

BODY SYSTEMS AFFECTED BY EATING DISORDERS

SOMETHING TO NOTE:

In general, Anorexia related complications are the direct result of starvation and weight loss. In Bulimia, complications are directly correlated with mode and frequency of purging, but research shows even one day of purging can result in a fatal cardiac event. **There is no such thing as a safe threshold of purging behavior or guaranteed warning signs.** In all ED's, complications also depend on the health of all the other body systems and other unrelated health issues. Most complications are reversible and treatable, but permanent damage is possible. Please continue to consult a qualified medical team regularly for personal medical care after discharge from the center.



CARDIOVASCULAR SYSTEM

In AN, complications can include: bradycardia (slow heart rate), hypotension (Low blood pressure), mitral valve prolapse. These may appear early and become chronic issues or increase in severity.

Cardiovascular concerns that can lead to sudden death:

Arrhythmia, refeeding syndrome, echo changes, pericardial effusions

In BN and AN-BP, any of the following can cause an sudden severe cardiac concern or death: Arrhythmias, diet pill toxicity, heart palpitations, emetine cardiomyopathy

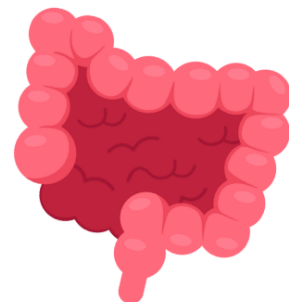
GASTROINTESTINAL SYSTEM

In AN, complications almost always include constipation. Also refeeding, pancreatitis, acute gastric dialation, delayed gastric emptying, hepatitis, dysphagia, SMA syndrome.

In BN or AN-BP complications include dental erosion and cavities, parotid gland swelling, esophageal rupture, Gastroesophageal reflux (GERD), constipation due to laxative abuse, rectal prolapse, Mallory-Weiss tear. Barrett's esophagus is also linked eating disorders and carries a risk of developing into esophageal cancer.

Note that constipation is universal in a malnourished state, if medication is needed, miralax is preferred. **DO NOT USE stimulant laxatives for anyone with a history of laxative abuse.** Gastroparesis (delayed gastric emptying) is almost universal in underweight patients as it is an adaptive mechanism of the body, but symptoms can start even after a loss of 20 lbs. The best treatment is weight restoration.

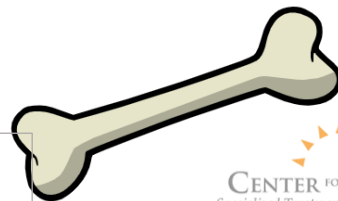
When an ED patient says they are in discomfort after eating, believe them--it is not just the ED talking, their GI system is almost certainly reacting, but recovery is worth it!



ENDOCRINE AND METABOLIC SYSTEMS

In AN, ammenorrhea (stopped periods) is very common. Other complications include unintended pregnancy or miscarriages, osteoporosis, thyroid abnormalities, hypercortisolemia, hypoglycemia, neurorgenic diabetes insipidus, and hypophosphatemia. In BN or AN-BP, complications include irregular menses, mineralocorticoid excess, and diabulimia. Metabolically, hypokalemia, dehydration, nephropathy, metabolic alkalosis, and Pseudo Bartter's Syndrome

All ED's (including BED) have risks related to developing or worsening types of diabetes, which is probably why this pancreas is so frustrated.



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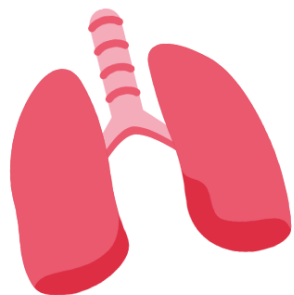
DERMATOLOGIC SYSTEM

In AN, complications include dry skin, alopecia (hair loss), lanugo (fine hair on the back, abdomen, and forearms), starvation-associated pruritus, acrocyanosis, as well as Reynaud's phenomenon.

In BN or AN-BP the most common issues are Russell's sign (lacerations, calluses, and abrasions on the back of the hand consistent with purging), and Edema.



PULMONARY SYSTEM



In AN, complications can include: Aspiration pneumonia, respiratory failure, spontaneous pneumothorax, emphysema

In BN and AN-BP, the most common complications are: Aspiration pneumonia, pneumomediastinum (air escaping from the lungs and trapped elsewhere in the body), Ophthalmic Scleral hemorrhage



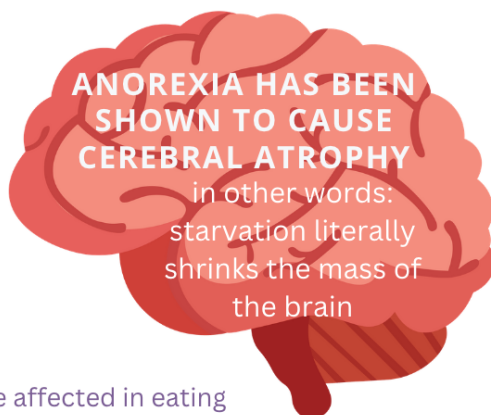
SENSORY ISSUES FROM EATING DISORDERS

In BN and AN-BP, Ophthalmic Scleral hemorrhage may appear in eyes from purging. In AN, there is a risk of lagophthalmos, or incomplete/abnormal eyelid closure--particularly during sleep--which is caused by losing the orbital fat that holds the eyeball in the proper place. Additionally, macular changes have been shown in anorexia which may lead to progressive blindness (research is ongoing), and several key vitamins are necessary for good vision which may be deficient in an eating disorder patient.

AN can also cause patulous eustachian tube dysfunction, which is a dysfunction of ears and hearing, and allows patients to hear their own voice, breathing, or blood pumping at a high volume.



The immune system is also affected in eating disorders, particularly in the areas of lymph nodes damaged by purging behaviors, or bone marrow loss in malnutrition.



THE FOUR B'S

Some of the most common severe and potentially permanent complications of eating disorders are summed up by the following areas: **Bones, Brains, Babies, and Barrett's.** When recovery is hard, remember the four B's and why they matter!