

## **DISORDERED EATING AND THE ATHLETE**

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You may be wondering, "what does this have to do with me?" Hopefully, nothing. However, the majority of women, athletes in particular, display symptoms of disordered eating. Here are some questions you can ask yourself to assess whether or not you can benefit from this article:

- Do you engage in dieting behavior and/or eat diet food?
- Are you aware of the caloric content of the foods you eat?
- Are you preoccupied with eating fat or having fat on your body?
- Are you terrified of being overweight?
- Do you think about burning up calories when you exercise and exercise to "make up" for the food you've already eaten?
- Do you feel guilty after eating?
- Do you sometimes eat in isolation because you're ashamed?
- Are you preoccupied with food or feel that it controls your life?
- Do you experience bouts of "insatiable hunger" or cravings so strong it seems as if you have no control?
- Do you eat abnormally large amounts when you satisfy your cravings (binge)?
- After binging do you purge your food through the use of laxatives, diuretics, caffeine pills, epecac, self-induced vomiting or vigorous exercise?

If you answered yes to any of these question you are probably suffering from bulimia or a mild form of eating disorder. You may not require professional assistance, but you may benefit from understanding more about eating disorders.

There are three classifications of eating disorders: obesity, anorexia and bulimia. Anorexia and obesity are more commonly known simply because both display symptoms which are impossible for the sufferer to hide. While many anorexics die of self-starvation, most bulimics are within 10 pounds (plus or minus) of their "ideal" body weight. For every anorexic there are 14 bulimics. This article will address bulimia only, primarily because it is extremely common in the athletic world and in some sports, such as wrestling and boxing, it is fostered to meet weight class restrictions. While bulimia is found in both sexes, 90-95% are women. Between 50-90% of all college women (those most heavily involved in athletics) have binged and purged, while 30-50% do so on a regular basis.

Many bulimics have certain characteristics in common, such as great intelligence, discipline, motivation and perfectionism--all qualities tat are highly valued and rewarded by American society. However, they tend to also share a lack of self-esteem that is directed into a disdain for their bodies. It is important for the bulimic to understand that binging is much more than an activity; it is a state of mind. Binging cannot be "mastered" through self-control; it is the urge to binge that must be addressed.

The health field is slowly recognizing that it can no longer rationally separate the mind, body and spirit, and that the causative factors in any given disease or disorder, bulimia

included, are rarely singular.

## SOCIETAL INFLUENCE

FAT: Fat is viewed in American culture as filthy and immoral--only a weak person would possess it. It is then nearly impossible for a woman to remain socially worthwhile because her body inherently needs to carry a certain amount of fat to function properly. Cross culturally females have 10-15% more fat than males. The average healthy 20 year-old female is 28.7% body fat. Studies that had originally shown that it was unhealthy to have a body fat percentage greater than 25 have recently been refuted for women because the original studies were performed on men only. It has now been determined that women can generally possess up to 38% body fat without adverse effects on their health. This indicates that not only do women process fat differently than men, but that they may retain more body fat because they need to.

BEAUTY: The American perception of female beauty is unlike any other in the world; our requirements are more stringent and atrociously unrealistic. Naomi Wolf noted in her book, The Beauty Myth, "beauty obliterates other sources of attraction such as smell, sound, physical response, spirit, rhythm, movement, chemistry, texture, and 'fit'." In magazines, movies, commercials, and just about everywhere you look, women are airbrushed and altered to take the age from their faces and the "imperfections" from their bodies. Only the thinnest are worthy of desire... Ms. Wolf also noted that "Eating disorders begin as a healthy response to an insane reality. They are often interpreted as a neurotic need for control, however one must acknowledge that it must be mentally healthy to try to control something that is controlling you, especially if you are one woman facing the prejudice of an entire society."

## PHYSIOLOGICAL COMPONENTS

As scientists become increasingly aware of the body's more intricate workings, they have begun to see that what were previously defined as solely psychological disorders, do in fact, have physiological contributors. Bulimia has been associated with allergic responses, hormone imbalance, chromium picolinate deficiency and systemic candidiasis (yeast overgrowth). Because yeast thrives on sugar, intense sugar cravings are common among candidiasis sufferers which further develops candidiasis and its symptoms and perpetuates the continuance of the vicious binge/purge cycle.

## BEHAVIORAL COMPONENTS

Both bulimics and serious athletes frequently have histories of obsessive/compulsive behavior. One might argue that excellence in any sport requires obsession. If so, then one must question mightn't bulimia and athletic "commitment" be symptoms of the same obsessive/compulsive personality trait?

## WHAT'S IT ALL ABOUT PHYSIOLOGICALLY?

**MEDICAL EFFECTS OF BULIMIA:** dehydration, electrolyte imbalance (in particular potassium depletion) which can lead to abnormal heart rhythm and death, tooth erosion, hiatal hernia, abraded and/or torn esophagus, kidney failure, osteoporosis, urinary tract infections, candidiasis (systemic yeast), chronic fatigue, drastically reduced metabolic rates, nervous system dysfunction, depression and decreased sexual drive. Most symptoms of bulimia are caused by the purging process. (Note that the author defines purging as volitional vomiting, food abstinence, dieting, laxative abuse and *compulsive exercise*.)

