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TDD: 1-888-220-5446

Bulimia Nervosa

Q: What is bulimia?

A: Bulimia (buh-LEE-me-ah) nervosa, often called bulimia, is a type of eating disorder. A person with bulimia eats a lot of food in a short amount of time (binges) and then tries to prevent weight gain by getting rid of the food, called purging. Purging might be done by:

- making yourself throw up
- taking laxatives — pills or liquids that speed up the movement of food through your body and lead to a bowel movement

A person with bulimia may also exercise a lot, eat very little or not at all, or take pills to pass urine to prevent weight gain.

Q: Who becomes bulimic?

A: Many people think that eating disorders affect only young, upper-class White females. It is true that most bulimics are

women (90 percent of people with bulimia are women). But bulimia affects people from all walks of life, including males, women of color, and even older women. It was once thought that women of color were shielded from eating disorders by their cultures, which tend to be more accepting of different body sizes. Sadly, research shows that as African American, Latina, Asian/Pacific Islander, and American Indian and Alaska Native women are more exposed to images of thin women, they also become more likely to develop eating disorders.

Q: What causes bulimia?

A: Bulimia is more than just a problem with food. A binge can be triggered by dieting, stress, or uncomfortable emotions, such as anger or sadness. Purging and other actions to prevent weight gain are ways for people with bulimia to feel more in control of their lives and ease stress and anxiety. There is no single known cause of bulimia, but there are some factors that may play a part.

- **Culture.** Women in the U.S. are under constant pressure to fit a certain ideal of beauty. Seeing images of flawless, thin females everywhere makes it hard for women to feel



It was ten years ago when I became bulimic. I had always worried about my weight and how I looked. I always thought I looked fat, no matter what the scale showed or anyone said. But I had never made myself throw up — not until after college. It was a hard

time right after college — I had more responsibilities. I felt very overwhelmed and turned to food to feel more in control of my life. Sometimes, I'd eat a lot of food and throw it up. Other times, I'd throw up a normal meal. At the time, it seemed like the only way I could cope. Luckily, I got help after a friend talked to me about the problem. It took a lot of work, but I am better now.



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good about their bodies. More and more, men are also feeling pressure to have a perfect body.

- **Families.** If you have a mother or sister with bulimia, you are more likely to also have bulimia. Parents who think looks are important, diet themselves, or criticize their children's bodies are more likely to have a child with bulimia.
- **Life changes or stressful events.** Traumatic events like rape, as well as stressful things like starting a new job, can lead to bulimia.
- **Personality traits.** Someone with bulimia may have low self-esteem or feel hopeless. She or he may be very moody, have problems expressing anger, or have a hard time controlling impulsive behaviors.
- **Biology.** Genes, hormones, and chemicals in the brain may be factors in developing bulimia.

Q: What are signs of bulimia?

A: A person with bulimia may be thin, overweight, or have a normal weight. This makes it hard to know if someone has bulimia. But there are warning signs to look out for. Someone with bulimia may use extreme measures to lose weight by:

- using diet pills, or taking pills to urinate or have a bowel movement
- going to the bathroom all the time after eating (to throw up)
- exercising a lot, even in bad weather or when hurt or tired

Someone with bulimia may show signs of throwing up, such as:

- swollen cheeks or jaw area

- calluses or scrapes on knuckles (if using fingers to induce vomiting)
- teeth that look clear
- broken blood vessels in the eyes

Someone with bulimia may also have a distorted body image, shown by thinking she or he is fat, hating her or his body, and fearing weight gain.

Bulimia can also cause someone to not act like her or himself. She or he may be moody or sad, or may not want to go out with friends.

Q: What happens to someone who has bulimia?

A: Bulimia can be very harmful to the body. Look at the picture on page 3 to find out how bulimia affects your health.

Q: Can someone with bulimia get better?

A: Yes. Someone with bulimia can get better. A health care team of doctors, nutritionists, and therapists will help the patient recover. The team will help the patient learn healthy eating patterns and cope with her or his thoughts and feelings.

Different types of therapy have worked to help people with bulimia. These may include individual, group, or family therapy. Some medicines, including ones used to treat depression, have been shown to be effective when used with therapy.

Q: Can women who had bulimia in the past still get pregnant?

A: When a woman has active bulimia, she may not get her period every month or



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it may stop altogether. If this happens, she usually does not ovulate (release an egg). This makes it hard to get pregnant. Women who have had bulimia have a better chance of getting pregnant after they have recovered. If you're having a hard time getting pregnant, see your doctor.

