

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?

I believe that an eat disorder is something that many people may over look or that many people may not realize that they have. I believe that they are life threatening disorders that if they are not treated or corrected that people could become critically ill from them. Nutrition is very important when it comes to individuals health but the proper nutrition is the key and is important.

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

I believe anorexia nervosa to be a disorder where one is afraid of gaining weight. They are wanting to be thin and not be to considered overweight. I believe an individual with this disorder is obsessed about their weight and about what food they eat due to being afraid of gaining weight. Some individuals may not watch what they eat but instead they just do not eat in order to stay thin.

I believe bulimia nervosa is a disorder that the individual does not have control of when it comes to how much they eat during a sitting, the opposite of anorexia nervosa. Once they have these moments of uncontrolled eating they then make themselves vomit what they ate so that they do not gain the weight of eating all of the food. They are also, like anorexia nervosa, wanting to stay thin and not gain weight which is why they vomit after eating. I do believe that both of these conditions are dangerous eating disorders.

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: Clinical signs are extreme weight loss, thin body shape, fear of gaining weight, fatigue, thin and brittle hair, constipation, and insomnia.

Bulimia Nervosa: Clinical signs are binge eating, forceful vomiting, excessive exercise, strong negative self-image, use of supplements for weight loss, and stained teeth.

Binge-Eating Disorder: Clinical signs include eating large amounts of food, feelings of lack of control, extreme distress, poor self-image and unhappy about their weight.

When it comes to identifying the differences between the three disorders I believe they are all similar but have many differences. Anorexia nervosa the patient is worried about gaining weight therefore they do not eat whereas with bulimia nervosa the patient is also worried about gaining weight but they eat large amounts of food and then force themselves to vomit so that they do not gain weight. With binge-eating disorder the patient overeats and is not worried about being thin so therefore they continually over eat without vomiting afterwards and are more likely obese or overweight.

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).

In the article a treatment option is establishing a treatment plan which involves many people on have to have the patient effectively eat and gain weight to avoid the disordered behaviors. There is behavioral interventions that works to help with shape and weight of the body, disinhibited eating and compensatory behaviors. Pharmacotherapy is used when there is co-occurring mental health conditions. With that being said, *Fluoxetine* is used in the treatment of bulimia nervosa and *Lisdexamfetamine* is used for the treatment of binge-eating disorder. Behavior modification, in the book, is similar because it makes efforts to change the maladaptive eating behaviors of the patient but is also different because the patient must perceive that they are in control of the treatment. Whereas, with the treatment plan, there are many other people that are in control of the treatment. There is individual therapy where it is just the patient and the therapist that work through the treatment with the patient. Family treatment is mentioned in the book, where it involves the family in each step of the process and involves three phases. The medications mentioned in the book and the article are the same.

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

I looked at anorexia nervosa, where the patient just wanted to be thin. Once reading more about it I learned that the patient has an actual fear of obesity.

With bulimia nervosa I believed that the patients ate normal amounts of food but still forced themselves to puke it up. Whereas, after reading I learned that they binge uncontrollably and they keep it a secret and then proceed to throw up.

With binge-eating disorder I realized that they over ate but I believed they just overate at every meal. Now, I realize that they overeat at frequent periods, which is less than 2 hours.

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.

From a nurse's perspective I realized that there can be many co-occurring mental health conditions that have an effect on eating disorder, such as depression, anxiety, self-injury, substance use, etc. I also realized that many of the symptoms of these disorders are similar to one another and similar to other conditions. I realized that there are many health symptoms that are related to these disorders, such as bradycardia, hypotension, and hypothermia due to the fact of what they are putting their body's through with these disorders.