

Eating disorders during COVID-19

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Eating disorders are among the deadliest mental health conditions, [claiming 10,200 lives each year, which is one death every 52 minutes.](#)

And the misconceptions and societal stigma surrounding eating [disorders](#)—such as only women have eating disorders and eating disorders are a lifestyle rather than a serious medical condition—hinders many people's decision to seek help.

The added stress of the COVID-19 pandemic only contributes to the severity of the illness, as eating disorders—and disordered eating behaviors—thrive on [social isolation](#) and the lack of structure that the virus has brought into our lives.

"As a result, we're seeing an increase in eating disorders during the pandemic," says Joyce Corsica, Ph.D., director of outpatient psychotherapy and director of bariatric psychology at Rush.

In fact, according to the National Eating Disorder Association, calls to their hotline have [increased 40% since March 2020](#), so it is critical that you know when to reach out for assistance.

Corsica and Molly DePrenger, MS, RD, a clinical dietitian, share the unique challenges people with eating disorders face and ways to cope during this challenging time.

Defining eating disorders

Eating disorders are complex and affect all people, regardless of race, ethnicity, gender, sexual orientation and socioeconomic status.

These are the most commonly known eating disorders:

1. Anorexia nervosa is an [eating disorder](#) characterized by [weight loss](#), restrictive eating behaviors and difficulties maintaining an appropriate body weight based on your height and age.
2. Bulimia nervosa is characterized by a cycle of binge eating and purging (laxative use, self-induced vomiting and/or compulsive exercising).
3. Binge eating disorder is characterized by repeated episodes of eating large quantities of food and feeling out of control. This can be followed by feelings of guilt or shame.
4. Eating disorder not otherwise specified, or more commonly known as disordered eating, can include a number of irregular eating behaviors, such as repeatedly overeating when bored, depressed or stressed; skipping meals; or restricting a major food group, like fats or carbohydrates. Often, disordered eating can lead to a specific eating disorder.

"It doesn't matter if you meet the full criteria for an eating disorder," Corsica says. "What matters are the behaviors—if you are routinely engaging in uncontrolled eating and or compensatory behaviors, like misusing laxatives, compulsive exercise, fasting and or self-induced vomiting. That's when it becomes a problem, and it's time to seek help."

Effects of eating disorders

Eating disorders can affect your emotional, mental and [physical health](#), and if not addressed, they can lead to major health concerns or even death.

And eating disorders can affect every organ system in your body—including your cardiovascular, neurological, gastrointestinal and endocrine systems.

Depending on the specific type, eating disorders can be associated with the following health complications:

- Heart failure
- Cardiac arrhythmia
- Anemia
- Kidney failure
- Pregnancy complications
- Electrolyte imbalances
- Acid reflux
- Inflammation and rupture of the esophagus
- Diabetes
- High cholesterol
- High blood pressure
- Heart disease
- Gallbladder disease
- Osteoarthritis (reduction of bone density)
- Sleep apnea

All eating disorders can be related to depression, anxiety and other mood disorders. In fact, [studies](#) show up to 20% of those who have anorexia nervosa attempt suicide and up to 60% of those with eating disorders engage in suicidal thoughts and behaviors.

"Eating disorders are very serious," Corsica says. "It is important that people who are suffering get the help they need."

Eating disorders and social isolation

COVID-19 has forced us to spend more time at home. And for many people with eating disorders or disordered eating habits, the social isolation can be a trigger.

"Social isolation allows people with disordered

eating to focus more on their negative thoughts about their bodies and to engage in disordered eating behaviors privately, such as binge-eating or restricting, among other behaviors," Corsica says.

Staying home means fewer activities to engage in that do not involve the kitchen.

"With more of us working from home, we are almost always exposed to food," DePrenger says. "For people who binge-eat or have disordered eating habits, this can be particularly stressful."

DePrenger suggests moving to a room or place that is farther from the kitchen, which can make you feel more comfortable and help you stick to your structured mealtimes, as recommended by your dietitian.

The influence of social media

Social media has also become a significant trigger for people struggling with their eating habits. Corsica notes that social media can influence people's emotional functioning, their relationship with food, physical activity and body image, especially through social comparison.

A [study](#) in *JMIR Publications* looked at the effect of the COVID-19 pandemic and social media on participants with disordered eating behaviors. Researchers found the majority of participants reported a negative impact on their mental health and an increase in their disordered eating behaviors.

DePrenger adds that recently many people and companies are posting on social media about how comfort foods and alcohol are part of coping with the uncertainty of living through a pandemic. The reality, however, is actually quite different.

"Often, partaking in those eating behaviors does not result in what we have been promised by many brands, companies and influencers, and can be followed by a sense of guilt or shame," DePrenger says. "This messaging can be really confusing and stressful for someone with an eating disorder."

Healthy ways to cope

As a society, our focus during the pandemic has been on containing COVID-19; however, there are millions of men and women who are simultaneously struggling with an eating disorder or disordered eating habits—and the numbers are growing.

Our experts suggest the following healthy coping strategies for people with disordered eating habits:

- Recognize when there is a problem. Identifying the issue can be the hardest part of an eating disorder. Some of the physical and emotional signs can include weight fluctuations, being preoccupied with weight, food, calories and body image, performing food rituals, withdrawing from social eating events and activities, and feeling out of control.
- Identify what your body needs. If you are struggling to stick to your structured mealtimes, check in with your hunger cues (stomach growling, low energy and problems focusing) and be honest with yourself about what you are feeling, so you can address what you really need in that moment.
- Keep a journal. A journal can be a good outlet to express your feelings and can help you identify what you are experiencing. Refer back to your journal when you are struggling with triggering thoughts or situations.
- Reframe your thoughts. When trying a new coping strategy, remind yourself in the moment that you are working to better your health and well-being.
- Create a list of activities. When it's not mealtime, try new activities to help care for your mind and body. Activities can include taking a walk, talking on the phone with a friend, journaling, organizing your home or engaging in healthy exercise, such as yoga or meditation.
- Don't be afraid to change your environment. Some places in your home, such as the kitchen, can be triggering. Try changing your environment, so you are more comfortable throughout your day, particularly when it's not a mealtime.
- Identify your support system. Find people

who make you feel safe and supported during your journey with an eating disorder or disordered eating habits. Consider joining a virtual support group with people who can relate to your food concerns.

- Reach out for help. Seeking help is important and sharing your experiences can contribute to your progress and others. Don't be afraid ask for help—it could save your life.

Provided by Rush University Medical Center

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