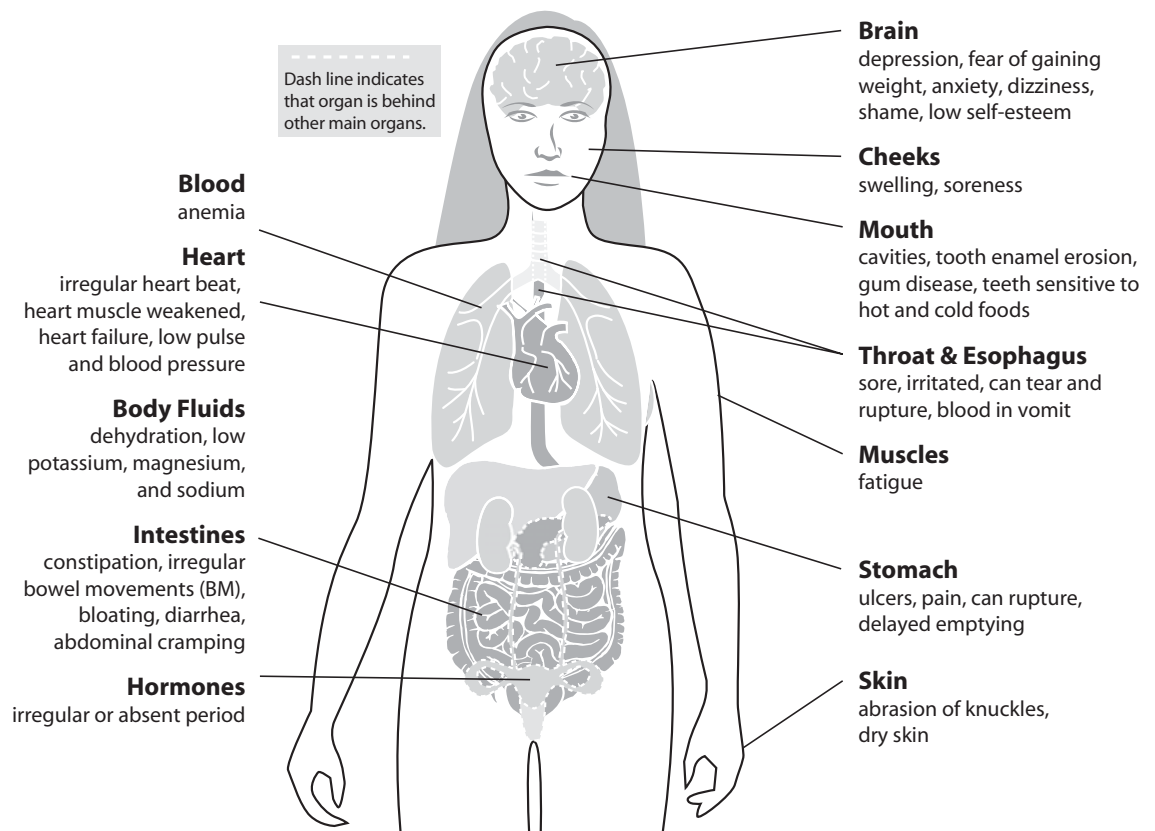
Q: How does bulimia affect pregnancy?

A: If a woman with active bulimia gets pregnant, these problems may result:

- miscarriage

- high blood pressure in the mother
- baby isn't born alive
- baby tries to come out with feet or bottom first
- birth by C-section
- baby is born early
- low birth weight
- birth defects, such as blindness or mental retardation
- problems breastfeeding
- depression in the mother after the baby is born

How bulimia affects your body





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Q: What should I do if I think someone I know has bulimia?

A: If someone you know is showing signs of bulimia, you may be able to help.

1. Set a time to talk. Set aside a time to talk privately with your friend. Make sure you talk in a quiet place where you won't be distracted.
2. Tell your friend about your concerns. Be honest. Tell your friend about your worries about her or his not eating or over exercising. Tell your friend you are concerned and that you think these things may be a sign of a problem that needs professional help.
3. Ask your friend to talk to a professional. Your friend can talk to a counselor or doctor who knows about eating issues. Offer to help your friend find a counselor or doctor and make an appointment, and offer to go with her or him to the appointment.

4. Avoid conflicts. If your friend won't admit that she or he has a problem, don't push. Be sure to tell your friend you are always there to listen if she or he wants to talk.
5. Don't place shame, blame, or guilt on your friend. Don't say, "You just need to eat." Instead, say things like, "I'm concerned about you because you won't eat breakfast or lunch." Or, "It makes me afraid to hear you throwing up."
6. Don't give simple solutions. Don't say, "If you'd just stop, then things would be fine!"
7. Let your friend know that you will always be there no matter what.

Adapted from "What Should I Say? Tips for Talking to a Friend Who May Be Struggling with an Eating Disorder" from the National Eating Disorders Association. ■



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For more information...

You can find out more about bulimia from womenshealth.gov at 1-800-994-9662 or from these organizations.

National Institute of Mental Health (NIMH), NIH, HHS

Phone: (866) 615-NIMH (6464)

Internet Address:

<http://www.nimh.nih.gov>

Academy for Eating Disorders

Phone: (847) 498-4274

Internet Address: <http://www.aedweb.org>

National Mental Health Information Center, SAMHSA, HHS

Phone: (800) 789-2647

Internet Address:

<http://www.mentalhealth.org>

National Association of Anorexia Nervosa and Associated Disorders

Phone: (847) 831-3438

Internet Address: <http://www.anad.org>

National Eating Disorders Association

Phone: (800) 931-2237

Internet Address:

<http://www.nationaleatingdisorders.org>

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