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**B. Sc (Hon) Health
and Social Care**

BMHP6006

**Mental Health &
Psychopathology**

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What is Mental Health?

Introduction

- Mental Health could be defined as psychological, emotional and social well-being.([mentalhealth.gov](https://www.mentalhealth.gov))

What is a Mental Health Disorder

- It is a condition that affects your feeling, a person's thoughts, mood and behaviour.
- It may be temporary or permanent
- Mental health disorder may affect one's ability to relate to others, how they live or go about their daily lives.
- [Medlineplus.gov](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7811111/) (2021)

A person's mental health can have an influence on their thoughts, feelings and actions. A mental health disorder may last for a lifetime or only for a short period of time.

What is an Eating Disorder

- An Eating disorder can be defined as a mental health illness involving an irregular eating habits and severe distress or concerns about body weight or shape.
- An eating disorder is a mental health condition where a person uses the control of food as a coping mechanism to deal with how they feel or difficult situations they have been through.(nhs.uk,2021)
- Eating disorders such as anorexia is a major cause of death amongst adolescents and young women (Pritts et al, 2003)

(eatingdisorderhope.com,2021)



Having an eating disorder means “having a difficult relationship with food”. A person suffering from an eating disorder may either eat too much or too little, they are mostly overly fixated about their body shape or weight.(mentalhealth.org.uk,2021). According to the eating disorder charity Beat there are around 1.25 million people in the UK who have an eating disorder. People from diverse backgrounds no matter their age, gender or race can develop an eating disorder. In the UK 25% of males have an eating disorder. Being underweight is not the only indication of an eating disorder, Most people with an eating disorder stay within a normal weight or can even be obese.

Classification

- International Classification of Diseases (ICD) was designed by the World Health Organisation (WHO) to identify health trends and statistics globally.
- According to ICD10 manual eating disorders fall under the behavioural syndromes associated with psychological disturbances and physical factors (F50)
- There are 8 eating disorders under this category
- icd.who.int (2019)



ICD is the international standard for reporting diseases and health conditions
It is the yardstick in the diagnostic classification standard for all clinical and research purposes

ICD and DSM

- In the UK the ICD10 manual is used
- ICD defines the universal order of diseases disorders, injuries and other related health conditions which is listed in a comprehensive and hierarchal order.
- Diagnostic and Statistical Manual of Mental Disorder (DSM) was designed by the American Psychiatric Association (APA), which is a single national agency

DSM is a collaborative effort of more than 10 years by a number of international experts in all aspects of mental health

4 main Types of Eating Disorders

- F50.0 – Anorexia nervosa
- F50.1 – Atypical Anorexia nervosa
- F50.2 – Bulimia nervosa
- F50.3 – Atypical Bulimia nervosa

lcd.who.int (2019)



According to the WHO ICD10 manual, there are 8 variations of eating disorders, the first 4 are the main types of eating disorders .

My Main Focus

What is Anorexia Nervosa

Anorexia nervosa is an eating disorder characterised by an intentional low weight threshold a patient imposes on themselves and become unhealthily thin.

- They see themselves as fat or overweight even when they are underweight or thin.
- Can increase the risk of untimely death
- Could be cured with early intervention and appropriate treatment
- nhsinform.scot (2020)
- eatingdisorderhope.com(2021)



Anorexia nervosa is an eating disorder in which a person intentionally limits how much food they eat, this is because they have a strong desire to be thin and they are afraid of gaining weight.(urmc.rochester.edu). Anorexia nervosa is an “eating disorder and a potentially life- threatening mental health condition” (nhsinform.scot). Sufferers of this mental health disorder are very fearful about their body weight and shape, they try to keep their body weight as low as possible by restricting how much food they eat. They use weight control measures such as excessive exercise, laxatives and stimulant drugs to control their body weight. (nhsinform.scot,2021) .Those who suffer from anorexia nervosa have an unhealthy fear and obsession about weight gain.They can get dangerously underweight which can cause infertility , brain damage, bone loss, organ failure and even death.(betterhelp,2020)

History of Anorexia Nervosa

As early as the 12th and 13th centuries self starvation was in vogue, particularly in the 13th century a number of women who belonged to a particular religious sect practiced self starvation as a means of getting closer to God. For example St Catherine of Siena(1347-1380) was one of such women. She and other women will starve themselves for weeks and months as a devotion to God (pursuit of spiritual perfection).

