

Anorexia Nervosa: A Serious Psychological Disease

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Dear Madam,

I am writing to shed light on Anorexia Nervosa, a dangerous psychiatric illness in today's society. An increasing incidence of eating disorders has been detected in students from Karachi¹, especially medical students, who are exposed to high levels of stress. Studies conducted in the city suggest that a significant proportion of students suffer from the illness while many others stand at high risk¹.

Anorexia Nervosa is marked by disordered dining sequence, severe weight loss, and is usually accompanied by several medical complexities². What commonly begins as a simple desire to lose a little weight, can turn into a life-threatening disorder with results that can seriously alter the individual, their family, and the community³. The word 'Anorexia' means loss of hunger; Anorexia Nervosa presents with loss of appetite, alarmingly reduced body weight, misshapen torso appearance, and profound anxiety of being obese⁴.

This deranging mental illness affects several systems within the body, with complications such as purpura, liver dysfunction, osteoporosis, diabetes, a crocyanosis etc. Due to these systemic complications anorexic patients have been reported to die at a young age¹. Up to 16% of victims' correspond to the norm for anorexia a decade after their

initial interpretation, the morbidity from anorexia is worse for patients with long-term disease; remedy is much more valid if admitted early during the development of disease³. Approximately 20% of people with anorexia will die from complex diseases such as cardiac arrhythmias or suicide⁴. Therefore it is essential to bring this disconcerting information into everyone's knowledge. Several psychiatric diagnostic tests can be used to diagnose a patient with Anorexia Nervosa, including DSM-5, SCOFF, EAT-264 etc. DSM-5 Diagnostic Criteria for Anorexia include⁵.

Restricting food intake - Eating less than needed to maintain a body weight that's at or below the minimum normal weight for your age and height.

Fear of gaining weight - Intense fear of gaining weight and becoming fat, or persistent behavior that interferes with weight gain; such as vomiting or using laxatives, even though you're underweight.

Problems with body image - Denying the seriousness of having a low body weight, connecting your weight to your self-worth, or having a distorted image of your appearance or shape.

Along with the distinctive features of diagnosis, individuals with Anorexia generally exhibit other attributes around food, including denial of self-starvation, finite food selections, making garnished meals for others, screening and collecting particular meal items with special care; such as slicing of snack into small pieces⁶. Constant ignorance and denial are general mental characteristics, as well as perfectionism, commitment to control, and Obsessive-compulsive habits⁷.

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Differential diagnosis for Anorexia Nervosa includes medical illnesses, medications, substance abuse and other related psychiatric diseases. Reduction in weight and variation in food intake can take place in many other conditions: life-threatening diseases such as cancer, certain endocrine disorders, infections, as well as certain medications and drugs of abuse such as amphetamines, can change the regular pattern of food intake and rapidly reduce weight³.

Many psychological diseases show weight loss hence changes in feeding habits alone do not fully describe the complete manifestations responsible for the prognosis of Anorexia⁶. An example is, a person suffering from a hallucination disorder may avoid taking food because of the fear that it is poisoned or contaminated. Other disorders with similar manifestations, such as Body Dysmorphic Disorder, Obsessive-Compulsive Disorder, Schizophrenia and Autistic Spectrum Disorders, can also show irregular eating habits with strict food preferences, but they do not show the key features of Anorexia and display a variety of other symptoms³.

Treatment of Anorexia Nervosa consists of two major components: Dietary treatment for weight restoration and Psychotherapeutic treatment. Retention of weight and equilibrium is the main goal in curing anorexia. It is usually achieved by maintain a balanced diet, counseling and help from a certified dietician⁷. Many of the particular food attributes and psychological effects of hunger such as depression and anxiety disappear once weight has been restored⁸.

There is no particular drug that can eradicate Anorexia or its symptoms. Many psychotropic drugs used in combination with psychotherapy give beneficial results in the treatment of the disease. Anti-anxiety agents, atypical antipsychotics, and mood stabilizers are also used to treat coexisting disorders⁹.

Anorexia is a complicated, often deadly, chronic disease with an immense impact on the

brain and the body. Theories of aetiology point to many elements, with socio-cultural pressure exerted especially on women. The cure is effective when given by a multidisciplinary workforce spending varying remedy modalities because the disease can be hard to treat. Especially in women who are under intense pressure due to our society's memo, that in order to be more, one has to be less. The body expresses what words cannot: power, even in a misshaped way, is better than no power at all. It is now easy to rectify such self-perpetual diseases by knowing the specific causes. It is also possible to minimize the number of relapses and reduce causes of these illnesses by means of skilled psychotherapy aimed at the psychopathology of Anorexia nervosa¹⁰.

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