

The Health Impact of Restrictive Eating

Before Getting Started...

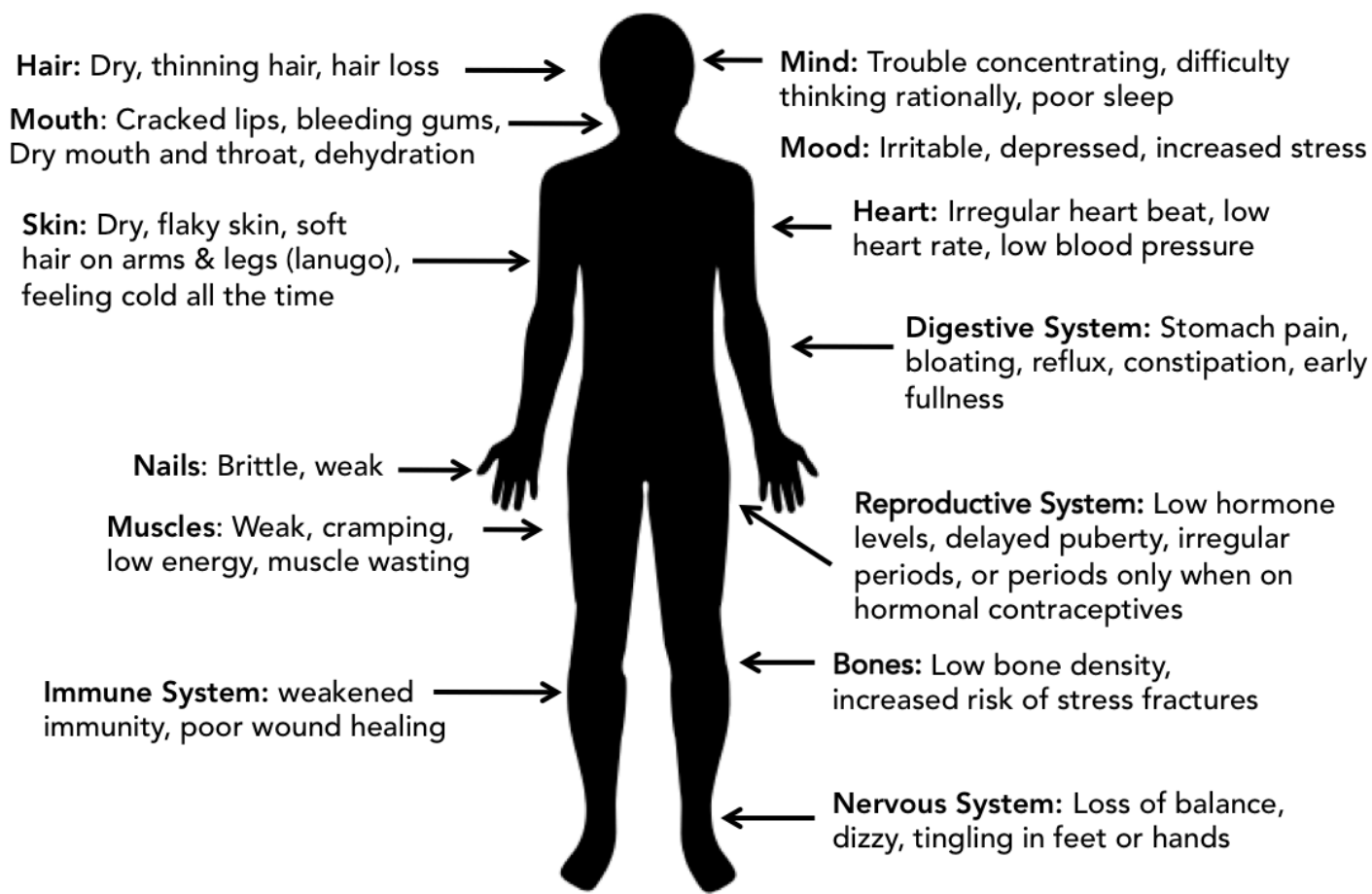
Take a few minutes to discuss the following questions with your nutritionist:

- When you hear the word “malnutrition,” what do you think of?
- How do our bodies respond when we don’t eat enough calories or nutrients?
- What eating and exercise behaviors may be a sign of an eating disorder?

The Facts on Malnutrition:

People of all ages and sizes can be malnourished. The body is malnourished when it is not getting enough energy from food and drinks or not enough of a specific nutrient like protein, carbohydrates, fat, vitamins or minerals.

