

Course Name: Adolescent Health and Well-being: A Holistic Approach

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Lecture 14 - Eating Disorders in Adolescents

Hello everyone. Today I am back again with a new topic on eating disorders in Adolescents. Now this is a very important burning issue in Adolescents. Now we have covered various concepts in this lecture. Few of them are what are eating disorders? What are the various myths related to eating disorders? What are the various risk factors for eating disorders among the adolescents? Management of eating disorders and junk food and their ill effects. Now coming to the key words of this lecture. The key words are eating disorders, anorexia nervosa, bulimia nervosa, binge eating and junk food.

Now coming to eating disorders; just to think of it when this word comes to our mind. Now what picture does come to our mind? If you try and focus an image comes of an adolescent girl probably rich and from an affluent society and probably who is very much influenced by social media and other such models. So that is the picture that comes to I think everyone of our minds. So, let's actually have a look at what are eating disorders? So an eating disorder is a behavioural condition characterised by severe persistent disturbance in eating behaviours and is associated with distressing emotions and thoughts.

Now this type of disorder can affect various functions of the adolescents be it physical, psychological or social functions. Now the estimated life time prevalence in the community of clinically significant eating disorders among adolescents has been said to be around 13 %. Now there are certain myths related to the eating disorders. Now let's look at what are they?

Now eating disorders only affects rich girls. This is only a myth. The fact is that this can affect the rich and the poor alike. Eating disorders are only issues of women. Again, this is only a myth. The fact being the eating disorders can again affect men as well as women. The next myth being eating disorder is only a phase and people tend to come out of it. So again, this is only a myth. This is not only a phase. This is a medical condition. This is a mental health condition and this requires proper support, proper treatment to bail the person, the adolescent out of this condition.

The next myth being eating disorders occur only in adolescents. Again, this is only a myth as it is seen as the previous literature suggests that eating disorders can be found in children as well as in older adults as well. The next myth being no treatment for eating disorders is required. Again, this is only a myth as a proper treatment be it psychotherapy, be it nutritional counseling, be it any other therapy, medications or hospitalization is required. So, depending on the stage the treatment definitely is required.

The next myth being eating disorders are rare. Again, this is only a myth as eating disorders we have seen that 13 % prevalence is seen among them, among the adolescents over the lifetime. Now what are the types of eating disorders? So, the various types of eating disorders can be or the most common types of eating disorders are anorexia nervosa, bulimia nervosa and binge eating disorders. Now why do adolescents indulge in eating disorders? So, there can be multiple factors not only single so these can be complex group of factors which together are pointing the adolescents towards eating disorders. So, the factors can be psychological, interpersonal, social or biological. Now coming to the psychological factors; there can be body dissatisfaction.

The adolescents may not necessarily be very much content, very much satisfied with their own body image. So, what this leads to is them falling into the prey of eating disorders. Next is low self-esteem. The adolescents may have low self-esteem, may have low self-worth, their own abilities they may begin to doubt. So, this again may land them up into the eating disorders.

Next is feeling of inadequacy. They may feel inadequate, they may feel lack of control towards their own life. Again, this is a major risk factor as far as falling into the prey of eating disorders is concerned. Next are depression and anxiety. So, the people struggling with depression and anxiety may land up into eating disorders.

The people suffering from stress, those who are lonely or may suffering from any sort of trauma again these may sort of land up into the eating disorders. So next is interpersonal factors. The interpersonal factors can be troubled relationships, difficulty expressing emotions, being teased based on size or weight and history of physical or sexual abuse. So troubled relationships can be because adolescents basically are such a tender age that they are experimenting. They are in that tender age where they are experimenting with their relationships.

It could be their first relationship. They could have trouble in running the same. So, these may lead to eating disorders. These adolescents may have difficulty expressing their emotions, what they feel like and what problem they are undergoing. So again, just to cope up with the same they may land up into eating disorders.

They may have been teased based on their weight, based on their size. So again, this could be a major predisposing factor for the eating disorders. Again, having had a previous history of physical or sexual abuse again they might be a forerunner or might be a risk

factor towards eating disorders. Coming next to the social factors for the eating disorders. So, the cultural pressures that glorify thinness or muscularity and often place value on obtaining the perfect body.

