Eating Disorders: What are the risks?

Eating disorders are serious mental illness that are associated with poor physical and psychological health and reduced quality of life. When eating disorders go untreated, they can be associated with serious, even life-threatening health complications. It is important that any individual with an eating disorder remains aware of the potential health risks. We strongly recommend that all individuals with an eating disorder regularly consult with a medical practitioner, to monitor and manage potential health risks and avoid more serious and irreversible changes.

**Heart Health**

One very concerning medical risk of having an eating disorder is heart problems. Heart problems may cause a person to: tire easily, feel light-headed and faint, be sensitive to the cold, have an irregular heart beat, or experience chest pains. These heart problems are very serious and in extreme cases may lead to sudden death.

When a person rapidly loses weight, the size and strength of their heart substantially decreases. As a result, their heart is not able to pump blood around their body as efficiently as it should. This can lead to feeling light-headed and dizzy when standing up suddenly from a sitting or lying position. It is only with gradual renourishment that a person’s heart can return to its normal size and strength and therefore begin to pump more efficiently. Nevertheless, given the seriousness of these heart problems, it is essential that your heart functioning is monitored regularly by your GP.

Electrolytes, or salts in the body such as potassium and sodium, help our muscles work properly. Since your heart is a muscle, electrolytes maintain its regular beat. Frequent vomiting or the use of laxatives or diuretics can cause fluid loss, which may lead to fluctuations in the body’s electrolytes, and as a result cause an irregular heart beat and possible heart attack. To reduce the likelihood of problems associated with an imbalance of electrolytes, it is important that you have the levels of electrolytes in your blood checked by your GP regularly. Your GP may prescribe you with potassium or other supplements to help maintain a stable level of electrolytes.

**Bone Health**

Research shows that loss of bone density and bone mineral deficiencies are common in individuals with eating disorders (especially anorexia nervosa), and that damage can occur early in the course of an eating disorder. If damage or insufficient growth occurs during adolescence, an individual may not achieve their optimal bone density, increasing risk of osteoporosis. The main cause of osteoporosis is malnutrition and low weight. Many hormonal changes occur when a body has insufficient reserves of fat and muscles. These include changes to sex hormones (testosterone and oestrogen) as well as high levels of cortisol, low levels of IGF-1 and Leptin. Changes in these hormones can slow bone development and even cause bone loss. If osteoporosis develops, bones become fragile and are likely to break from the slightest injury or fall. Bone fractures, chronic pain, disability, and loss of stature may also occur.

Although we cannot reverse damage to bone health, the only way to prevent further bone damage is by treating eating disorders early and reversing malnutrition. A well-balanced diet rich in calcium and vitamin D and vitamin K is important for building and maintaining bone strength. A person would also need to work towards maintaining a healthy body weight and normalising body composition (particularly fat) to maintain bone health. Excessive exercise will deplete calcium resources.

*For more information see our handout: Calcium and Bone Health*
**Eating Disorders: What are the risks? cont.**

**Risks of Regular Vomiting**
Vomiting often starts as part of an attempt to regain control after breaking dietary rules or eating more than planned. When vomiting occurs regularly, it can affect health in a number of ways. Vomiting causes gastric acid to enter the mouth and erode tooth enamel, which leaves teeth vulnerable to erosion, brittleness, and thermal sensitivity. Enamel erosion is not reversible. Expensive dental work can be needed to repair or replace the damaged tooth. Parotid (salivary) glands can swell up and cause the cheeks to look enlarged and puffy. Fingers and knuckles can become calloused and burned by gastric acid. Ruptures and bleeding can occur in the oesophagus as acid and food pieces are forcefully ejected.

Imbalances in the body’s electrolytes, such as potassium and sodium, can result in fainting, fever, digestive problems, confusion, blood pressure changes, heart palpitations, seizures, cardiac arrest and even death.

*If there is blood in your vomit this may indicate serious damage and you should contact a medical practitioner immediately.*

While prevention is the best option, there are ways to minimise the damage caused by regular vomiting.
- Gently brush teeth and spit without rinsing the toothpaste away—this leaves fluoride to strengthen the tooth enamel.
- Alternatively, rinsing with a mixture of baking soda and water can help neutralise gastric acid.
- Chew sugar free gum—this promotes saliva production which helps protect against acid.

*Also see our handout, *Vomiting and Your Health*

**Gastrointestinal Problems**
Gastrointestinal problems often common in people with eating disorders include: bloating, constipation, diarrhoea, flatulence and abdominal pain.

Many gastrointestinal problems are caused by a restricted diet that lacks nutrients, such as fibre and water, that are needed to maintain a healthy intestinal tract. Laxatives can worsen symptoms such as constipation and bloating, because after use the intestines have emptied and it may not be possible for a normal bowel movement to occur for several days. Laxatives can also increase swelling, pain and gas formation in the stomach, which contributes to feeling bloated. In extreme cases, it is possible to become so dependent on laxatives that your bowel will not function properly without them. The best way to reduce symptoms of constipation and bloating is to normalise your eating and reduce laxative use. To help your body return to normal bowel function, make sure you eat a range of foods that contain dietary fiber, such as wholemeal bread, high-fiber breakfast cereals, brown rice, beans, fruit and vegetables, and drink plenty of fluids.

*Also see our handout, Laxative Misuse.*

**Hormonal Changes**
Eating habits and weight play an important role in our hormone levels. Disordered eating, compensatory behaviours (e.g. excessive exercise), and being either above or below the weight that is healthy for our body can disrupt hormone production. Hormones that regulate metabolism, fertility, pregnancy, and bone health are particularly affected by eating disorders. Low levels of the hormones oestrogen, progesterone, and testosterone can result in a reduction of fertility or infertility in individuals with an eating disorder.

In women, symptoms may include:
- Low libido (sexual desire)
- Absence of menstrual periods (*amenorrhoea*)
- Irregular menstrual periods

When pregnancy does occur, eating disorders can impact on reproductive hormones. Women who fall pregnant while they are not at a healthy weight for them are at higher risk of complications during pregnancy.

In men, symptoms may include:
- Low libido (sexual desire)
- Loss of early morning erections
- Loss of nocturnal emissions (“wet dreams”)

Other effects of hormones include:
- Low levels of thyroid hormones may cause constipation and dry skin
- Overeating, binge eating, or being at a higher weight can cause an increase in hormone levels that increases the retention of body fat
- High levels of stress hormones cause sleep problems, anxiety, depression, or panic (e.g. increased heart rate)
- Eating disorders may also impact on hormones involved in appetite, puberty and growth

*Also see our handout, Eating Disorders and Hormones*