

Psychiatric Nursing
2022
Unit 4 Online Assignment
Eating Disorders

Chapter Objectives:

1. Identify differences among several eating disorders. (1, 7)*
2. Discuss epidemiology of eating disorders. (1, 3)*
3. Describe symptomatology associated with anorexia nervosa, bulimia nervosa and binge eating disorder and use the information in patient assessment. (1, 2)*
4. Identify predisposing factors in the development of eating disorders. (2, 3)*
5. Formulate nursing diagnoses and outcomes of care of patient with eating disorders. (2, 4, 5)*
6. Describe appropriate interventions for behaviors associated with eating disorders. (1, 2, 3, 4)*
7. Identify topics for patient and family teaching relevant to eating disorders. (1, 2, 3, 4)*
8. Evaluate the nursing care of patients with eating disorders. (1, 2, 3, 4)*
9. Discuss various modalities relevant to treatment of eating disorders. (1, 2)*

*Course Objectives

Please read the assigned article along with the Davis Textbook Chapter 21. Answer the following questions and submit to the Unit 4 Online Assignment Drop Box by 7/3/23 at 0800. ***This assignment has a minimum word count of 500 words.***

1. Provide a brief summary of your perceptions, biases and or understanding of eating disorders?

In my opinion eating disorders are becoming more prevalent in society. With bullying, poverty, and mental disorders on the rise, people are put under more and more pressure to be perfect. I personally feel sad for people who have issues with food whether it be overeating, under eating or anything in the middle. I know that I myself don't feel bad for people who are overweight from overeating. I think that they are able to control what they are doing but just don't. I know that is a bias and that it's not correct and it all comes back to mental problems.

2. Define anorexia nervosa and bulimia nervosa in your own words.

Bulimia nervosa from my understanding is when a patient eats an excessive amount of food in a very short amount of time. The patient then proceeds to take extreme measures like vomiting, laxatives, or lots of exercise. Anorexia nervosa fear of gaining weight. Patients with this disorder will become obsessed with food. Cooking meals for others, talking about meals, and counting calories. These individuals will consume little to no food in order to not intake calories. These people may also have a distorted self-image.

3. List the clinical signs of anorexia nervosa, bulimia nervosa, and binge-eating disorder. Provide a summary of the differences between the three disorders.

Anorexia nervosa: gross body image distortion, preoccupation with food, refusing to eat, weight below 85% of expected, Hypothermia, bradycardia, hypotension, edema, lanugo, metabolic changes, amenorrhea, anxiety, depression.

Bulimia nervosa: rapid ingestion of large amounts of food, followed by compensatory behavior, within normal weight, depression, anxiety, substance abuse, excessive vomiting/laxative/ diuretic use, dehydration/ electrolyte imbalance, deteriorating teeth, scrapes on knuckles.

Binge-eating disorder: consumption of large amounts of food.

The differences are large or small consumption of foods and riding the body of foods consumed.

4. According to the article, what are the different treatment modalities for the three disorders listed above? Compare this to the treatment modalities identified in the textbook (summarize the differences and similarities).

Treatments for these three disorders are behavioral interventions, pharmacotherapies, 504 plan for school, cognitive behavioral therapy, family-based therapy, self-guided treatment and specialist supportive clinical management are listed in the article. The book lists behavior modification, family treatment, individual therapy, and psychopharmacology. Behavioral interventions for both resources look at distorted emotions and feelings about food and try to correct them. The book talks a lot about it being very patient involved and allows the patient to make most of the decisions whereas the article makes it seem more of a set program. Family therapy in the book uses a technique called "The Maudsley Approach", this is used for adolescent patients with anorexia nervosa. It involves the family in the process. Family therapy has also shown great improvement for patients with bulimia nervosa. This treatment consists of three phases. Phase 1 weight restoration. Phase 2 maintaining weight gain is turned over to the patient. Phase 3 helps the patient with self-identity. The article also uses a three-phase system and recommends family treatment for success. Individual therapy is not favored by the book but can be used to help the patient find appropriate coping strategies to deal with stress or triggers. The article supports self-guided therapy to support patients and keep them on track with their treatment. Psychopharmacology is listed in both places. Both the article and the book listed SSRI's as being helpful in treatment. Fluoxetine was also listed as helping with binge eating in both places.

5. How have your perceptions regarding eating disorders changed after reading the article and textbook? Provide specific examples.

I don't think my perceptions have changed much. People still have eating disorders because of mental health issues. I kind of knew a lot of this to start with.

6. How has reading this article helped you better understand the initial evaluation, treatment, and diagnosis of anorexia nervosa, bulimia nervosa, and binge-eating disorder from the nurse's perspective? Provide specific examples.

Initial evaluation is not always as simple as it may seem. As a nurse we need to notice the small little things that other people may not catch in order to get someone the help they need. Especially with girls these days we need to catch when they make comments about their body that may just be shrugged off by others. For anorexia nervosa this may look like someone constantly saying oh I'm not hungry or eating a few bites here and there and nothing else and losing weight rapidly. Bulimia nervosa should be monitored like if you take a trip to the grocery store and then the next day you notice the whole box of cookies and tub of ice cream you just bought the day before are gone. And the patient is constantly buying laxatives or working out three times a day. Binge eating should be monitored by rapid weight gain and large consumption of foods. Treatments for these diagnoses can vary with medications but all are improved through therapy.