Sir William Gull came up with term Anorexia, it was originally a theological issue, which transitioned to a pursuit of bodily perfection .

eatingrecoverycentre.com(2020)

Throughout history there has been cases of manifestations of disturbed eating behaviours.

Food avoidance and overeating were traditionally looked upon as symptoms of a type of illness.

Case Study of Anorexia

Anna's parents Mr and Mrs Smith have been worried about their 16 year old daughter, for sometime now she has been on a dieting programme that never seem to end. They did not understand why she was **on a diet since she has never been overweight.**

Anna's dieting behaviour made her **very withdrawn, depressed and anxious.** When her parents questioned her dieting behaviour ,she became emotional. She stopped eating with her family and spends most of her time in her bedroom. Anytime her parents express their concern about her eating habit, **she insisted there is nothing wrong with her.** One day Anna's parents received a phone call from her school that she had fainted and was taken to hospital.

In this case study we see a 16 year old girl who was on a diet without a reason, she did not seem happy about this dieting regime but rather she was depressed ,anxious and withdrawn. She had unreasonable emotional outburst anytime her parents questioned her dieting habit. When she fainted and was taken to hospital, she had to see an eating disorder specialist due to clear signs of this mental health disorder.

Case study cont'd

She did not stay long at the hospital but she was recommended to see **an eating disorder specialist** immediately. Upon diagnosis the specialist had to put Anna under **close supervision because her weight was dangerously low**, she also had a low heart rate (bradycardia) and a low temperature(hypothermia). Anna was put on a 24 hour bed rest. A dietician **prescribed a gradually increasing diet** to improve her physical health and weight.

As Anna's health improved , she participated in group therapies involving CBT, body image, anxiety management and psycho educational nutrition therapy. These therapies involved her family so as to encourage and manage her meal plans at home. she also had one on one sessions with her therapist to discuss any issues that had caused her any distress. At the end of her sessions Anna had gained control of her eating disorder. (priorygroup.com,2021)

Anna was clearly showing signs of Anorexia nervosa such as not eating with her family, spending most of her time in her bedroom, emotional outbursts

Diagnosis

- The professional will need to obtain an accurate weight measurement of the patient.
- The eating disorder specialist will look out for signs indicating an eating disorder(dieting, avoiding eating with family, mood changes)
- They will normally carry a comprehensive assessment of the mental and physical health of the patient as well as specific symptoms of eating disorder (cold intolerance, fainting, dizziness, low heart rate)
- Crucial signs might include hypertension, hypothermia, dry skin and loss of subcutaneous fat and the presence of calluses on their hand as well as enlarged salivary gland (Pritts et al 2003)

healthtalk.org (2019)
Gmmh.nhs.uk



Checking the Body Mass Index (BMI) is important as a low BMI in comparison to a persons age is a sign of an eating disorder. The fear of weight gain and a distorted body image. In teenagers the therapist may ask questions about Amenorrhoea which has lasted more than 3 months.

Causes of Anorexia

- **Biological/ Genetic Factors**

- Changes in brain hormone levels
- Family history of eating disorders

- **Psychological Factors**

- Low self esteem, being a perfectionist
- Challenges with expressing negative emotions
- Traumatic Experience

- **Social factors**

- abuse, bullying and difficulties with School work

(Pritts et al 2003)

mentalhealth.org.uk,2021)

The genetic makeup of a person can be a cause of an eating disorder. Social factors: such as involvement in activities that promote weight loss for example; ballet, athletics and modelling. For teenagers bullying at school about body shape can be a cause of anorexic behaviour. Abuse such verbal ,sexual, emotional or physical can trigger the onset of anorexia.

Circumstances in life such as Trauma or abuse may also contribute to an eating disorder; verbal abuse about body weight can be a cause an eating disorder

Signs & Symptoms of Anorexia

- Anorexia patients might say they are fat when they are a healthy weight.
- They may have unusually low Body Mass Index (BMI) in relation to their age.
- Avoiding foods one perceives as fattening
- Other eating disorder symptoms include fatigue, lack of energy or dizziness (Pritts et al 2003)

- [nhs.uk](https://www.nhs.uk) (2021)



[Overview - Anorexia - NHS \(www.nhs.uk\)](https://www.nhs.uk) (2021)

Delayed periods in young women or periods stopping in women who have not reached menopause (Amenorrhoea)

Eating very little meals or avoiding meals directly.

