
Bulimia nervosa

Summary

- Bulimia nervosa is an eating disorder and a serious mental illness.
 - People with bulimia nervosa binge eat large amounts of food in a relatively short period of time.
 - They then make up for this food intake with behaviours such as vomiting or excessive exercise.
 - Bulimia nervosa can go undetected for a long time.
 - This is because people with the condition can have a body weight close to the healthy range, and may hide their behaviours.
 - Understanding the signs of bulimia nervosa and seeking early treatment is the best way to begin your journey to a complete recovery.
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Bulimia nervosa is an eating disorder and a severe mental illness. It can go undetected for a long time. People with this condition need treatment so they are able to begin the journey to recovery.

People with bulimia nervosa eat large amounts of food in a relatively short period of time (binge eating). They feel that they have no control over the amount of food they consume, or the ability to stop.

They try to compensate or 'make up for' this food intake using a variety of (often unproductive) behaviours, including:

- vomiting
- using laxatives and diuretics
- fasting
- excessive exercise
- using medications inappropriately to control body weight.

These activities are not a lifestyle choice, but a sign of a complex mental health problem. Dieting is the primary risk factor and trigger across all eating disorders.

People with bulimia nervosa often have body weight closer to the healthy range for their age and height. It was estimated that in 2012, over 78,000 Australian women and over 29,000 men had bulimia nervosa.

Overview of bulimia nervosa

The cycle of binge eating and purging or excessively exercising leads to intense feelings of shame, guilt and disgust. The behaviours can become compulsive and obsessive. They can lead to a fixation on food and obsessive thinking about food, eating (or not eating), diet and body image.

Added to this cycle, the person with bulimia nervosa often also engages in behaviours to hide the eating, dieting, purging or exercise. This means the condition can go undetected and untreated for a long time, which has physical health implications.

Physical problems that may be caused by ongoing bulimia nervosa can include:

- sore throat, indigestion, heartburn and acid reflux
 - stomach and intestinal ulcers
 - ongoing dental problems due to vomiting
 - chronic problems with the gut, such as constipation or diarrhoea from the use of laxatives. This can lead to
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- complications such as prolapsed bowel
- weakened bones (osteoporosis)
- infertility in men and women
- irregular heartbeat or a slow heart rate that can lead to heart failure
- electrolyte imbalance from purging. This can cause severe dehydration, and damage nerves, muscles and organs.

Symptoms of bulimia nervosa

Understanding the warning signs and symptoms can help you to recognise bulimia nervosa early. Early treatment is the best way to begin the journey to a complete recovery.

Physical symptoms of bulimia nervosa

Physical signs and symptoms of bulimia nervosa can include:

- frequent fluctuations in body weight
- signs of damage from frequent vomiting, such as swelling around the cheeks and jaw, damaged teeth and bad breath
- frequent constipation, diarrhoea or new food intolerances
- fainting or dizziness that is not due to another illness or another health condition
- fatigue and inability to sleep well
- in women, loss of periods or altered menstrual cycles, although you can still have periods and have bulimia nervosa.

Psychological symptoms of bulimia nervosa

Psychological signs and symptoms of bulimia nervosa can include:

- preoccupation or obsession with eating, dieting, exercise or body image
- sensitivity to comments about eating, dieting, exercise or body image
- feelings of shame, guilt and disgust, especially after eating and/or purging
- a distorted body image or extreme dissatisfaction with body shape – people can think they are fat even when they have a healthy body weight
- low self-esteem, depression, anxiety or irritability.

Behavioural symptoms of bulimia nervosa

Behavioural signs and symptoms of bulimia nervosa can include:

- unexplained disappearance of food – hiding of binge-eating episodes
- secretive behaviour around food – hiding uneaten food or saying they have eaten when they haven't
- becoming more antisocial and withdrawn
- eating alone and avoiding other people at meal times
- frequent trips to the bathroom after eating
- dieting behaviour – obsessive dieting, counting kilojoules, avoiding certain food groups
- use of laxatives, enemas, diuretics or appetite suppressants
- spending large amounts of money on food
- self-harming behaviour, use of illegal substances and suicide attempts.

Diagnosis of bulimia nervosa

Diagnosing bulimia nervosa can be difficult, because people with this condition:

- often have a body weight in the healthy weight range
- may not display other physical indicators of illness
- may engage in activities that hide this mental illness.

For these reasons, bulimia nervosa can go undiagnosed for a long time.

If you think you (or someone you know) might have bulimia nervosa, it is important that you see your doctor as soon as possible. The sooner you seek help, the sooner you can start to recover, and the more effective treatment can be.

Other healthcare professionals (such as dietitians, psychologists or psychiatrists) can recognise this mental illness, but may not be able to give you a full physical check-up. This is why visiting your doctor is important.

To diagnose bulimia nervosa, a doctor:

- will need to do a full physical check-up
- may complete blood tests
- may ask questions about your health – including questions about your emotional health and wellbeing, medical history and lifestyle.

Treatment of bulimia nervosa

Like other eating disorders, treatment for bulimia nervosa needs to help both your physical and mental health. Early treatment is the best way to help you towards a full recovery. The journey can be difficult, but you can get there with the right help and commitment.

A GP experienced in supporting people with an eating disorder is a good first point of contact. Once bulimia nervosa is diagnosed, your doctor can help you assemble a team of healthcare professionals who will be best suited to help you.

The types of healthcare professional who might be involved include:

- a psychiatrist
- a psychologist
- a dietitian
- a family therapist
- a social worker.

There are a range of psychological treatments available to treat eating disorders. Cognitive Behaviour Therapy (CBT) works on changing the unhelpful thoughts and behaviours that are causing and maintaining the eating disorder. This is the most researched and recommended treatment for adults. Your healthcare professionals will work with you to help you work out the links between your thinking, your emotional response and your eating behaviour. Support groups can be helpful, but do not replace treatment from healthcare professionals.

Most people with bulimia nervosa are treated outside a hospital setting. However, if the condition is severe, temporary treatment in a hospital might be needed. Outpatient treatment and day programs can also be very helpful in supporting people as they make changes to their patterns of behaviour, thinking and eating.

Other treatment options include medications and supplements for any physical symptoms and, in some cases, medication to help your mental health (for example, antidepressants)

Learn more about [treatment for eating disorders](#).

Where to get help

- In an emergency, always call triple zero (000)
- A GP experienced in supporting people with an eating disorder
- **Eating Disorders Victoria Hub** Tel. **1300 550 236** – support from Monday to Friday 9.30 am to 5.00 pm
- Community health centre
- **Lifeline**. Tel. **13 11 14**
- **Suicide Line**. Tel. **1300 651 251**
- **Kids Helpline**. Tel. **1800 55 1800**

- **Butterfly Foundation's National Support Line.** Tel. 1800 ED HOPE (**1800 33 4673**) – support from Monday to Friday 9 am to 5 pm (except public holidays)

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