**BODY FAT:** Fat is utilized by the nervous system to send and receive messages, and provides the integrity of human cell structure. Without adequate fat the intestines cannot absorb the fat soluble vitamins (A,D,E,K) which can lead to deficiencies of these vitamins. Without sufficient fat stores a woman will cease menstruation (amenorrhea) and cannot become pregnant. In fact, amenorrhea over long durations can cause permanent damage to the female reproductive organs which leads to infertility, hormone imbalance and bone loss. Twenty percent of those who exercise to shape their bodies have menstrual irregularities due to abnormal fat depletion.

**DIETING:** Dieting itself is one cause for the onset of bulimia. Most bulimics started out on a diet and couldn't stop. The attempt to make feminine bodies fit an "ideal" seems to be against the very nature of womankind. Recent research has proven that human bodies are programmed to sustain different weights at different ages and each body individually defines what that weight will be. In addition, genetics play an important role in setting the individual's basal metabolism (calories burned to keep basic body functions going).

When a person diets, their body becomes more efficient at using and storing calories which is why dieters reach a plateau at which point their weight loss cuts in half. Many dieters gain weight when they stop dieting because, with prolonged dieting, their basal metabolism can slow down as much as 30%. In addition to all these negative aspects of dieting, statistics show that dieting, in the traditional sense of the word (reduction of caloric intake), is ineffective over time. In one study on female dieters over a five year period, 98-99% regained their weight and 90% regained more than they lost.

When a person eats too few calories (below 1200 for mild athletes), their body must provide energy from it's fat stores. However, this type of energy doesn't provide glucose, the fuel utilized by the brain. This is why eating too few calories leads to carbohydrate cravings (especially sweets and other simple carbohydrates) which can propel the bulimic into a brutal cycle of compulsive craving and denial. Carbo cravings of this nature can be especially severe if more than 10% of the diet comes from protein (13% for men). It is this need for glucose which causes the body to break down proteins from food and lean body tissues (muscles and organs, such as the heart) to provide glucose for the brain. Protein as an energy source (instead of muscle builder and maintainer) produces a surplus byproduct of nitrogens which, in turn, places a strain on the kidneys as they attempt eliminate the nitrogens. Fat metabolism without sufficient carbohydrate intake leaves waste products, called ketones, in the blood. If the amount of ketones are too great, the critical acid-base balance of the blood can be upset. Excessive blood ketones usually produce symptoms of headaches, lethargy, dizziness, sensations of intoxication and lightheadedness.

## STEPS TO TAKE CARE OF YOURSELF:

- 1. Be kind to yourself.** Listen to the way you speak to yourself and ask if you would speak to any other person with such cruelty. If the answer is "no", then stop talking to yourself in that manner. Look at your past and determine who taught you to speak as you do to yourself. Who told you that you were, in essence, ugly, unfit, not enough? Remember the first rule of parenting: "Criticism does not lead to constructive change, however positive reinforcement does."
- 2. Have compassion on yourself.** Remember that there are reasons (not excuses) for the way we behave the way we do. Don't expect yourself to be perfect.
- 3. Learn to love your body.** Stand in front of the mirror naked and view yourself as a whole being instead of picking one part to be critical of and obsess on. Tell yourself you're beautiful. Try to see yourself through the eyes of a loved one.
- 4. Frequently remind yourself that changing your shape will not make your life perfect.**
- 5. Choose a healthful, varied diet.**
- 6. Legalize foods.** Food, having no morals, should neither be termed as "good" nor "bad". Rather, assess foods on gradations of nutritional density and try to choose the most dense.
- 7. Allow yourself occasional snacks.** Continual self denial is guaranteed to set you up for a binge.
- 8. Remember** that any negative you have done to your body by eating a low nutrient dense food is severely outweighed by the damaging effects of purging and obsessive exercise.
- 9. Eat meals with friends** since binging and purging are usually performed in secret. Also, it is important to connect food with hunger and not the obsession.
- 10. Throw your scale away.** Judge yourself by how you look, feel and how your clothes fit. Try to focus on your overall health rather than your body fat percentage.
- 11. Don't use your exercise as punishment.** Making your sport a punishment confiscates the joy you could derive from it.
- 12. Begin taking 200 mcg of Chromium Picolinate daily.** Always take your supplements with food. If you do not notice a difference in the intensity and frequency of your sugar cravings within four weeks, stop supplementing. As always, see your medical care practitioner when starting any supplement.
- 13. Work on your personal development.** If you need to be more assertive, communicative, etc. then go out and do it. If you have given your dedication to your sport, you can go after your psyche with the same fervor.
- 14. See a nutritionist or osteopathic physician** who can assess your needs integrally.
- 15. Find a massage therapist and/or counselor** with whom you feel comfortable. A sensitive and properly trained massage therapist can greatly assist and augment your path to recovery and personal exploration.

When you can practice your sport again without the taint of food/fat obsession, then you will truly be able to enjoy your sport. **Good Luck!!!!**

## RESOURCES:

### BOOKS:

- The Beauty Myth, Naomi Wolf
- Bulimia: A Systems Approach, Maria P. Root
- Overcoming Overeating, Hirschmann & Munter
- The Yeast Syndrome, Trowbridge & Walker

Santa Clara, S. (1992). San Diego Sports Massage Team Newsletter