- 1.Sore throat
- 2.Calluses on the knuckles and back of hands
- 3.Gaining and losing weight often
- 4.Weakness, exhaustion, bloodshot eyes

Signs & Symptoms Cont'd

- Always focusing on calories or fat content of food
- Avoiding eating with others
- Taking appetite suppressants, such as diet or slimming pills
- Cutting food into tiny pieces to create the impression haven eaten.
- Hiding behind oversized clothing to make weight loss less noticeable
- Social isolation and withdrawal

nhs.uk(2021)



Those who are under 18 years whose Body Mass Index is lower than it should be for their age, for adults they may have a low BMI. Sufferers try to avoid foods they think will make them fat.

Vulnerable Groups

- Teenage girls ((between 13 – 19 years)
 - Adolescent girls
 - Young women in their early 20s
 - Boys
 - Men
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- [Betterhelp.com](https://www.betterhelp.com) (2020)

The most common age group of affected by an eating disorder is the ages 16 to 40 years, of this number 10% suffer from anorexia. Anorexia nervosa onsets from ages 16-17 years old.(priorygroup.com). 14-25 year olds are mostly at risk of developing an eating disorder.(gmmh.nhs.uk)

Prevalence/Statistics

- More than 1.6 million people in the UK estimated to be affected by eating disorders including Anorexia nervosa
- Between 1.25 and 3.4 million people in the UK are affected by an eating disorder
- Most eating disorders develop during adolescence
- Most common among the ages of 16 and 40 years old
- Around 10% of people affected by an eating disorder suffer from anorexia nervosa
- The UK eating disorder statistics reveals that around 25% of those affected by an eating disorder are male.
- [priorygroup.com](https://www.priorygroup.com) (2021)
- [Betterhelp.com](https://www.betterhelp.com)(2020)

Most boys admitted to hospitals for eating disorders around the age of 13 years ([Anorexiabulimiare.org.uk](https://www.anorexiabulimiare.org.uk) (2019))

Treatment for Anorexia

- Cognitive Behavioural Therapy (CBT)
- Maudsley Anorexia Nervosa Treatment for Adults (MANTRA)
- Specialist Supportive Clinical Management (SSCM)
- Focal Psychodynamic Therapy (FPT)
- Diet Advice

• mind.org.uk(2017)

nhs.uk(2021)



CBT is a talking therapy that helps people to change the way they behave or think (nhs.uk). It is a combination of “cognitive therapy which examines the way you think and behaviour therapy which examines the things you do” (mind.org.uk) during this therapy the eating disorder specialist aims to help the patient to talk about any current issues they may be going through taking it a pace they can handle and to find a positive way to handle it. The therapist also helps the patient to talk about their feelings, thoughts and attitude towards food and their body. They assist the patient to turn around unhelpful behaviours and ways of thinking. These positive changes will then be applied in the daily life of the patient to help them cope with their eating disorder.

MANTRA aims to look into the cognitive, emotional, relational and biological factors associated with anorexia nervosa. This therapy helps patients to gradually find positive ways of coping with their mental health disorder. Some of the positive ways include: improving food intake and nutrition, positive ways of thinking, interpersonal difficulties and ways of managing your emotions.

SSCM this was originally meant to be a comparative treatment in a clinical trial. The main purpose of this therapy was to be an outpatient treatment delivered by a clinician who specialises in eating disorders.

Focal psychodynamic therapy is normally given as an alternative therapy if other therapies do not work for the patient. A treatment involving FPT should involve a look at the relation between the patient's eating habits, their thoughts and feelings.

Legislation

- The Mental Health Act 1983
- The Mental Capacity Act 2005
- The Children Act 1989
- The Human Right Act 1998
- Health and Social Care Act 2012

nice.org.uk(2019)

The main legislation on Mental Health is the

Mental Health Act 1983

The Act spells out the fundamental rights of people with mental health issues. These rights include

Assessment and treatment in hospital

Treatment in the community

How they could get into hospital, which could be criminal or civil meaning treatment in hospital could involve detention in hospital under physical restraint until the patients weight improves.

