

1 ***Eating disorders***

Anorexia nervosa Bulimia

2 ***Etiology - individual factors***

- Distorted self-image
- Lack of autonomy
- Perfectionism
- Obesity
- Sexual abuse
- Chronic somatic illness

3 ***Etiology - family factors***

- Exaggeration of social expectations
- Eating disorders in the family
- Occurrence of affective diseases, alcoholism
- Domination by a family member (building an anxious worldview, role of women in the family, internal conflicts of the system)

4 ***Etiology - cultural factors***

- Promoted body ideal
- Social expectations
- The need to perform multiple, sometimes conflicting roles

5 ***reasons***

- Genetic
- Disorders of neurotransmitters (serotonin, adrenaline)
- Endocrinopathies of the hypothalamic-pituitary axis -

adrenal glands

- Disorders of emotional development
(fear of adulthood, problems with sexuality, independence)

6 ***Clinically...***

- Restrictive type: weight reduction as a result of an increasingly strict diet
- Bulimic type (bulimic-purging): diet, laxatives, binge eating attacks

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- A sense of constant fatigue
- Feeling cold
- Concentration disorders
- Headaches
- Tendency to faint

8 ***Psychologically...***

- Focusing on food
- Anhedonia
- Isolating yourself
- Disruption of relationships in the family system
- Feelings of misunderstanding and loneliness

9 ***Clinical manifestations***

- Emaciation - to cachexia
- Dry, flaky skin
- Bruising of the distal parts of the limbs
- Lanugo hair

- Brittle, falling hair
- Bradycardia
- Anemia

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- Menstrual atrophy
- Cold intolerance
- Bradypnea
- Flatulence and constipation
- osteoporosis

11  ***Mental symptoms***

- Psychomotor slowdown
- Need for isolation
- Hypersensitivity to stimuli
- Secondary infantilism

12  ***Treatment***

BMI 10 -12 -life-threatening, absolute indication for hospitalization, mainly somatic treatment (compensation of deficiencies)

Psychotherapy - individual, group, family (preferably in combination)

Weight gain

Medications - with accompanying psychopathological symptoms

13  ***Bulimia - etiology***

- Serotonergic neurotransmission disorders
- Difficulties in the process of separation from the family

- Borderline personality disorder with very low self-esteem
- Family - chaotic, lack of structure, frequent cases of social pathology

14  **Somatic clinical signs**

- Dry skin, swelling of subcutaneous tissue
- Generalized or local edema
- Inflammatory swelling of the salivary glands
- Damage to the mucous membrane of the esophagus and stomach
- Gum disease
- Enamel defects

15  **Somatic clinical signs**

- Abdominal distension
- Ulcerations of the dorsal surface of the hand
- Porcine intestinal obstruction
- Shortness of breath
- Rhythm disorders
- Bradycardia, sinus tachycardia, conduction disturbances

16  **Somatic clinical signs**

- Progressive circulatory failure
- CNS and peripheral UN damage
- Increased thirst
- Increased urinary excretion
- Seizures

17  **Mental symptoms**

- Alternating depression with periods of euphoria
- Psychomotor slowdown
- Deficits in emotional resilience
- Impulse control deficit
- Addictions (alcoholism, sexaholism, workaholism, drug addiction)

18  ***treatment***

- Most patients can be treated on an outpatient basis (PHP, Day Care Units)
- Hospitalization necessary in cases of somatic complications, increased depressive symptoms, suicide attempt
- Psychotherapy
- High doses of fluoxetine