



*Canadian Psychiatric
Research Foundation*

When Something's Wrong

O

Ideas for Teachers

Anorexia Nervosa

- signs of starvation:
thinning or loss of hair;
appearance of fine, raised
white hair on the body;
bloated feeling; yellowish
appearance of the palms
or soles of feet; dry, pasty
skin
- loss of menstrual periods
- significant weight loss in
the absence of related
illness
- significant reduction in
eating, coupled with a
denial of hunger
- unusual eating habits:
preference for foods of a
certain texture or colour;
compulsively arranging
food; unusual mixtures of
food

Bulimia Nervosa

- evidence of binge eating:
actual observation; verbal
reports; large amounts of
food missing
- frequent weight fluctuations
- evidence of purging
(vomiting, laxative/
diuretic abuse, emetics,
frequent fasting, excessive
exercise)
- swelling of parotid glands
under the jaw (caused by
frequent vomiting)
- frequent, unusual dental
problems
- evidence of calloused
knuckles caused during
purging

- Know the warning signs
of anorexia and bulimia.
- Discuss your concerns with
the student.
- Convey your concerns
about his/her health and
functioning—don't focus
on weight loss or body size.
- Expect to be rejected by
the child/adolescent when
you discuss your concerns
about his/her possibly
having an eating disorder.
This is an illness of denial
and distorted thoughts
regarding body image.
- Go with the student to get
help from a resource
person, such as a guidance
counsellor, public health
nurse or social worker.
- Teach media literacy and
critical thinking regarding
body images in
advertisements.
- Keep in mind that others
in the student's life may be
giving positive feedback
on the student's "great
will-power" or "perfect
figure." These kinds of
comments may help to
reinforce the student's
destructive behaviour.

Treatment

Treatment of eating disorders is difficult and multifaceted. For both anorexia and bulimia, an evaluation should be done by a mental health professional to rule out underlying anxiety or depression and to assess various risk factors like perfectionism, sexual abuse and a family history of eating disorders. A medical and endocrinological evaluation is also necessary. Regaining weight and maintaining it at a reasonable level is the goal of treatment for anorexia. Remission of the binge-purge cycle is the goal of treatment for bulimia.

A large part of treatment involves helping the young person reshape his/her negative and unrealistic body image. In serious cases, hospitalization may be necessary.

Resources

Harvard Eating Disorders Center

WACC 725
15 Parkman Street
Boston, MA 02114
Phone: (617) 236-7766
E-mail: info@hedc.org
Web: www.hedc.org

National Association of Anorexia Nervosa and Associated Disorders

Box 7
Highland Park, IL 60035
Phone: (847) 831-3438
Web: www.anad.org

National Eating Disorders Association (NEDA)

603 Stewart Street,
Suite 803
Seattle, WA 98101
Phone: (206) 382-3587
E-mail:
info@NationalEatingDisorders.org
Web:
www.nationaleatingdisorders.org

The National Eating Disorder Information Centre

CW 1-211
200 Elizabeth Street
Toronto, ON M5G 2C4
Phone: (416) 340-4156
Toll-Free: 1-866-NEDIC-20
(1-866-633-4220)
Web: www.nedic.ca



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For further information
or to donate, contact:

Canadian Psychiatric Research Foundation
2 Carlton St., Ste. 1007
Toronto, ON M5B 1J3

Phone: 416-351-7757
Fax: 416-351-7765
E-mail: admin@cprf.ca
Web: www.cprf.ca

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