Now what this leads to, this leads the adolescents into something known as perfectionism. This perfectionism leads them to avoid eating or avoiding binge eating and having too much restricted value of their own weight. So, this may lead to eating disorders as well. There is a narrow definition of beauty as far as the culture is concerned. The cultural norms that value people on the basis of physical appearance alone and not inner qualities and strengths.

Again this has a long way as far as the eating disorder concern of the adolescents is there. Next coming to the biological factors. So, there could be hormonal imbalances, there could be genetic predisposition as well. So, the literature suggests that the eating disorders are suggested to be running in families as well. Now coming to the symptoms and warning signs of eating disorders.

So there can be a number of symptoms and warning signs of the eating disorders. We try and discuss a few of them. Now coming to the physical signs. The physical signs there could be rapid weight loss or weight gain. There can be changes in the menstrual cycle or the other physical signs could be dizziness and dehydration as well can be observed.

Coming to the behavioural signs, the adolescents may have obsession with their weight, food and calories. There can be avoidance of social situations involving food. The preparation of food can be done without themselves taking it only for the people who are consuming and the adolescents may not themselves consume the same food. There can be excessive exercise on part of adolescents. The psychological signs can be disturbed body image.

There can be fear of eating in public or may be with others and depression or anxiety. So, these are few of the symptoms and warning signs. When these are observed in the adolescents, it is time for the support system that is the family and the nearby people to take hold of the matter and just see what the adolescents are suffering from.

Coming next broadly to the topic Anorexia Nervosa. Now Anorexia Nervosa, the adolescents suffering from the same, they have restricted energy intake. Now what this leads to is very minimal intake of food. This minimal intake of food leads to abnormally low body weight and less than minimally expected weight. There is also intense fear of gaining weight or becoming fat. Now what this fear does is, this aggravates the disorder further and fat in terms of these individuals is very different like they perceive is very different from what the outside world perceives fat to be. Now what this fear instills is, these instill behaviours that interfere with weight gain despite of low weight and severely restrict the

amount of food that they eat.

So this is what this intense fear leads them to. Next is disturbance in body image. So, there can be a distorted perception of weight among the adolescents. As we can see in the figure, in the image below, what you can see is this is the probably a lean adolescent girl having a look at the mirror and perceiving herself to be a fat girl. So basically, there is a distorted perception of weight.

The self evaluation unduly is influenced by bodily weight, bodily shapes as such. There is persistent lack of recognition of seriousness of low weight and there is preoccupation with thoughts about the food and the need to lose weight. Now this preoccupation with the thought about food is a very serious concern.

Now let us take an example for the same. Suppose there is an adolescent girl who has been called for a probably for a movie or so on a weekend. So for any other normal adolescent the question would be maybe a yes or a no. But somebody suffering from anorexia nervosa may actually feel like what basically she has to avoid going to the theatre. May be eating chips, may be popcorn and cold drinks but this they tend to hide from their friends, from their other peers. So, it becomes very difficult for them to decide may be when they don't go. So the situation can be like they may feel that they may be outcasted from the peer group, they may not be called for the next movie or so. So it becomes a dilemma and even if they do say yes when they go and have such stuff they may avoid their dinner, they may avoid their next meal. So, all these things are ongoing in their minds. So, this preoccupation with thoughts about food can be running in their mind throughout the day during various other discussions as well. So, this does play on their mind and hence the mental health to large extent is hampered.

Next coming to what is binge? Now binge basically means eating in a discrete period of time, maybe it can be a one hour period and amount of food that is definitely larger than most people would eat during a similar period of time under similar circumstances. And what happens in binge is there is a sense of lack of control of eating during the episode. So basically, the inhibition is not there, the person doesn't know when to stop and goes on eating. There is no control mechanism as such.

So, coming next to Bulimia nervosa. Now what we can see in the figure here is, now this is again an adolescent girl who is secretly binge eating, probably this is her toilet room and she is having her food over there.

