

Eating disorders - an athlete's guide

Food and eating play an important part in every athlete's life, and for various reasons many athletes engage in strict diets. Some may try out sports supplements, while others may adopt vegetarian or even vegan diets. Some athletes also try eating more, or less, than usual in order to change their body shape. This could be to fit their sporting norm (e.g., lightweight, small-build gymnast, muscular physique for rugby, or making weight for rowing/judo/boxing, etc) and/or to aid their performance (e.g. increased size may equate to increased strength for power sports).

However, some eating and weight control patterns can be damaging, such as deliberate bingeing (eating excessive amounts in a short period of time), restricting food intake, or other inappropriate weight control behaviours (e.g. self-induced vomiting, misuse of laxatives, misuse of diuretics, excessive amounts of exercise). These behaviours could begin as methods to improve performance, but dieting and weight control behaviours have been linked to the development of more serious eating disorder symptoms.

Athletes may also restrict their food intake because they are feeling unhappy or anxious. However, sustained food restriction can be emotionally and physically harmful, even in the absence of an eating disorder. Ultimately, rather than helping to improve performance, food restriction will eventually hinder performances—training and competition.

Anorexia

Individuals with anorexia have an intense fear of gaining weight or becoming fat, and therefore, can become obsessed about food and exercise. They may start by skipping a few meals, gradually cutting down on carbohydrates, or rarely eating any fat. If they are an athlete then the fear may be that if they eat normally, they will not be able to compete at the same level in sport.

Very often, they set themselves extremely high standards, but are also deeply self-critical, particularly around their weight and shape. This can lead to a negative spiral of ever increasing standards, which can never be met, resulting in sustained self-criticism and low mood. Often athletes with anorexia believe that they do not live up to their own standards, nor the expectations of their coaches, their parents or their fellow athletes.

Often athletes with anorexia will begin to engage in extra exercise beyond their prescribed training plan, which could initially be seen as a positive behaviour from coaches. However, this extra exercise may be compulsively driven, whereby an ever-increasing routine is developed, and exercise 'must' be performed even if injured or unwell. They may feel guilty if they miss an exercise session, and will try to make up for it in order to further control their weight and shape and/or punish their body. As their weight drops, they feel a sense of achievement, but this is soon replaced by self-criticism and a new goal is created. This process may involve setting increasingly higher goals, leading the athlete to engage in further activity and restriction in order to achieve them. This can easily lead to serious physical and psychological burnout.

As they lose more weight, and over-train (combined with food restriction), their athletic performance drops. They may feel too tired to train and become depressed and weak.



A charity registered in England and Wales (801343) and Scotland (SC039309). Company limited by guarantee no 2368495

Exercise can have a mood-regulatory function for them, and so if they are forced to stop training altogether, this could further increase feelings of depression and anxiety in the short term.

They may feel that no one around them understands. However much they try to stay in control, in reality they have lost control because their concern about weight and food is controlling them. For these athletes, losing body fat is the challenge, and food becomes the opponent in the race for thinness.

The long-term effects of under-eating can be devastating. In females, periods may stop or become irregular. Their bones may become brittle, a condition known as osteoporosis, and they may suffer repeated injuries and stress fractures. Anorexic athletes may have to stop running because their bodies become too weak to support them. The combination of low energy availability (disordered eating), bone loss (osteoporosis), and disturbances in periods (amenorrhea) is known as the Female Athlete Triad, and represents three damaging physical symptoms, that commonly co-occur.

Bulimia

Individuals with bulimia base their self-worth predominantly on their body weight and shape. They may strive to improve their appearance in order to boost their self-esteem, but have a distorted view of themselves, and as such are never satisfied with their appearance. They may put themselves on diets which are far too severe, and then may feel low or depressed at not being able to sustain this food restriction. As a result, they may binge on food in order to manage these negative feelings of low self-worth. Anxiety, perhaps related to sporting performance, may also trigger binge episodes.

