



What is an Eating Disorder?

Eating disorders are extreme expressions of a range of weight and food issues experienced by both men and women. They include anorexia nervosa, bulimia nervosa, and binge eating disorder. All are serious emotional and physical problems that can have life-threatening consequences.

Anorexia nervosa is characterized primarily by self-starvation and excessive weight loss. Symptoms include:

- Refusal to maintain weight at or above the minimally normal weight for height and age
- Intense fear of weight gain
- Distorted body image
- Loss of three consecutive menstrual periods
- Extreme concern with body weight and shape

Bulimia nervosa is characterized primarily by a secretive cycle of binge eating followed by purging. Symptoms include:

- Repeated episodes of bingeing and purging
- Feeling out of control during a binge
- Purging after a binge (vomiting, use of laxatives, diet pills, diuretics, excessive exercise, or fasting)
- Frequent dieting
- Extreme concern with body weight and shape

Binge eating disorder is characterized primarily by periods of impulsive gorging or continuous eating. While there is no purging, there may be sporadic fasts or repetitive diets. Body weight may vary from normal to mild, moderate, or severe obesity.

What Causes an Eating Disorder?

Eating disorders arise from a combination of long-standing psychological, interpersonal, genetic, and social conditions. Feelings of inadequacy, depression, anxiety, and loneliness, as well as troubled family and personal relationships, may contribute to the development of an eating disorder. The relentless idealization of thinness and the “perfect body” in our culture is often a contributing factor. Once started, eating disorders may become self-perpetuating. Dieting, bingeing, and purging are destructive attempts for some people to cope with painful emotions and to feel as if they are in control of their lives. Actually, these behaviors undermine physical health, self-esteem, competence, and control.

What are the Warning Signs?

- A marked increase or decrease in weight not related to a medical condition
- The development of abnormal eating habits such as severe dieting, preference for strange foods, withdrawn or ritualized behavior at mealtime, or secretive bingeing
- An intense preoccupation with weight and body image
- Compulsive or excessive exercising
- Self-induced vomiting, periods of fasting, or laxative, diet pill, or diuretic abuse
- Feelings of isolation, depression, or irritability

Issues to Consider for Coaching Staff from the NCAA

- Nutrition, optimal body composition and body image are current issues of concern for college student-athletes.
- Both weight gain and weight loss are student-athlete concerns. This is true for males and females.
- A tight uniform doesn't necessarily result in a competitive advantage. Consider body image concerns when choosing uniforms, especially shorts.
- Eating disorders are contagious and can spread through a team. Follow the flow chart from the Sports Medicine Department when you suspect a disorder.
- Proper nutrition is the key to optimal performance.
- Select restaurants that offer healthy food choices when traveling, this includes fast food. Also, make sure student-athletes eat enough before and after competition.
- Avoid frequent weight checks. A student-athlete should be focused on their performance and workout, not worrying about their weight.

- Avoid inappropriate comments such as:
 - “You look like you’ve lost weight; are you on a diet?”
 - “You need to lose five pounds in the next week.”
 - “I’ll take away your scholarship money if you don’t lose 15 pounds.”
- Educate student-athletes that the scale may read more for a leaner body, because muscle weighs more than a comparable amount of fat.
- Maintain confidentiality with any weight or body composition information.

This information was taken from the National Eating Disorders Association and NCAA Student-Athlete Nutrition and Performance: Coach’s Checklist. For further information, contact the Sports Medicine Department.

ERAU Guidelines to Consider for Coaching Staff

- Student-athletes should seek nutritional advice from a Nutritionist or member of the Health and Sport Performance staff
- Coaches should not design, ask for, or direct an athlete to make a food log/plan
- All food logs/plans should be reviewed by the Nutritionist, not by the coach
- If a coach believes nutrition plays a role in a student-athletes decrease in performance, the coach or student-athlete should contact a member of the Health and Sport Performance staff to develop a plan

PLAN OF ACTION

Once a student-athlete is suspected to have an eating disorder, the Associate Athletic Director/Health and Sport Performance (HSP) should be notified. A meeting will then be planned with the Associate Athletic Director/HSP, coach, and student-athlete to gather information on the student-athlete’s behavior and discuss concerns for the student-athlete’s safety and well-being. Based on this meeting, the student-athlete may be referred to the team physician for an evaluation. The team physician will determine if further consultation is needed with a psychologist and/or nutritionist.

When dealing with a student-athlete with an eating disorder it is important to maintain the student-athlete’s **confidentiality** with any weight or body composition information.