So again here in bulimia nervosa, there is a sense of lack of control during a binge episode. There is self evaluation which is unduly influenced by bodily weight or bodily shapes. There are inappropriate compensatory weight control behaviors and the frequency of such episodes could be equal to or greater than 1 per week for at least 3 months. Now there could be various inappropriate compensatory weight control behaviors just like one of them you can see in the figure over here like there is self induced vomiting. So basically

these inappropriate compensatory weight control behaviors are done or practiced to get rid of the calories and to prevent weight gain.

There could be what these practices could be are self induced vomiting, they may use laxatives, diuretics may be used, weight loss supplements can also be used. These individuals may maintain a body weight considered normal for their age, sex, and height. The normal body weight may be only due to the fact that though they are binge eating but due to the compensatory weight control mechanisms the weight is absolutely normal. And these are less obvious than anorexia and they may go unnoticed for longer period of time just because the weight is normal. Coming to Binge eating disorders, again there is recurrent binge eating in this disorder with marked distress or guilt of eating the food or binge eating per se.

There is considerable weight gain over time and the frequency of this disorder can be again equal to or greater than 1 per week for at least 3 months. Now the important feature to consider here in binge eating disorder is there is absence of compensatory behaviors and when there is absence of compensatory behaviors the important feature again to be noted here is the weight gain is visible over a period of time. Now let us have a look at the impact of eating disorders on the adolescents. The eating disorders can have numerous impacts on the adolescents. On the medical front there can be malnutrition and growth delay, there can be acute medical problems, there can be health problems which are secondary to malnutrition and they can be osteoporosis, impaired fertility and gastrointestinal problems.

On the mental health point of view there can be poor sense of identity, there can be compulsive behavior and there can be depression, anxiety. Now we had seen that these were risk factors for eating disorders. So again, this is like a vicious cycle. So, depression, and anxiety leading them towards eating disorders, and eating disorders leading the adolescents further towards depression and anxiety. These adolescents may show suicidal tendencies and may resort to substance use as well.

Next coming to psychosocial impact of eating disorders, the adolescents may have incomplete education or they may leave in between due to the eating disorders. There can be work issues, there can be school issues as well, there can be social isolation and there may be self neglect as well. Now on the family front there could be high burden of care on part of the family just to treat the eating disorders or just to take care of the eating disorders on part of the adolescents. Now coming to the treatment options for eating disorders, the foremost and major treatment modality considered in eating disorders is psychotherapy where cognitive behavioral therapy and family based therapy are generally used. On the nutritional counseling front, a proper dietician must be consulted, and proper counseling advice being taken from the dietician would go a long way towards the weight control of the adolescent.

Coming to medications; anti-depressants, anti-psychotics and other medications like

depression, anxiety and for other co-existing mental conditions can be used. In severe cases, hospitalization may be needed to correct the underlying deformity. Now coming to the prevention strategies for eating disorders, first is developing a positive body image. It is important for adolescents to learn that they need to embrace their natural body shapes and cultivate self-acceptance. Eating a balanced diet including a variety of foods in the diet is very important and avoiding restrictive eating habits.

Encourage help seeking, so it is important to promote open communication and encouraging help seeking behavior if concerns arise. It is important to take help from the support system, the family, parents, teachers and the newborns and if it is not possible from their side then go to the professional help that may be needed. Avoid comparing yourself to others. So nowadays what happens is the adolescents they compare themselves to their peers, to people who are good-looking in their group, to compare themselves to models, other athletes you know and this comparison leads to a sense of self-worth like they lack self-esteem due to this constant comparison and external factors such as weight and appearance. So, it is important not to base themselves on self-worth on these external factors.

Practicing self-care; now engaging in activities that promote physical and emotional well-being such as exercise, mindfulness, and relaxation techniques again this is a very important prevention strategy as far as eating disorders is concerned. Now the role of caregivers and families; now the caregivers and families have a huge role to play as far as eating disorders in adolescents is concerned. Education; the caregivers and families need to be educated about eating disorders, the risk factors and the signs and symptoms of the eating disorders. Support; the caregivers and families can provide emotional and practical support throughout the treatment process to bail the adolescents out of this eating disorder menace. Collaboration; the caregivers and families could work closely with the healthcare providers to ensure there is a coordinated approach to the care of the adolescents.

