

Psychiatric Nursing
2024
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 7/1/24 at 0800. ***This assignment has a minimum word count of 750 words.***

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

I'm biases to eating disorders. I was raised to have one. My mother is always calling me overweight, and that I need to just stop eating. My mother has an undiagnosed eating disorder. She has had over 4 surgeries to remove body fat, liposuction. I think she has bulimia nervosa. I have seen her go out to eat and eat 3 five guys double cheeseburgers and small fries. If you have ever been to five guys that is a crazy amount of food. When she will not eat again for a few days or make herself vomit. She had to get all her teeth removed do to this. The acid from throwing up, rotted her teeth. She now has false teeth. If she wants to throw up, she will get remove them. I think people with bulimia don't look "skinny" the look like an average build. When a see I super skinny people that almost looks sickly. My thought are they are on drugs or anorexia.

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

Bulimia is an uncontrolled rapid ingestion of large quantities of food over a short time. I always though that bulimia was just eating a lot of food within one day, the self-induced vomiting after. Anorexia is a fear od gaining weight. Symptoms cans be distorted body image, refusal to eat. That will lead to low body weight. People with Bulimia eat over 5,000 calories within one day, or even a few hours. Anorexia people will have less than 500 calories for the whole day. A normal calorie intake is 2,000 per day. Bulimia is eating two times that amount and anorexia isn't even getting enough calories for a two-year-old.

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

Clinical signs of anorexia nervosa is fear of gaining weight, emaciated. Emaciated is excessively thin or underweight. Other signs are hypothermia due to the low body fat. Bradycardia hypotension lanugo and with women amenorrhea. Lanugo is fine neonatal-like hair growth, but to hormone imbalances. In women, they can have amenorrhea, absence of menstruation. This side effect come from hormone imbalances.

Clinical signs of bulimia nervosa are rapid ingestion of large quantities of food in a short amount of time. Patients may time to “sneak”. The foods they eat are most often high calorie, sweets, or smooth texture so they don’t have to chew as much. Patients will eat until they have abdominal discomfort, fall asleep or they are interrupted by others. Some may get rid of the excessive calories by purging. Purging can be by vomiting, taking laxatives or diuretics, or fasting. Binge eating is like bulimia. They have episodes of binge eating. With binge eating. They do not purge after. This can lead to extreme weight gain. Binge eating happen within a short amount of time, between 2 hours. Patients with binge eating disorders are mostly to be depressed.

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).

All three disorders can be treated by cognitive behavior therapy. For young adults or youth with anorexia nervosa the first line therapy is family-based therapy. Short stay hospitalization may almost be affected to get medication under control. Adults with anorexia nervosa treatments can be family-based therapy, cognitive behavior therapy and interpersonal psychotherapy.

Bulimia nervosa and binge eating disorders: adults benefit from therapist-guided and self-guided cognitive behavior therapy. The patient will have therapy for at least 6 months. The goal is the decrease binge eating behavior. Starting treatment early can lead to sustained remission. Weight loss if needed. In person therapy is better for these patients, than online therapy.

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

My perceptions of eating disorders have changed. I think in the beginning of reading this article I thought that bulimia nervosa and being eating disorder was the same. I know understand that they have some of the same traits. Both evolve eating a large amount of food. The difference is with bulimia they often purge the extra calories by not eating or vomiting. Binge eating, they will eat all the food they want within a short amount of time. Then not care that they ate all that food. I knew that anorexia, bulimia and binge eat were disorder. I thought they had some control over it. I never understand the point when they said I’m done eating or I want to eat more. I know understand that they cannot control this. They have very little power over those disorders.

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.

This article has help me to understand that treatment for all these disorders is almost the same. Cognitive behavior therapy- in person is the best way to get the treatment that the disorders need. Diagnosing the disorders are just how I though. They will ask a series of question and it will help show the best diagnoses. I though it would take a few weeks to a month to diagnose. I though they patient would have to keep a food log, or what they ate and the times.