class 1
35-39,9	Obesity Class 2
Over 40	Obesity Class 3



Obesity has a risk of furthering many other diseases, such as:

- Metabolic diseases
- Diseases of the cardiovascular system
- Musculoskeletal disorders
- Diseases of organs
- Male infertility
- Mental illness



Do I have an eating disorder? <sup>(1)</sup>



Medical help should always be sought for a diagnosis, and psychotherapeutic support can be very useful.

There are also counselling centers, often offering anonymous advice.



## Prevention of eating disorders <sup>(3)</sup>



Parents in particular can often have a preventative influence on young people by:

- being good role models themselves
- strengthening self-esteem through lots of praise and affection
- having conversations
- showing closeness
- leaving room for the children's own decisions
- supporting self-determined eating habits
- having conscious eating habits
- cooking and eating together often
- not consuming ready meals or fast food
- not comforting or rewarding with food if possible
- preventing problematic internet contacts that glorify anorexia and bulimia



Identity development and strengthening of self-confidence should always be at the forefront of eating disorder prevention.

However, it is important to learn how to eat healthy meals on a regular basis.



Care should be taken to ensure that calorie intake is never below the basal metabolic rate, as this is not a healthy diet, but rather leads to pathological eating behaviours.

## Sources:

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