Diabetes and eating disorders
What is an eating disorder?

There are many different types of eating disorders.

**Anorexia nervosa** involves:
- severe restriction of food intake;
- loss of body weight to an unhealthy level;
- loss of menstrual periods; and
- an intense fear of getting fat and losing control of eating.

**Bulimia nervosa** involves:
- eating binges with large amounts of food, usually secretly; and
- attempts to compensate for these binges to avoid weight gain through unhealthy measures such as misuse of laxatives, fluid or diet pills, self-induced vomiting, excessive exercise and periods of strict dieting.

**Binge eating disorder** involves periods of binge eating but without the compensatory behaviour which bulimia nervosa involves such as vomiting or excessive exercise.

There is a wide range of disordered eating patterns.

Not all people with an eating disorder or disordered eating have a clear-cut diagnosis. For example, some people can have both anorexia and bulimia at the same time, or one of the conditions might develop into the other at a later date. Other people may be severely restricting their food intake without fulfilling all of the other criteria for a diagnosis of anorexia nervosa but this is still an eating disorder. All of these conditions are serious and need assistance and attention.

Why do people develop an eating disorder?

Eating disorders are serious and complex health issues relating to eating behaviours, body image, body shape and weight. They are more common among young women and adolescent girls but can also affect males. People of all ages and from all backgrounds can experience eating disorders.

Many factors are known to affect the development of eating disorders, for example:
- physical changes during adolescence;
- pressure to achieve and succeed;
- major life changes such as ending a relationship;
- abuse, trauma or a fear of the responsibility of adulthood;
- personality characteristics such as perfectionism, low self-esteem, high achievers and people who have a strong need to seek approval and please others; and
family situations where an emphasis is placed on physical appearance, body weight and shape and expectations of children are high.

**Type 1 diabetes and eating disorders**

Managing type 1 diabetes is a complex balancing act between different management techniques and support from a diabetes health care team. Your diabetes health care team is you, working with your doctor, diabetes educator, dietitian, podiatrist and eye specialist to ensure you live well.

A healthy eating plan is a central part of managing type 1 diabetes, alongside insulin injections or a pump and a program of physical activity. This means that a person with diabetes will have to focus on their food intake, over a long period of time and sometimes since early childhood, which can sometimes lead to a problematic relationship with food and eating.

I have type 1 diabetes. Am I at greater risk of an eating disorder?

Anyone living with type 1 diabetes may be at risk of an eating disorder but adolescents and young adult women are most at risk.

As well as individual, family and social stresses that can contribute to eating disorders there are additional factors for people with diabetes.

Some parts of the management and living with type 1 diabetes that may increase the risk of developing an eating disorder are:

- the dietary counselling and advice involved in diabetes health care can sometimes focus too much on restricting food intake;
- feelings of depression, guilt and/or anxiety can be increased by some aspects of diabetes, such as the constant monitoring of blood glucose levels and worry about the long-term complications of diabetes;
- hypos (low blood glucose levels) need to be treated by eating extra sugar and carbohydrate and this extra food can sometimes cause weight gain. As some people find hypos unavoidable if they are to have tighter blood glucose control, this situation can become very complicated. New diabetes management techniques such as insulin pumps and new insulins are, however, being shown to allow tighter control without so many extra hypos; and
- weight loss is a common symptom of undiagnosed diabetes and others may comment favourably about this weight loss during the period around when type 1 diabetes is first diagnosed, and there may be some disappointment when the diabetes diagnosis and treatment means that good health is restored and normal weight returns.

**Are eating disorders worse for a person with diabetes?**

Eating disorders can create extra risks for a person with diabetes. They can make managing diabetes more complicated and may lead to a range of short- and/or long-term health problems associated with diabetes.

- weight loss can occur with continued high blood glucose levels, however the risk of long-term complications also increases significantly;
- missing or decreasing insulin doses so that glucose and calories are lost through the urine will lead to high blood glucose levels and may cause diabetic ketoacidosis (DKA), a potentially life-threatening condition; and
- severe hypos can occur if food is restricted or purged (vomited), especially if this is done secretly, so it can be very difficult to take the appropriate insulin doses in these situations.

**Could I have an eating disorder?**

Dieting is the single most common risk factor for the onset of an eating disorder, especially in young women.

There are many warning signs of an eating disorder. It is important to seek help if you suspect that you or someone you know may have an eating disorder.

The warning signs of an eating disorder can include:

- unhealthy and excessive preoccupation with body appearance, weight and food;
- periods of dieting and overeating;
- avoidance of social situations involving food;
- increased mood changes, irritability, social withdrawal;
- change in clothing style or wearing baggy clothes to hide weight loss;
- frequent excuses not to eat or wanting to eat alone;
- playing with food i.e. cutting food in small pieces;
- excessive exercise;
- faintness, dizziness, fatigue, weakness;
- anxiety, dizziness, mood swings;
- trips to the bathroom after meals;
- vomiting;
- feelings of being out of control with food;
- impaired concentration, alertness, comprehension; and
- evidence of binge eating.

Some more warning signs of an eating disorder in a person who has diabetes can include:

- extreme fluctuations in blood glucose levels;
- frequent high or low blood glucose levels and/or diabetic ketoacidosis (DKA), possibly resulting in hospital admission;
- consistent extremely high HbA1c (a blood test which measures the overall blood glucose levels over the last two to three months);
– missing insulin doses, or changing doses significantly or frequently; and
– weight loss without beginning a healthy eating plan or exercise program.

Who can I speak to for help?

If you think you may have an eating disorder, it is important to seek help and treatment from a team of health professionals that understand both type 1 diabetes and eating disorders. You may find it challenging at first to find someone to help you who has experience in both areas but there are many places to start.

The health professionals that may be able to help you include an endocrinologist or a general practitioner (GP), diabetes educator, dietitian, social worker or psychologist. Many hospitals provide services through an eating disorders clinic. Your GP can refer you to a clinic or you can phone your nearest major hospital directly and ask how you can attend an eating disorders clinic.

You may feel that you are able to manage your eating disorder but inevitably this situation will be out of your control and seeking professional help is the best way to start to address the problem.

If you are studying at school, your school counsellor or welfare officer will be able to refer you to people who may help. If you are studying at university or TAFE, speak with a counsellor through your student union. It is important to remember that although counsellors are not experts in diabetes and eating disorders, they may be a useful first point of contact for finding help. You can ask them to help you find someone experienced in diabetes and eating disorders.

What can I do to help my child, partner or friend who has type 1 diabetes and may have an eating disorder?

If someone you know with type 1 diabetes is showing signs of an eating disorder, you are encouraged to help them. Early intervention is important. Firstly, suggest the person seeks professional help as explained above.

The Eating Disorders Foundation in each state and Diabetes Australia offices welcome enquiries from families, partners and friends as well as people affected by the conditions themselves.

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For more information on the NDSS, including sub-agent locations, visit our website at NDSS.com.au or call 1300 136 588.