

beateatingdisorders.org.uk



**I'm worried about someone
with an eating disorder...**

Talk eating disorders with Beat.

Eating disorders can be hard to spot.

Eating disorders are mental illnesses.

Recovery is possible.

What is an eating disorder?

Eating disorders are mental illnesses. They aren't the same as changing your diet – they can take over someone's life and the lives of those around them. While unhealthy eating behaviour is involved, they aren't about food. Instead, they are about feeling in control or coping with something else. People with eating disorders are often secretive about their eating, and may feel guilty and ashamed. All eating disorders are very serious, and everyone who has one deserves care and support. The good news is that recovery is possible.

In this booklet, we'll talk about different eating disorders and the treatment someone might have. Eating disorders differ from person to person – there are common signs, but someone with an eating disorder doesn't have to have them all. This is part of why eating disorders can be hard to spot, and it may take some time before someone is officially diagnosed. There's lots more information at beateatingdisorders.org.uk.

What is anorexia?

People with anorexia may eat very little food, or binge (eat lots of food all at once) and then exercise or make themselves sick so they don't gain weight. Someone with anorexia is likely to be a lower weight than expected for their age and height.

Signs may include:

- Worry about gaining weight.
- Not seeing their body the way you do.
- Being secretive about their eating.
- Doing lots of extra exercise.
- Feeling dizzy or faint.
- Wearing baggy clothes to hide their body shape.
- Feeling cold.
- Isolating themselves from others.

Learn more
about anorexia at
[beateatingdisorders.org.uk/
anorexia](https://beateatingdisorders.org.uk/anorexia)

What is bulimia?

People with bulimia may binge (eat lots of food at once) and then make themselves sick, exercise obsessively, or take laxatives because they feel guilty about what they've eaten, worry about their bingeing, or because their stomach is so painful. This is known as purging. Often someone with bulimia will stay a "normal" weight, which can make it even harder to spot.

Signs may include:

- Yo-yo weight changes.
- Secrecy around food.
- Exercising lots more than usual.
- Going to the toilet after meals.
- Isolating themselves from others.
- Poor skin.
- Scars on fingers, knuckles, or backs of hands, and bad breath from being sick.
- Feeling bad about their body image.

Learn more
about bulimia at
[beateatingdisorders.org.uk/
bulimia](https://beateatingdisorders.org.uk/bulimia)

What is binge eating disorder?

People with binge eating disorder may binge on a regular basis. Bingeing isn't just eating a bit more than usual – it might be days' worth of food in one sitting. Usually the food is what we might call "unhealthy". Binges will often be planned in advance and the food eaten in secret. Someone might feel "better" while bingeing, but afterwards they'll feel guilty and anxious about what has just happened. Their way to cope with this may be to plan their next binge.

Signs may include:

- Eating in secret.
- Hiding food packaging.
- Gaining weight.
- Spending lots of money on food.
- Self-conscious about eating in front of others.
- Loss of confidence and low self-esteem.
- Isolating themselves from others.

**Learn more about
binge eating disorder at
[beateatingdisorders.org.uk/
BED](https://beateatingdisorders.org.uk/BED)**

What is OSFED?

OSFED stands for "other specified feeding or eating disorder". If someone is diagnosed with OSFED, it means that their symptoms don't quite fit with what doctors expect of anorexia, bulimia, or binge eating disorder, though it is just as serious.

What is ARFID?

ARFID stands for "avoidant/restrictive food intake disorder", where someone avoids certain foods or limits how much they eat. This can be for a number of reasons, for example, they might be sensitive to certain tastes or textures, have had a bad experience with food, or not be interested in eating due to other reasons.

**Learn more about
OSFED and ARFID at
[beateatingdisorders.org.uk/
types](https://beateatingdisorders.org.uk/types)**

Why does someone get an eating disorder?

We don't know the exact answer, but research is leading to better understanding. We know it could be down to someone's genetics or biology – there's lots of research into how the brain works that's starting to tell us more.

Eating disorders can be triggered by many things. These might be significant life events, like moving house or school, parents splitting up, or someone close to the person passing away. They could be things like stress from school work or trouble with their friendship group. People may also experience pressure from classmates, social media, and things like adverts, that makes them worry about the way they look and feel the need to change. These aren't the only reasons – we'd run out of room if we tried to list them all!

Anyone of any age, gender or background can have an eating disorder.

What happens when someone is diagnosed with an eating disorder?

Depending on their eating disorder and other factors, a person will need to see their doctor, school nurse or other healthcare professional to access treatment. For bulimia and binge eating disorder, self-help may be recommended first – for example, keeping food and mood diaries. If someone is diagnosed with anorexia, they will probably be advised to access outpatient treatment such as therapy first of all. Sometimes they may need inpatient treatment, and during this they will usually stay in the hospital full time.

Full recovery from eating disorders is possible.

How can I help?

Eating disorders don't just affect the person involved but their family and friends too. Here are some ways you can help:

- 1. Talk to them.** Ask if things are okay, if there's anything they want to talk about, and if there's anything that would help, and remember they are still a person and more than just their eating disorder.
- 2. Learn about eating disorders.** Having knowledge can help you understand why the person is behaving like they are, and lets them know you care. Beat's website contains lots of information about eating disorders.
- 3. Stop the body talk.** We can all be guilty of talking about body shape and weight, but it can be an extra sensitive subject for someone with an eating disorder.
- 4. Make sure they know you're always there to listen and support them.** But don't feel you have to make every conversation about their eating disorder. It can be helpful to both of you to take your minds off things with the same conversations you'd usually have.

When you care about someone, it's understandable to want to fix things.

Remember eating disorders are complicated, and your friend or family member might need support from doctors to get better.