However, although binges might temporarily reduce anxiety and/or depression, this is short lived. Often the individual is ashamed and disgusted by their behaviour and lack of control and so want to keep it a secret. Often they tell themselves that they will never make it to the top in sport if they lack the discipline to stick to their strict diet. So, they starve themselves for a few days or purge their body of food by vomiting or using laxatives to get rid of the large amounts of food they have eaten. This is then followed at some point by a binge episode, and so the binge-purge cycle starts again.

Many athletes with bulimia appear to be outgoing and sociable, and able to cope with any amount of training. But inside they feel worthless and vulnerable. They think that people wouldn't admire them for their sporting achievements if they really knew what they are like. They feel trapped in a cycle of bingeing and then punishing themselves, with no escape. Repeated use of laxatives and making themselves sick can seriously damage their health. Initially, they may experience tooth decay, bad breath, throat infections, dehydration, and kidney and bowel problems. However, more worryingly, repeated bingeing and purging can result in low potassium levels, which can ultimately have a potentially fatal consequence on heart functioning.

Eating Disorder Not Otherwise Specified (EDNOS)

Many people do not fall into these neat categories, and many do not have all of the symptoms all of the time. Some also display symptoms of both anorexia and bulimia. This is still considered to be a disorder, known as Eating Disorder Not Otherwise Specified (EDNOS). This condition can be just as serious as anorexia or bulimia. EDNOS would include many of those who have the "female triad" described above (under "Anorexia").

Where to get help

Eating disorders are serious mental illnesses and claim more lives than any other mental illness.



A charity registered in England and Wales (801343) and Scotland (SC039309). Company limited by guarantee no 2368495

If you think you may have problems with your own eating habits, it is important to ask for help. The sooner you get the help you need, the more likely you are to make a full recovery. Eating disorders are treatable conditions and full recovery is possible.

It is difficult for athletes with eating disorders to get better on their own. Although they may have determination and willpower, it is often not enough. You may need professional help and support.

Asking for help is never easy. You may be afraid that others will be angry with you. You may also fear that you will lose the control you feel you have over life through your eating and exercising.

But there are several steps you can take:

- Find someone you trust and can talk to openly about your difficulties. This may be a coach, a fellow athlete, a parent or teacher.
- Phone the Beat helpline (see below for details). All calls are confidential.
- Get in contact with the National Centre for Eating Disorders in Sport (NCEDS) www.eatingdisordersinsport.com
- Seek help early. The longer you leave the problem, the longer you will remain trapped and isolated. You will also find that your performances start to deteriorate.
- Visit your GP. The earlier you seek help, the sooner you can begin the road to recovery.

As a result of recovering you can gain new confidence and begin to realise that there are other ways of coping. Never give up hope. Eating disorders can be beaten.

You may also find our information sheet “Eating disorders—a coach’s guide” useful.

This information sheet was originally produced in conjunction with UK Athletics, and has been reviewed with input from the National Centre for Eating Disorders in Sport at Loughborough University and Dr Alan Currie MB ChB, MPhil, FRCPsych.

For more information about eating disorders in sport, please see the UK Sport guidelines: <http://www.uk sport.gov.uk/publications/eating-disorders-in-sport>

Issue date: October 2013 Review date: October 2016 Version 1.1

Sources used to create this information sheet are available by contacting Beat on 0300 123 3355 or info@b-eat.co.uk

Beat is the UK’s leading charity supporting anyone affected by eating disorders or difficulties with food, weight and shape. Beat, Wensum House, 103 Prince of Wales Road, Norwich NR1 1DW
Admin: 0300 123 3355 Email: info@b-eat.co.uk www.b-eat.co.uk

Help for adults

Helpline: 0845 634 1414

Email: help@b-eat.co.uk

Help for young people

Youthline: 0845 634 7650 Text: 07786 201820

Email: fyp@b-eat.co.uk



We welcome your feedback on our information resources and whether you found them helpful.

Email info@b-eat.co.uk with your comments.



A charity registered in England and Wales (801343) and Scotland (SC039309). Company limited by guarantee no 2368495

