

THE EATING DISORDERS TREATMENT GROUP

“Can someone get help for an eating disorder here on Berkeley’s campus?”

University Health Services (UHS) has established a team of health care providers to help students with eating disorders. Eating Disorders treatment group (EDTG) members have special training in the treatment of eating disorders and are sensitive to the difficulties inherent to recovery. The EDTG is a diverse group of professionals assembled to address the physical, mental and nutritional aspects of an eating disorder. The EDTG is available to all eligible students.

“How does the EDTG work?”

As part of the evaluation process, students will meet with a physician/nurse practitioner and nutritionist. EDTG members meet regularly to discuss what treatment plan is best, what care can be provided by UHS, as well as the best treatment providers in the community. Treatment plans always address psychological, medical and nutritional needs of the student. Each treatment plan is individualized to meet the needs of the student. The EDTG also works with the Student Health Insurance Office to maximize the benefits of the student’s health insurance plan.

“Who are the health care members actually involved with the EDTG?”

The EDTG members include:

- *Physicians/Nurse Practitioners* who assess and monitor the medical stability and health status of the patient and provide care at the primary care level.
- A *nutritionist* who completes a nutritional evaluation, provides counseling, and makes referrals to community nutritionists if needed.
- *Psychologists* who consult with EDTG members on psychological treatment issues and community therapy referrals. EDTG psychologists are available for short-term crisis management through Counseling and Psychiatry Services (CPS).
- A *Social Worker* who assists with insurance needs, academic adjustments and case management.
- *Registered Nurses/Clinic Assistants* who check vital signs including height, weight, temperature, pulse and blood pressure to monitor medical stability.

The EDTG meets monthly at the UHS to coordinate the care of students with eating disorders.

“Are there any other health care providers affiliated with EDTG?”

We recognize that recovery is a long-term process. Individual long-term therapy is the primary method of treatment and students are referred to community providers for this long-term care. Particularly serious medical cases may also be referred to community health care eating disorder specialists.

“It sounds great, but how do I access their services?”

Taking advantage of the EDTG is not only important, but it is simple. All you need to do is call the Clinic 3 Nurse at 643-7110 to request an appointment with the nurse on the EDTG for an intake appointment. If you wish to talk to an advice nurse about eating disorders, call the Advice Nurse line at 643-7917, Monday through Friday, 8am – 4:30pm.

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.

For an appointment www.uhs.berkeley.edu or call **510-642-2000** Clinic Nurse **510-643-7197** for advice

THE EATING DISORDERS TREATMENT GROUP continued

Facts on Eating Disorders

Anorexia Nervosa is a disorder in which preoccupation with dieting and thinness leads to excessive weight loss. The individual may not acknowledge that weight loss or restricted eating is a problem. *One percent of teenage girls in the U.S. develop anorexia nervosa and up to 10 percent may die as a result.*

Anorexia Danger Signals:

- ✓ losing a significant amount of weight
- ✓ continuing to diet (although thin)
- ✓ feeling fat, even after losing weight
- ✓ fearing weight gain
- ✓ losing monthly menstruation periods
- ✓ preoccupation with food, calories, nutrition and/or cooking
- ✓ exercising compulsively
- ✓ bingeing and purging

Physical Complications:

- ✓ hair loss
- ✓ gaunt, hollow facial features
- ✓ shrunken breasts
- ✓ dry skin
- ✓ bruises
- ✓ sharply protruding bones
- ✓ cold and blue hands and feet
- ✓ delayed puberty: pre-adolescent females fail to menstruate and develop breasts at a normal age; in males, testosterone levels might remain low, leading to impotence
- ✓ menstruation: hormone levels drop, alerting the body that it cannot support a fetus; menstruation becomes irregular or stops completely- can result in temporary or permanent infertility
- ✓ premature bone loss: susceptibility to stress fractures and osteoporosis
- ✓ mood changes: impatience, irritability, depression, suicidal tendencies
- ✓ insomnia, constipation, sensitivity to cold, kidney failure, abnormally low heart rate and blood pressure

Bulimia Nervosa involves frequent episodes of binge eating, almost always followed by purging and intense feelings of guilt or shame. The individual feels out of control and recognizes that their behavior is not normal.

Bulimia Danger Signals:

- ✓ bingeing, or eating uncontrollably
- ✓ purging by strict dieting, fasting, vigorous vomiting or abusing laxatives or diuretics in an attempt to lose weight
- ✓ using the bathroom frequently after meals
- ✓ preoccupation with body weight
- ✓ depression or mood swings
- ✓ irregular periods
- ✓ developing dental problems, swollen cheek glands, heartburn and/or bloating
- ✓ experiencing personal or family problems with alcohol or drugs

Physical Complications:

- ✓ gastrointestinal problems: irritations of esophagus, salivary glands and throat from exercise, persistent vomiting
- ✓ damaged or discolored teeth: gastric acids erode enamel
- ✓ lung irritation: choking while vomiting causes food particles to lodge in lungs, causing inflammation
- ✓ chronic loss of bodily fluids: depletes blood potassium, sodium and chloride levels, resulting in muscle spasms, weakness, irregular heartbeat and kidney disease

Compulsive Eaters and overweight *Binge Eaters* also experience uncontrolled eating, sometimes kept secret. Both groups often experience depression and/or other psychological problems. Up to 40 percent of people who are obese may be binge eaters.

Binge Eating Danger Signals:

- ✓ episodes of binge eating
- ✓ eating when not physically hungry
- ✓ frequent dieting
- ✓ feeling unable to stop eating voluntarily
- ✓ awareness that eating patterns are abnormal
- ✓ weight fluctuations
- ✓ depressed mood
- social and professional successes and failures attributed to weight gain or loss

Physical Complications:

- ✓ weight-related hypertension and/or fatigue
- ✓ nausea
- ✓ weight gain
- ✓ increase in risk of diabetes, high blood pressure, and some forms of cancer (for obese individuals only)

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