

Diabetes and Eating Disorders

Eating disorders are common in teenaged girls and young women. They are rarely seen in boys and men. Girls and young women with type 1 diabetes have about twice the risk of developing eating disorders as their peers without diabetes. This may be because of the weight changes that can occur with insulin therapy and good metabolic control and the extra attention people with diabetes must pay to what they eat.

The two main eating disorders are anorexia nervosa and bulimia nervosa. People with anorexia restrict their food intake to stay thin. Their perceptions of their body are often distorted. People with bulimia repeatedly eat excessive amounts of food and then induce vomiting or take laxatives to purge the food from their body.

The most common features of eating disorders in girls and young women with type 1 diabetes are:

- dissatisfaction with their body weight and shape and desire to be thinner;
- dieting or manipulation of insulin doses to control weight; and,
- binge eating.

Researchers estimate that 10–20 percent of girls in their mid-teen years and 30–40 percent of late teenaged girls and young adult women with diabetes skip or alter insulin doses to control their weight. In people with diabetes, eating disorders can lead to poor metabolic control and repeated hospitalizations for dangerously high or low blood sugar. Chronic poor blood sugar control leads to long-term complications, such as eye, kidney, and nerve damage.

Early Warning Signs

- Extremely high A1C test results
- Frequent bouts of and hospitalizations for poor blood sugar control
- Anxiety about or avoidance of being weighed
- Frequent requests to switch meal-planning approaches
- Frequent severe low blood sugar

- Widely fluctuating blood sugar levels without obvious reason
- Delay in puberty or sexual maturation or irregular or no menses
- Binging with food or alcohol at least twice a week for 3 months
- Exercise more than is necessary to stay fit
- Severe family stress

If you think that you or a loved one has an eating disorder, talk to your diabetes health care providers. They will recommend a mental health counselor who will work with the diabetes team to help you and your family deal with this problem. It is important to be nonjudgmental and supportive. It is also extremely important to seek evaluation and treatment.

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