Psychiatric Nursing 2025
Unit 6 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 6 Online Assignment Drop Box by 6/30/25 at 0800. ***This assignment has a minimum word count of 750 words.***

This assignment is worth 0.75 hour of online content. In order to receive full credit for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignment not completed in its entirety will result in missed theory time and must be made up

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

   Before reading the article, I had a pretty limited understanding of eating disorders. From what I thought I knew, eating disorders had to do with unhealthy eating and trying to lose weight. I would associate these disorders mostly with younger girls that were not happy with their body and trying to lose weight. I did not realize how serious of a problem eating disorders can be. I thought that people with eating disorders could stop whenever they wanted to and chose to have that problem. I thought there were psychological aspects to them, but I did not realize to the extent it is. I now realize that eating disorders affect many genders, ages, and races. These conditions are serious and can even be life-threatening if not treated quickly and accurately.

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

   Anorexia nervosa is an eating disorder that causes extreme restriction of the intake of food. This leads to low body weight, fear of gaining weight, and distorted body image.

The people suffering from this believe they are overweight, even though they are underweight. This can cause serious problems and potentially death.

Bulimia nervosa is a disorder that has a cycle of binge eating followed by throwing up or purging. These people use things such as vomiting, laxatives, or excessive exercise to try to prevent gaining weight after eating a bunch of food. People that have bulimia nervosa may not be able to control themselves and believe their self-worth is based on the way their body looks.

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- symptoms are extremely low body weight, fear of gaining weight or being fat, and distorted body image.

   Bulimia Nervosa- Recurrent binge eating, unhealthy behaviors to prevent weight gain (vomiting, misuse of laxatives or diuretics, food restrictions, or excessive exercise), self-worth based on body size.

   Binge Eating Disorder- Recurrent episodes of binge eating, eating faster than normal, eating until feeling uncomfortable, eating large quantities of food when not hungry, feeling bad because of embarrassment about eating behaviors, eating followed by negative emotions, and no behaviors to prevent weight gain.

   The differences between the three is that anorexia involves low body weight and food restricting. Bulimia involves purging after binge eating, but the person's body weight is usually normal. Binge-eating disorder does not have purging and can lead to the person being 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 for anorexia nervosa, family-based therapy is recommended as a first line treatment for youth and some young adults. There have been studies done that show this therapy demonstrates higher remission rates and increased weight gain compared with individual therapy. This therapy empowers parents to play a vital role in facilitating patients weight gain before progressively returning control to the patient. For adults CBT, family-based therapy, focal psychodynamic psychotherapy, interpersonal psychotherapy, and specialist supportive clinical management have demonstrated effectiveness.

   In the article for bulimia nervosa, guidelines recommended family-based therapy and alternatively, CBT as appropriate treatments. Adults benefit from therapist guided and self-guided forms of CBT or interpersonal psychotherapy.

   In the article for binge eating disorder, meta-analytic data support treatment with CBT and self-guided therapy. In person CBT more effectively decreases binge eating and

therapy dropout then self-guided CBT at six months and confers markedly better outcomes than weight loss therapies.

In the book it mentions behavior modification 4 anorexia nervosa and bulimia nervosa. The client has control over eating, over the amount of exercise pursued, and even over whether or not to induce vomiting. The goals of the therapy are agreed on by the client and staff. The book also mentions family treatment, which is a family centered program for the treatment of adolescents with anorexia nervosa that modifies the traditional concept of the adolescent being in control of their calorie intake. Evidence also shows family-based programs in treatment of bulimia nervosa. The book also mentions that psychopharmacology is another way to treat these disorders. SSRI's have demonstrated effectiveness in treating bulimia but not anorexia. Antidepressants have been found to be useful in the treatment of bulimia nervosa. High dose SSRI's have demonstrated some effectiveness in promoting weight loss for those with binge eating disorder.

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

   The article changed my perspective that these eating disorders can affect anyone of any age, gender, or size. Binge eating disorder is often found in people who are overweight, and bulimia can occur with people of any size. I also better understand that eating disorders can be chronic and cause long term problems physically and mentally.

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.

   After reading this article, it has helped me better understand these disorders from a nurse’s perspective by showing the screening tools used such as the SCOFF questionnaire and evaluating patterns in weight, menstruation, and BMI. As a nurse you can assess for warning signs like bradycardia, or hypotension and support the patient in a nonjudgemental way. It is important to build trust with the patient, so they are less likely to deny any of the symptoms. It is also important for the nurses to collaborate with the healthcare team, patient, and their families when it comes to treatment.