

Healthy diet or new eating disorder?

The public is overwhelmed with information on 'healthy' diets and this is leading to Orthorexia Nervosa, described as an unhealthy obsession or fixation with healthy or 'righteous eating', which at its extreme, results in the restriction of food intake to such a degree that it impacts negatively on an individual's physical and psychological health.



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"Generally speaking, an increased focus on healthy eating habits is a good thing, but unfortunately it's not good for everyone," says Stephanie Watson, clinical social worker and manager of the Eating Disorder & Young Adult Program at Akeso Specialised Psychiatric Clinics, who believes that the current dieting culture could contribute to the prevalence of 'Orthorexia'.

Although not yet officially classified as an eating disorder, according to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), the condition was first described by Dr Steven Bratman in 1961. It has gained much momentum of late especially given society's increased focus on what we should and should not eat, fuelled by a burgeoning 'dieting' industry and the media's relentless quest to feed this food-restriction frenzy.

The global functional foods industry - foods meant to serve a specific purpose, such as sleep-aiding drinks, weight loss supplements, gut-soothing probiotics and health-promoting superfoods - passed \$120 million in sales in 2013 and is on track to hit nearly \$160 million by 2017, according to market research publishers Global Industry Analysts. In addition, Google searches for words such as 'paleo' and 'gluten' are on the rise.

Do not confuse diet with disorder

Before going into any specifics, however, Watson is adamant that one should not confuse dieting - even excessive binge eating - or modern society's recent focus on healthier eating with an eating disorder:

"An eating disorder is a highly debilitating psychiatric disorder in which pathological eating disturbances lead to extreme forms of weight management behaviours that negatively impact on the individual's physical and emotional state. True eating disorders are the manifestation of a number of underlying emotional and psychological factors, relating to individual personality traits, family and social dynamics. Classic examples of eating disorders include Anorexia Nervosa (which is characterised by a distorted body perception and restricted calorie and food intake), Bulimia Nervosa (characterised by

binging and compensatory behaviour) and Binge Eating disorder (characterised as consuming a large amount of food in short periods).

"To consider that an increased focus on healthy eating could precipitate the development of an eating disorder is narrow minded. However, the messages communicated by the current dieting culture, combined with the existing fixation on the body beautiful and dieting as means of achieving this idealised state, could create the gateway for vulnerable individuals to develop an eating disorder," Watson cautions.

When healthy becomes unhealthy

The primary concern, when it comes to Orthorexic behaviour, is the subjective nature of the concept of 'healthy', which means that it is open to misinterpretation, allowing vulnerable individuals to incorporate selective concepts that affirm their distorted ideas around food and shape. "These distorted ideas can result in very rigid rules around foods, which are then classified into 'good' and 'healthy' foods versus 'bad' and 'dangerous' food. If these ideas are practiced to the extreme, and progress in their rigidity, it leaves individuals highly vulnerable to the consequences of limited caloric and nutritional intake

As the obsession with 'pure' food progresses, an orthorexic will become pre-occupied with his or her idea of 'righteous' eating. This varies, depending on the individual, from cutting out so-called 'artificial foods' and only eating organic fare, to saying no to the likes of fat, carbohydrates or sugar. The planning and preparation of meals takes centre stage, eating food prepared by other people becomes increasingly difficult because of the fear of what may lie within, and inevitably, this begins to impact on the individual's overall functioning and wellbeing.

At which point, and despite the 'healthy intentions' of the person concerned, a 'diet' has transformed into what many people recognise as the typical patterns of an eating disorder.

Eating disorders understudied and under-reported

Unfortunately, eating disorders are under-studied in South Africa and, because of the secrecy and shame surrounding the disease, the incidence of such disorders is widely acknowledged to be grossly under-reported. What we do know is that up to 50% of adolescent girls would have started some form of 'dieting' before the age of 15, and that much of this dieting behaviour is not substantiated and can therefore be considered as inappropriate. Although teenage girls are the category most at risk of developing eating disorders, recent studies have shown that boys and men are not immune from the body dysmorphia that can lead to disturbing eating patterns. A study that explored body satisfaction amongst South African schoolboys in 2009, for example, revealed that 28.5% of boys were dissatisfied with their weight.

Identifying behaviour

"Sad but true, the culture of 'dieting' has become the norm within adolescence, as a way to combat body consciousness and also as a means to gain self and peer acceptance. In order to prevent an innocent diet from becoming a potential gateway to an eating disorder, parents need to be aware of the certain behaviours surrounding food."

- Progressive restriction of certain food groups, to the extent that food choice is highly limited;
- No longer wanting to eat with the family, eating alone;
- Trips to the bathroom immediately after eating;
- Obsessive need to weigh themselves;
- When weight loss exceeds desired healthy weight loss goal;
- You have not seen them sitting and eating a full plate of food;
- Saying that they have eaten and not hungry;
- If there is noticeable weight loss yet they are saying they are eating;
- Harsh remarks about their bodies, seeing themselves as bigger than what they truly are;
- Isolating and removing themselves from social situations where food is involved;
- Distress around body shape and weight, so much so that it impacts on their social functioning

"If you are concerned about a loved one's eating patterns and behaviours, it is first important to rule out any medical

conditions that could be responsible for the behaviour, by taking them for a medical practitioner for assessment. Thereafter take them to a clinical dietician to assist in their planning of foods and make sure they are eating a well-balanced meal plan. Thirdly, I would recommend seeing a clinical psychologist to work on challenging the distorted beliefs systems around food and help identify underlying psychological issues. The psychologist may then refer to a psychiatrist, to assess if eating behaviour is related to any mood components.

"It is important to remember that not everyone who diets develops an eating disorder. Often the start is the innocent attempt at weight loss. Sadly, the endorsement of various diets and beliefs around certain foods can be misinterpreted and lead to dire consequences in the hands of individuals vulnerable to the development of an eating disorder.

"I agree that it is important to understand what we eat, and have some boundaries surrounding food. However, it seems as though food itself is being misrepresented and tarnished. Modern society's focus on food has placed it on a pedestal, whereas in reality it is simply a way of nurturing our bodies," concludes Watson.

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