

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?

Eating disorders are deeply personal and emotional struggles that affect individuals in various ways. These disorders can lead to significant physical health complications, including malnutrition, organ damage, and hormonal imbalances. However, the psychological toll is equally significant, as individuals may experience feelings of guilt, shame, and a constant preoccupation with food and body image. Treating eating disorders requires a comprehensive and compassionate approach that addresses both the physical and psychological aspects, helping individuals develop a healthier relationship with food, body acceptance, and overall well-being.

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

Both Anorexia and Bulimia are condition that have an emotion component to each. Anorexia is a condition based on control of ones preoccupation with food and body image. It takes conditioning of will and family therapy support to over come, and understand the damage internally being done on the body. Bulimia is a far worse condition because of the movement of stomach acid up and out of the body deteriorating your teeth and esophagus. This condition takes a lot of hiding and lying to family and friends.

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 is marked by severe weight loss and an intense fear of gaining weight. Clinical signs include restricted food intake leading to significant low body weight, distorted body image, an obsessive preoccupation with calories, excessive exercise. Bulimia nervosa involves recurrent episodes of binge eating followed by compensating behaviors to prevent weight gain. Signs include secretive eating, feelings of guilt and shame, self-induced vomiting, excessive exercise, misuse of laxatives or diuretics. Binge-eating disorder is characterized by episodes of uncontrollable overeating, often accompanied by feelings of guilt and shame. Clinical signs include consuming large amounts of food in a short period, eating beyond the point of fullness, eating rapidly, and eating alone due to embarrassment. While anorexia nervosa involves severe weight loss, bulimia nervosa focuses on the cycle of binge eating and purging, and binge-eating disorder centers around recurrent episodes of overeating without compensatory behaviors.

3. 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).

One treatment modality in the article is CBT which is close in relation to the behavior modification modality in the book. They both are trying to treat the behavior of the patient and get the client to give input on the plan of care. CBT in the article also ties in the family therapy as well. This empowers not only the client but the family and makes them more aware of the condition along with how the treatment will go. Pharmacotherapy and psychopharmacology therapy are similar in that they both share the use of ideas about SSRI's help. The book talks about them being used to treat bulimia, but the article explains how that is not a preferred idea and they can be used to treat binge eating disorder.

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

After reading the article and the book case studies. I feel that eating disorders are treated in the same class as anxiety and depression when they are different. Eating disorders are more of a behavioral disorder and should be treated by therapy and teaching to the client. They start out as people trying to control something in their life that is out of control, and they can be shown a better way of thinking. It takes a lot of people to change a persons behavior to give up control and want to understand what they are doing to their body internally. I agree with family therapy, and it is the best treatment to have it come from a position of love.

5. 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.

I think the article gave me more to think about and understand for my nursing evaluation and diagnosis of these clients. Initial praise of the patient's weight loss by family members, peers, or

clinicians may lead to fear of regaining weight and body image distortion. This line from the article taught me how the family could be part of the solution and the problem without even knowing it. The book helped me gather what was happening to the clients' body systems more with nutritional imbalances and deterioration of esophagus and teeth. Book gave very good treatment ideas like keeping a food diary and explaining how that food made the client feel. I have a better understanding that there is more going on inside a client than just what you can see and read on the surface.