

Eating Disorders

Each year, millions of Americans are afflicted with eating disorders. Eating disorders are disturbances in one's eating behavior. A person afflicted with an eating disorder often uses eating to try to gain a sense of control in that person's life, as a means of dealing with other complicated problems that the person feels he/she doesn't have control over.

The problem is that the person isn't aware that their eating habits are dysfunctional ways to try to cope with their problems, and the behavior is detrimental and can be life threatening.

The three most common eating disorders are:

Anorexia Nervosa:

People afflicted with anorexia essentially starve themselves. Anorexia is characterized by a refusal to maintain a normal, healthy body weight, and sufferers have an intense fear of gaining weight.

Bulimia Nervosa:

Bulimia sufferers will binge on food and then purge the food in order to prevent themselves from gaining weight. People suffering from Bulimia will frequently use diuretics and/or exercise excessively in order to shed additional body weight.

Binge-eating Disorder:

Binge-eating is characterized by episodes of eating large amounts of food but, unlike bulimia nervosa, the victim does not purge following the episode.

Associated symptoms common in eating disorders include depression, fatigue, irregular heart function, feelings of guilt/shame, and lack of control.

Eating disorders commonly exist along with other psychological disorders such as depression, obsessive-compulsive disorder, substance abuse, sexual abuse, or bipolar disorder.

Eating disorders can develop at any age, however, teenagers (particularly females) are a high-risk age group for developing eating disorders. This is partially due to media influence and the tendency to want to model oneself after media idols. Family dynamics can also be a contributing factor. Experts are still researching the role of genetics as a possible risk factor as well.

There is help for those struggling with eating disorders.

It is recommended a patient with an eating disorder will undergo psychotherapy, family counseling, medication management and consultation with a dietician. Severe cases usually require hospitalization.

It is important to recognize the presence of symptoms as early as possible. It is also important to pay attention to other conditions a loved one might be experiencing (such as those listed above) and get help as soon as possible to prevent the onset of an eating disorder.

Family members should always refrain from diagnosing loved ones, but rather seek professional help if you have concerns.

If you or a loved one feels you may be struggling with an eating disorder, call today so that we may assist you in developing a treatment plan that is right for you.

Remember, treatment is available. An individualized treatment program can be developed to meet your loved one's needs.

GARY BREUER, MA, LPC



My private practice is located in North Scottsdale, within the offices of PsychArizona. I work with children (ages 6 and older), pre-teens, adolescents and adults. I work with individuals, couples and families with issues of anxiety, depression, trauma, grief and loss, career, academic and workplace issues, relationship issues, LGBT concerns, personal growth and spirituality.

I use various therapeutic approaches depending on the needs of the client. These approaches include developmental, humanistic, cognitive-behavioral, existential, family-systems, mindfulness-based, transpersonal, and EMDR (Eye Movement Desensitization and Reprocessing). EMDR is a model used for the treatment of trauma, and has also been found to be successful in the treatment of various other disorders as well.

I have experience providing professional counseling in clinical, business, and school settings.

Apart from my private practice, I am also a Reiki Master and have a great appreciation and respect for alternative as well as conventional treatment approaches.

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