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Anorexia Nervosa Versus Bulimia

Anorexia nervosa and bulimia are similar because both eating disorders are about getting thin and fitting society's view of how women or men should physically look. However, there are some qualities that define differences between the two. Anorexia nervosa and bulimia have different signs and symptoms, behavior, negative effects on the body, and treatment.

Anorexia nervosa is one type of eating disorder focused on by physicians and therapists. There are multiple signs of anorexia nervosa that can be noticed in a person/patient: thin physique, constipation, dizziness, stomach pain, disappearance of menstrual cycle/periods, discoloration of skin, sensation of fainting, and change of diet (*Anorexia Nervosa; Physical Effects*). Most signs and symptoms of anorexia nervosa are traced back to starvation. Therefore, it is easy for anorexia nervosa to trick the eye because people are naturally different in body weight, skinniness, and diet/physical habits (*Anorexia Nervosa*). Anorexia nervosa also affects how a person acts, and it is very common that a person with anorexia nervosa restricts his or her food intake. These limitations include maintaining low calorie count, limiting types of food, and restricting the number of meals eaten in a day. Having this disease also comes with warning signs such as negative view of oneself, sensation of losing control, and high sensitivity to negative comments/criticism toward one's appearance (*What Is Anorexia*). There is also intense guilt when the person misses an exercise session because someone with anorexia is obsessed with his or her weight, shape, or physique. The patient/person also experiences restlessness or hyperactivity and is motivated to keep on moving (Barbarich-Mersteller 49).

Anorexia nervosa has noticeable behavior issues in a patient/person. One distinguishable trait is the desire to maximize physical activity by doing things like avoiding the use of cars or any vehicle. “Compulsive exercise” like this helps one with anorexia nervosa “reduce tension or avoid discomfort” (Barbarich-Mersteller 47-48). Behavior symptoms of this disease also include intense restrictions on food and excessive exercise; nevertheless, this disease has emotional behavior issues too. People with anorexia nervosa often skip meals, deny themselves food, are cautious of eating in public, fear weight gain, wear multiple clothing layers, and have insomnia. Anorexia nervosa may be more common in women, but it is also occurring in males too (*Anorexia Nervosa*).

There are constant complications for those who suffer from anorexia. For example, well-cared-for intestines are essential for everyone, yet with anorexics, their intestines are out of control, leading to constipation, diarrhea, bloating, and/or abdominal pain. The kidneys are also affected by this eating disorder because of dehydration, and the patient/person also faces muscle loss, weakness, and fatigue (*What Is Anorexia*). In severe cases, the brain is affected as well, causing mood swings, anxiety, depression, nerve damage, seizures, confused thinking, irritability, and numbness in the fingers and feet. High possibilities exist for heart problems, circulation problems, low body fat that protects the heart, and low blood pressure. This eating disorder is sometimes present in women who have the inability to conceive a child. When this happens, the female is open to irregular/absence of periods and loss of libido, and women who do try to conceive a child while being an anorexic have a high chance of losing the child or having an underweight baby (*Physical Effects; What Is Anorexia*). Typically, treatment for someone with anorexia nervosa is early therapy before the disorder becomes severe enough to be fatal (*Anorexia Nervosa*).

In contrast to anorexia nervosa, bulimia nervosa has different characteristics. Bulimic

patients/people do eat, and when they do, they are digesting thousands of calories in one feeding/meal. These people follow the binge-and-purge cycle, and purging can happen daily or multiple times in one day (*Long Term*). A patient/person suffering from bulimia has multiple series of binge eating and purging; furthermore, many of these episodes are done in private or in secrecy. Therefore, it is impossible to count the calorie intake of all the visits to the refrigerator and fast-food restaurants in one bingeing episode. Since there is an impulse of eating more than what the typical calorie intake is, sometimes bulimics eat something like an entire birthday cake. Signs of bulimia are chronic hydration, eating secretly, frequently going to the restroom, and the smell of vomit. Symptoms of this eating disorder are muscle cramps, dry skin, and irregular heartbeat (*Bulimia Signs*).

Bulimia nervosa has its one specified behavior as well. A patient of bulimia has a strong sensation that he or she is trapped in a toxic relationship with food. People with bulimia also have obsessions about how they see themselves, a scheduled time to binge eat, loss of control while binge eating, and a need to release what they have eaten (purge) in order to intake more calories/food (*Bulimia Nervosa*).

Bulimia comes with negative side effects to the human body. Bulimia involves vomiting, making the stomach acid decay the teeth and enamel, and some bulimics experience ulcers or gastroesophageal reflux disease. The esophagus, as well, becomes soft, raw, and swollen because of the forced vomiting, and forcing the vomit to resurface leads to the tensility of the stomach, making the stomach liquids rush to the abdominal cavity, resulting in the person going to the emergency room (*Long Term*). Patients/people going through bulimia also experience these negative effects: facial swelling, bloody vomit because of the esophagus tissue thinning, irregular heartbeat because the frequent purging leads to a weakened heart, a high risk of heart failure, and red eyes because of the forceful vomiting (*Bulimia Nervosa: Causes*).

Bulimia nervosa has a variation of treatment plans. Research shows that for those who suffer from bulimia it is best to put them in a group therapy session focused on bulimia recovery. Family and marital therapy sessions are more effective because “[the] treatment of female patients (aged 14-17 years) with brief family therapy resulted in significant [decrease] in bulimic behavior [over] 1 year.” To prove that medication is also needed to treat bulimia, 70 percent of bulimics need a combination of medication and “cognitive-behavior interventions” because it has been shown that bulimia responds better to psychotherapy than only medication, and two different manners/ways have been proven to be more effective than just having one (Steiner and Flament 76, 80). Another type of treatment for bulimia includes both medical and psychiatric intervention to support specific diet training to make sure the patient is being healthy safely as well as safely detoxing the patient from bingeing and purging because the patient/person typically uses laxatives, resulting in constipation and abdominal pain (*Bulimia Health*).

To conclude, anorexia nervosa is starvation while bulimia is binge and purge. Bulimia causes tooth decay and bloody vomit while anorexia causes excessive exercise. Each one has different methods of treatment with different success rates. Clearly, anorexia and bulimia have different qualities which make them different from each other.

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