Eating disorders mainly fall under the Mental Health Act 1983 but since majority of patients with a diagnosis of an eating disorder including Anorexia nervosa and Bulimia nervosa tend to be very young, the Children Act 1989 is also an important legislation to be considered by anyone involved in the care of the patient

Policy

- In 2011 the UK government introduced a Mental Health Strategy entitled, no health without mental health.
- Its main objective is to give equal priority to physical health and mental health and improve services for those suffering from mental health issues
- The Government's main policy objective is to support and expand access to eating disorders programmes
- In 2014 the UK government increased funding to support the development of dedicated community eating disorder services for children and young people in the UK by an additional £30 million. This funding is in addition to other resources already made available to support eating disorders.

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[England.nhs.uk](https://www.england.nhs.uk) (2020)

Public Health Policy in England (2021)

Public Health England (PHE) released a vital publication in July 2019 which showed the trends in hospital admissions of young people suffering from eating disorders. The aim of the policy guidance is to permit local authorities to keep an eye on trends in eating disorders.

Recommendations

- Support for young people being treated for anorexia nervosa should be a family focused therapy.
- Support sessions should be spread over a year and should include education about the benefits of nutrition and effects of malnutrition.
- Specialists must prioritise the need for family involvement in the recovery of the patient.
- Specialist must talk about meal planning with the patient and their family.
- It is essential that the patient understands that healthy eating and appropriate weight gain is an important part of their therapy.
- The therapist must work out a strategy that helps the patient to overcome the edge to use anorexic behaviour as a coping mechanism.

Nice.org.uk (2019)

Family focused sessions should be about 20 sessions lasting up to a year. During sessions of the family focused therapy, patients should be given the option of having sessions with just their specialist/psychiatrist and other sessions with family members or carers. Discussions on meal planning should encourage reaching a healthy body weight and healthy eating, this should be a key goal for the eating disorder specialist.

References

- Pritts, S.D et.al (2003) Diagnosis of eating Disorders in Primary Care. Published by AAFP in the Physician Magazine
- Mental Health Policy in England (2021). House of Commons Briefing Paper No. CBP 07547.
- Anorexia Nervosa. Sourced from www.nhsinformscot/illnesses & conditionsinform/Anorexia-nervosa. Accessed on 24 March 2021
- Anorexia And Bulimia Care (2019) Statistics. Sourced from [Statistics | Anorexia & Bulimia Care](#). Accessed on 01 April 2021
- What is mental health Sourced from <https://www.mentalhealth.gov/basics/what-is-mental-health>. Accessed on 23 March 2021
- Signs/Symptoms of eating disorders. Sourced from [Overview - Anorexia - NHS \(www.nhs.uk\)](#). Accessed on 01 March 2021
- Signs/Symptoms (2018). Sourced from <https://www.eatingdisorderhope.com/information/anorexia>. Accessed on 20 March 2021
- Mental Health Act : Sourced from [What is the Mental Health Act 1983? | Mind](#). Accessed on 28 March 2021

[Anorexia Nervosa | National Eating Disorders Association](#)

References Cont'd

- icd.who.int. (2019) Sourced from [ICD-10 Version:2019 \(who.int\)](https://icd.who.int/). Accessed on 15 March 2021
- Mental health disorders. Sourced from medlineplus.gov/mentaldisorders.html. Accessed on 12 March 2021
- NICE Eating Disorders Guidelines (2019). Sourced from www.nice.org.uk/eatingdisorders
- Children and young people's eating disorders programme (2020) sourced from: [NHS England » Children and young people's eating disorders programme](https://www.nhs.uk/children-and-young-people/eating-disorders-programme). Accessed on 02 April 2021
- Eating Disorders Statistics (2021). Sourced from [Eating Disorder Statistics UK | Priory Group](https://www.eatingdisorderstatistics.co.uk/). Accessed 01 April 2021
- Healthtalk.org (2019):Eating disorders (young People). Sourced from [Eating disorders \(young people\) - Getting the diagnosis \(healthtalk.org\)](https://www.healthtalk.org/eating-disorders-young-people-getting-the-diagnosis). Accessed on 01 April 2021.
- Eating disorder history(2020) available at [Let's Get Real About the History of Eating Disorders | Eating Recovery Center](https://www.letsgetrealth.org/eating-disorders). Accessed on 30 March 2021