Sometimes the person doesn't think they need help or just isn't ready to talk. Remember that's not the person you know but the eating disorder taking over. Trust your instincts – if you're worried, tell a parent or another trusted adult what's going on.



Talk to them...

Stop the
body talk...

Learn about
eating disorders...

Be there...

Don't forget to look after yourself

Supporting someone with an eating disorder can be exhausting. It's important to look after yourself too, because you can't help them if you are not well yourself.

Sophie struggled when her younger sister was diagnosed with anorexia at the age of 14.

“ I was lost. No one would talk about the real issues. Everyone avoided the topic. I felt like I had lost my best friend. I was never really allowed to be fully involved because my parents decided it was “better” for me. I was distraught and empty. My friends didn't truly understand the anguish I was going through. After a few years I found Beat, and just knowing someone out there felt the same way I did made me feel like I was “normal” again. With other people's support, I finally realised the only way I could help my sister was to first take care of myself. I was no use to anyone

when I was so depressed. It's completely understandable to feel the way I did, but I needed reassurance that I was allowed to take time for myself. I sought the help of counselling services and found even just talking about everything that bothered me made me feel so much better. The main thing anyone can do for a sibling or friend who is suffering with an eating disorder is be there for them. It sounds simple, but anyone who has supported someone through an eating disorder will know it is anything but. Eating disorders affect everyone close to the sufferer, and I think a lot of people forget that it's normal for siblings or friends to feel lost, depressed or helpless. The main thing is to ask for help if you feel like this. Despite how you may feel, you are the most important person, you are your number one priority, and you deserve help. ”



Don't forget to look after yourself

Lots of people who know someone who is suffering with an eating disorder feel the way Sophie did. Here are some ways you can take care of yourself:

1. Take time for yourself: relax and spend time with people who care about you.

2. Write about what's happening in a diary, or creatively through poetry or music.

The eating disorder is changing everything

It's natural to feel negative emotions about the eating disorder. You might feel it's taking over everything – your relationship with the person and other people around you. If it's your brother or sister, it might seem like your parents are focussing all their attention on them. Don't keep these feelings bottled up – talk about them.

Even though things can get very difficult, remember the person isn't doing any of this deliberately, and with the right treatment and support they can get better.

3. Make sure there's someone you can talk to, like a trusted adult. You can also call or email our Youthline.

Glossary

There are lots of medical terms you might hear about eating disorders. We've explained some of them below.

AMHS: "Adult Mental Health Services" – the specialist mental health services that are accessed as an adult, usually over the age of 18.

Antidepressants: Medicine used to reduce symptoms of depression. A doctor might (but not always) prescribe these to someone with an eating disorder.

BMI: Body mass index is a measure that uses your height and weight to work out if you're healthy.

CAMHS: "Child and Adolescent Mental Health Services" – the specialist mental health services accessed under the age of 18.

CAT: Cognitive analytical treatment is a therapy used to treat eating disorders. A therapist will work with a person to help make positive changes. Sometimes it will look at how someone has coped with problems in the past.

CBT: Cognitive behavioural therapy is one therapy used to treat eating disorders. It helps people link thoughts, feelings and actions with their eating disorder behaviours.

Day patient: If someone is a day patient they might visit the hospital during the day and then go home at night before returning again.

Diagnosis: A doctor will look at someone's signs and symptoms and give them a diagnosis. Eating disorder diagnoses might include anorexia, bulimia, binge eating disorder or EDNOS/OFSED.

ECG: Electrocardiographs are a test that records the activity of the heart.

Electrolytes: Vitamins and minerals in the blood often measured or monitored with a blood test.

Glossary (cont.)

Family therapy: Family therapy involves the whole family and not just the individual with an eating disorder.

Inpatient: If someone is an inpatient they will stay in hospital full time. Sometimes this can be over weeks or months.

Mental Health Act: If a doctor thinks someone is too unwell to make decisions about treatment, or if someone refuses treatment, they can be treated under the Mental Health Act, which means someone else will make decisions about their care.

Outpatient: Someone who attends hospital appointments but doesn't have to stay overnight.

Section: If someone is sectioned, they are being treated under the Mental Health Act.

Directory

Here are the details of helplines and websites that provide further help and support

Beat's services

Call or email our Youthline, 0808 801 0711 • fyp@beateatingdisorders.org.uk.

Find help and support in your local area at helpfinder.beateatingdisorders.org.uk.

Follow Beat's Support services on Twitter: [@BeatEDSupport](https://twitter.com/BeatEDSupport) [Instagram](https://www.instagram.com/BeatEDSupport) [Facebook](https://www.facebook.com/BeatEDSupport)

actionforchildren.org.uk – Action for Children work with and support young carers across the UK, providing practical and emotional support.

barnardos.org.uk – Barnardo's runs 20 services across the UK, which work to support young carers and their families in a variety of ways. Search for their services online.

childline.org.uk – Childline is a free, private and confidential service to help anyone under 19 in the UK with any issue they're going through. You can contact a Childline counsellor by phone 0800 1111 or get in touch via online chat or email.

themix.org.uk – The Mix offer support to anyone aged 13 to 25. You can chat with people going through similar experiences to you online or speak to one of their advisors online or by free phone 0808 808 4994.

Looking for support?

Youthline: 0808 801 0711 fyp@beateatingdisorders.org.uk

Studentline: 0808 801 0811 studentline@beateatingdisorders.org.uk

Visit beateatingdisorders.org.uk for more information and online support services

 [@BeatEDSupport](https://twitter.com/BeatEDSupport)

 [BeatEDSupport](https://www.instagram.com/BeatEDSupport)

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 [@beatED](https://twitter.com/beatED)

 [beat.eating.disorders](https://www.facebook.com/beat.eating.disorders)

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Sources used to create this information are available by contacting Beat.

We welcome your feedback on our information resources.

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