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# Eating Disorders

Patient name: \_\_\_\_\_ Admission: \_\_\_\_\_

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- I. **The client/caregiver can define eating disorders.**
  - A. Eating disorders are serious but treatable medical illnesses involving severe disturbances in eating behavior.
  - B. The two main eating disorders are anorexia nervosa and bulimia nervosa.
  - C. Denial of the problem is common. Families and friends may become involved to ensure medical help for the person suffering from eating disorders.
  
- II. **The client/caregiver can list factors that increase risk of an eating disorder.**
  - A. Girls and women are more likely to develop eating disorders.
  - B. Patients are most common during teens and early 20s.
  - C. Feelings of insecurity or an overly critical family may increase risk.
  - D. Patients are more common in people with a close family member suffering from an eating disorder.
  - E. People with depression, anxiety disorders, and obsessive-compulsive disorder have a higher risk. Some people with bulimia have impulse control issues.
  - F. People who participate in highly competitive athletic activities have a greater risk.
  
- III. **The client/caregiver can explain anorexia nervosa and its symptoms.**
  - A. Anorexia nervosa is a condition that results from self imposed starvation.
  - B. Symptoms of anorexia nervosa are
    - Loss of 20% to 40% of usual body weight
    - Intense fear of becoming obese
    - Preoccupation with food (avoiding food, picking out only few foods to eat,

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- weighing food to cut back size portions)
  - Body image disturbance
  - Misconceptions of physical status
  - Intake as low as 500 to 800 calories a day
  - Poor muscle tone
  - Self-esteem that is directly related to body weight or shape
  - After reaching puberty have infrequent or missing menstrual periods
  - Repeatedly check body weight
  - Use intense and compulsive exercise to maintain low weight
  - Excessive hair loss
- IV. **The client/caregiver can explain bulimia nervosa and its symptoms.**
    - A. Bulimia nervosa is when a person binges and purges.
    - B. Binging is the consumption of large amounts of food in short periods of time. Binging can mean consuming as much as 5,000 to 20,000 calories a day.
    - C. Purging is the intentional clearing of food from body by
      - Vomiting (self-induced or use of Ipecac)
      - Abuse of laxatives or diuretics
      - Enemas
    - D. Because of the cycle, they appear to be of normal weight.
    - E. Symptoms of bulimia nervosa are
      - Body image disturbance
      - Much of the activity done in secrecy
      - Weight determines self-esteem.
      - Sneaking food or lying about eating habits
      - Eating to relieve stress or depression
      - Perfectionism
      - Eating when not hungry
      - Repeated attempts at dieting or very strict dieting

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V. **The client/caregiver can list components of treatment.**

- A. Nutrition education
- B. Psychotherapy
- C. Family counseling
- D. Medications

VI. **The client/caregiver can list measures to manage and cope with eating disorders.**

- A. General self-care measures to develop are
  - 1. Follow a regular schedule for meals.
  - 2. Stop eating when you are full, but not stuffed.
  - 3. Eat healthy, well-balanced meals.
  - 4. Take vitamin and mineral supplements as ordered by physician.
  - 5. Exercise regularly, but use moderation.
  - 6. Take medications as ordered.
- B. Coping skills to break the self-destructive behaviors involved with eating disorders.
  - 1. See your physician, counselor, or health care professional regularly.
  - 2. Improve self-esteem by getting involved in activities or groups you enjoy, and learn a new skill or hobby.
  - 3. Get help to improve family dynamics.
  - 4. Seek out support group or supportive friends.
  - 5. Be realistic about healthy weight and body image.

VII. **The client/caregiver can list possible complications of eating disorders.**

- A. Heart conditions such as slow pulse, low blood pressure, electrocardiogram (EKG) abnormalities, and congestive heart failure
- B. Kidney stones or kidney failure

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- C. Elevated uric acid
- D. Low blood glucose levels
- E. Erosion of enamel on teeth, increased cavities, and bleeding gums
- F. Esophageal perforations or lacerations (from induced vomiting)
- G. Aspiration pneumonia
- H. Death from cardiac arrest or electrolyte imbalance

**RESOURCES**

National Eating Disorders Association  
[www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)

American Dietetic Association  
[www.eatright.org](http://www.eatright.org)

Nemours Foundation/Kids Health for Parents  
[www.kidshealth.org/parent/emotions/feelings/eating\\_disorders.html](http://www.kidshealth.org/parent/emotions/feelings/eating_disorders.html)

National Mental Health Information Center  
[www.mentalhealth.samhsa.gov/publications](http://www.mentalhealth.samhsa.gov/publications)

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