So that was all about eating disorders. Now let's have a look at what are junk foods. So any prepackaged snack foods high in calorie content but low in nutritional value, these can be said as junk foods. Now these junk foods are typically high in sugar, fat and salt and this can lead to weight gain, diabetes and other health problems. Many junk foods have ingredients that are heavily processed leading to nutritional deficiencies and other health related risks.

Junk food is often cheaper than whole foods. So, adolescents may see it as a very quick and easy option for their meals. Now let's come down to why adolescents are falling prey to junk food. Now it could be due to their busy schedules. They are often involved in extra-curricular activities giving them very little time for meal preparation and at this juncture junk food serves as a convenient and easy option for them. Influence of media, the advertisements and product placement in media can make junk food seem like a desirable choice.

So while I have always been advocating that the actors, the athletes, the superstars they have always been the promoters of such risk behaviors. One thing that is different from this, is probably from this image those who are football lovers might know what happened during a Euro 2020 presentation. This was a press conference where Cristiano Ronaldo, one of the famous football players, so he was called in for this presentation and what he did was he removed the coke bottles over there and he endorsed water bottle instead. So, this is basically a very positive impact from a famous celebrity and so basically the time is that the other celebrities also follow suit and they discourage the use of junk foods and promote healthy foods.

Next is peer pressure. So basically, pressure to eat unhealthy food to fit in with the peers. The adolescents might feel that just to fit in with the peers they have to eat all the unhealthy junk food and other things and probably if they do not do this, they may be again not be a part of the peer group and they may be left away and they may be not called in for the next event. So, the peer pressure again is an important thing so why adolescents are falling prey to junk foods. Now what are the harmful effects of junk food? So, the harmful effects can be weight gain and obesity which are basically risk factors for further future health problems. The dental health is compromised, there can be tooth decay and cavities, especially when consumed frequently.

Brain function, they can negatively impact brain function. There can be memory and focus problems as well. Now what are the various prevention strategies as far as junk food and adolescence is concerned? Educating the adolescents regarding negative impact of junk food and how to make healthy choices is a very important prevention strategy. Limiting the availability of junk food. So basically, encouraging schools and parents to limit the availability of junk food to the adolescents. That is another important issue that needs to be taken care of. Encouraging physical activity. So encouraging adolescents to engage in physical activity to combat the negative effects of junk food. This can be another important promotive physical activity.

So, giving them healthy alternatives in place of junk food. So, these can be fruits and vegetables. So, these nutrient rich foods can help adolescents maintain a healthy weight and prevent chronic diseases. Whole grains; these provide vitamins, minerals, and fiber while also being very filling and protein-rich foods such as nuts, seeds, and lean meat can help build and repair tissues in the body. So, coming to the role of parents and schools. So, the parents can encourage healthy eating habits. They can model good behavior at home itself by making nutritious food which is readily available at home.

So, the adolescents will eat readily cooked home made food so they won't resort to junk food outside. Schools can limit the availability of junk food in the vending machines and the cafeterias and they can encourage healthy food options as well. The schools can incorporate physical education into their own curriculum to encourage adolescents to stay active, to stay fit and healthy. Now coming to the take-home message from this lecture. The adolescents basically they are very vulnerable for eating disorders and junk food.

Just more due to the transformative nature of this adolescent age group. The eating disorders, the most common eating disorders that we have considered here are anorexia nervosa, bulimia nervosa, binge eating disorders. The various reasons for eating disorders being psychological, interpersonal, social and biological. The treatment for these disorders can be psychotherapy, nutritional counseling, medications, and hospitalization in case of severe cases. The prevention strategies for eating disorders can be developing a positive body image, encouraging help seeking from professionals when required, getting the required support from friends, family, teachers and school as well.

So these are some of my key references. Thank you so much. That's all from my end.