Common Signs of Malnutrition



What Can Cause Malnutrition?

Someone may be malnourished if they have a long-term illness or health concern like cancer or Crohn's disease, or if they don't have access to a balance or variety of foods. Other times, people may be malnourished if they eat in a way that does not meet their body's energy or nutrient needs, which can happen when someone has an eating disorder.

Generally speaking, an eating disorder can cause someone to have extreme emotions, attitudes, and behaviors around food, exercise, and/or body image. Research shows people with eating disorders actually have chemical changes in their brain that impact the way they think about food, nutrition, and their bodies.¹



Since we live in a culture where dieting and weight loss are common topics of conversation, it can be hard to know whether eating and exercise habits are healthy or disordered. Below is an overview of some behaviors that may indicate an eating disorder.

Signs and Symptoms of an Eating Disorder:

(Adapted from the National Eating Disorder Association)

- Avoiding eating when hungry, skipping meals, or not eating at certain times of the day
- Restricting intake of calories, carbohydrates, or fat or rigidly tracking intake
- Cutting out certain foods or entire food groups (ex. sweets, starches, fat, dairy)
- Eating only certain food textures or flavors with picky eating worsening overtime
- Using excessive amounts of gum, “diet” foods, or water or other non-caloric drinks to suppress appetite and hunger
- Developing food behaviors to avoid or restrict eating (ex. excessive chewing, taking small bites, rearranging food on plate, using condiments excessively or in an unusual way)
- Making excuses to avoid mealtimes or situations involving food, cooking meals for others without eating, and feeling uncomfortable eating around others
- Isolating self from friends and activities or becoming withdrawn and secretive
- Being unable to maintain a weight appropriate for age, height, and body frame
- Feeling the need to “burn off” calories, purge, or use laxatives or diuretics regularly
- Maintaining a rigid exercise routine despite weather, muscle weakness, illness, or injury
- Being preoccupied with thoughts about food or calories, fear of being “fat” or gaining weight, and denial of seriousness of significant weight changes
- Checking ingredient lists and nutrition labels compulsively, spending a lot of time reading about nutrition online or looking at food or recipes on social media
- Dressing in layers or baggy clothes to stay warm or hide weight loss
- Inflexible thinking, strong need for control over food and exercise choices, difficulty expressing emotions

In contrast, normal and healthy eating is on the other end of the spectrum. While this can look different for everyone, some principles of normal, healthy eating are outlined below.

Principles of Normal, Healthy Eating:

- Eating when you're hungry and stopping when you're full and satisfied
- Being flexible with food choices depending on your schedule, mood, and social events
- Making food choices based on what your body needs and what you enjoy eating
- Trusting your body's ability to regulate your energy needs and weight by listening to your internal hunger and fullness cues
- Spending some time thinking about food, nutrition, and your body but not being so focused that these thoughts distract you from your interests and relationships

Disordered eating is the gray area between healthy eating and an eating disorder, where someone may not identify completely with normal and healthy eating principles or with symptoms of an eating disorder. Since disordered eating can increase someone's risk of developing an eating disorder, teens who suspect they may have disordered eating should share this with their health care provider or a dietitian.

How Do You Treat an Eating Disorder?



The sooner you start working with a comprehensive care team to address your eating disorder behaviors, the easier it is to treat and fully recover.

What Does This Mean For Me?

1. Where do you think you fall on the spectrum of eating behaviors?

2. What are some ways you would be comfortable making changes to your eating?

To Learn More:

National Eating Disorders Association: www.nationaleatingdisorders.org

National Association of Anorexia Nervosa and Associated Disorders: www.anad.org

Center For Young Women's Health: youngwomenshealth.org/nutrition-fitness-index/

Center For Young Men's Health: youngmenshealth.org/nutrition-fitness-index/

Lock J, Le Grange D. *Helping Your Teenager Beat an Eating Disorder* (2015).

Thomas J, *Almost Anorexic*; 2013.

References:

1. Avena, Nicole M., and Miriam E. Bocarsly. "Dysregulation of brain reward systems in eating disorders: neurochemical information from animal models of binge eating, bulimia nervosa, and anorexia nervosa." *Neuropharmacology* 63.1 (2012): 87-96.

2. "Anorexia Nervosa." National Eating Disorders Association, 2018, <https://www.nationaleatingdisorders.org/learn/by-eating-disorder/anorexia>.