ANOREXIA NERVOSA

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ABSTRACT:

Anorexia nervosa is an illness characterized by significant weight loss, amenorrhea, distorted body image and a relentless pursuit of thinness. The disorder affects primarily young women between the ages of 13 and 20, and is more commonly seen in westernized countries. Although the incidence is relatively rare, affecting approximately 0.5 to 1.0% of younger women in the United States, medical complications can be severe, and long-term mortality rates may approach 20%. Recent studies indicate that subclinical eating disorders occur in at least 5% of women and up to 1/3 of females among special populations such as athletes and insulin-dependent diabetics. The etiology of eating disorders is not known, but there are psychosocial and biological influences. Malnutrition associated with anorexia nervosa can affect nearly every organ system in the body, with cardiac complications responsible for 50% of the deaths in anorexia nervosa.

KEY WORDS: Anorexia, Eating disorder.

INTRODUCTION:

Anorexia Nervosa is characterized by highly specific behavioral and psychopathological symptoms and significant somatic signs. Majority are females and the onset is during adolescence. The core psychopathological feature is the dread of fatness, weight phobia and drive for a thinness.

DEFINITION:

An eating disorder causing people to obsess about weight and what they eat. Anorexia is characterised by a distorted body image, with an unwarranted fear of being overweight .Symptoms include trying to maintain a below-normal weight through starvation or too much exercise.

ETIOLOGY:

- a. Genetic causes
- b. A disturbance in hypothalamic function
- c. Social factors
- d. Individual psychosocial factors
- e. Causes with in the family

SYMPTOMS

Physical symptoms

Physical signs and symptoms of anorexia may include:

- Extreme weight loss or not making expected developmental weight gains
- Thin appearance
- Abnormal blood counts
- Fatigue
- Insomnia

Emotional and behavioural signs and symptoms may include:

- Frequently skipping meals or refusing to eat
- Denial of hunger or making excuses for not eating
- Not wanting to eat in public
- Flat mood (lack of emotion)
- Social withdrawal
- Irritability

COURSE AND PROGNOSIS: Anorexia nervosa often runs a fluctuating course with periods of exacerbations and partial remissions. Outcome is very variable.

DIAGNOSIS

- Complete Physical examination
- Complete blood testing
- ECG readings irregular
- Differential diagnosis to rule out other psychiatric disorders like substance abuse, anxiety disorders
- Based on ICD10 criteria

TREATMENT MODALITIES:

Pharmacotherapy:

- Neuroleptics
- Appetite stimulants
- Antidepressants

Psychological therapies:

- Individual psychotherapy
- Behavioural therapy
- Cognitive behaviour therapy
- Family therapy

NURSING INTERVENTIONS:

- Maintain a strict intake and output chart.
- Monitor status of skin and oral mucous membranes.
- Encourage the patient to visualize feelings of fear and anxiety related to achievement, family relationships and intense need for independence.
- Encourage family to participate in education regarding connection between family process and patient's disorder.
- Avoid discussion that focus on food and weight.
- Short term management is focused on ensuring weight gain and correcting nutritional deficiencies.
- Hospitalization is usually required and successful treatment depends on good nursing care, with clear aims and understanding on the part of the patient as well as the nurse.
- Eating must be supervised by the nurse and a balanced diet of at least 3000 calories should be provided in 24 hours.
- In the early stage of treatment, its best for the patient to remain in bed in single room while the nurse maintains close observation. The goal should be to achieve a weight gain of 0.5 kg to 1 kg per week.
- Weight should be checked regularly. Monitor serum electrolyte levels and signs and symptoms.

COMPLICATIONS:

- Anemia
- Heart problems, such as mitral valve prolapse, abnormal heart rhythms or heart failure
- Bone loss (osteoporosis), increasing the risk of fractures
- Loss of muscle
- In females, absence of a period
- In males, decreased testosterone
- Gastrointestinal problems, such as constipation, bloating or nausea
- Electrolyte abnormalities, such as low blood potassium, sodium and chloride
- Kidney problems

CONCLUSION:

Anorexia nervosa is a severe eating disorder that is characterized as a mental illness. In some cases it can lead to death. Whether the patient is influenced by biological factors or sociocultural factors, the outcome is the same: thin and unhealthy. The three studies discussed argued solid treatment options and though some treatments do not work the same for everybody, seeking for therapeutical support may decrease the symptoms associated with anorexia nervosa thus increasing the chances of regaining control.

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