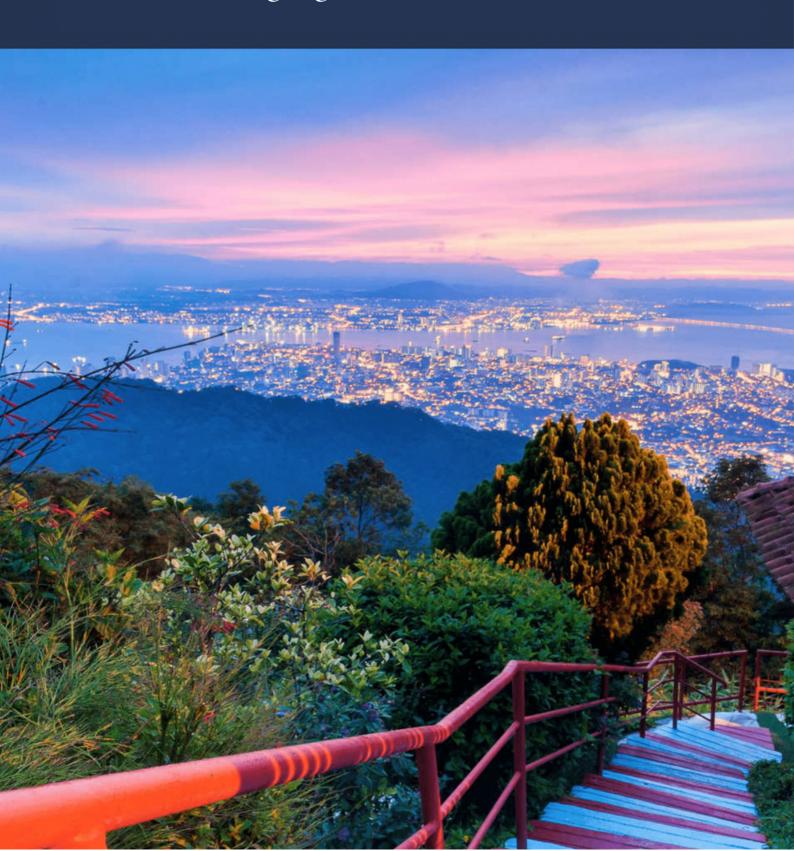


A Parent's Guide to Purging Disorder in Teens



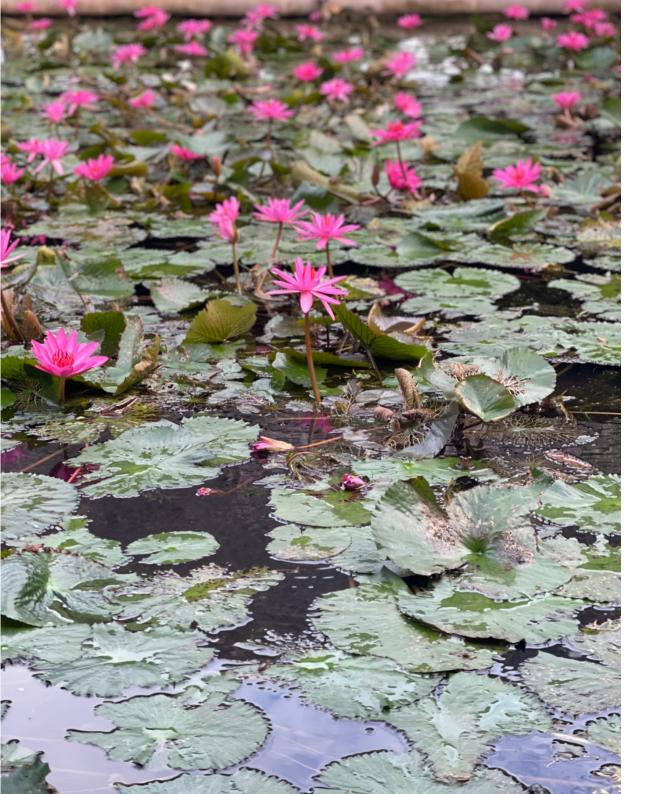
A Parent's Guide to Purging Disorder in Teens

Purging Disorder (PD) is part of the family of Eating Disorders (ED). It is estimated to affect between 2.5 -5% of teenage girls but finding specialist treatment is difficult.

Families with young people with purging disorder have often visited many medical professionals, with a string of referrals to Gastro specialists, Dieticians, Psychiatrists and Family Doctors. Many lab tests will draw a blank, leaving young people and families afraid that they are untreatable.

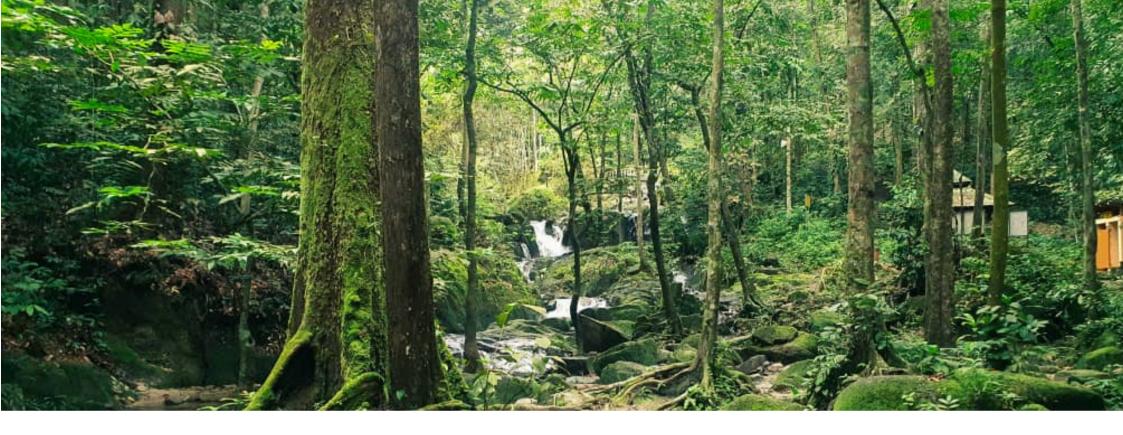
Living with a young person who has been diagnosed with Purging Disorder can be challenging. We hope that this guide can help parents with young people who are beginning their treatment journey, are already diagnosed or parents who are trying to find out where to start in getting the advice that they need.

Our Parent Guides are not intended to replace that advice of your mental health team nor should they be used in place of medical and therapeutic advice. They are written to be used alongside effective and evidence-based treatments for Purging Disorder.



What is Purging Disorder?

Purging Disorder is vomiting in the absence of Binge Eating in individuals who are not underweight, based on the individuals early growth charts and not on the standardised 50th percentile measure indicated on BMI graphs.



What is Binge Eating in Teens?

Binge Eating or Bingeing involves eating a larger amount of food, over a short time and feeling a loss of control. Binge Eating can vary in volume and in frequency and still meet the criteria for Binge Eating Episodes.

What is Purging in Teens?

Purging is often thought of as only self-induced vomiting. However, there are many other types of purging including the use of laxatives, diuretics, detox medications and supplements, anal purging (using water hoses or instruments) and other compensatory behaviours to forcefully remove food, liquids or waste matter from the young persons body. Purging can be painful, embarrassing, well hidden and extremely dangerous.

Who is diagnosed with Purging Disorder?

Nine girls to every one boy are diagnosed with Purging Disorder.

Purging disorder is part of a subgroup of eating disorders that can often be missed or misdiagnosed in clinical practice. In fact, it is rare to see a young person in a residential setting with the diagnosis.

Whilst anyone can be diagnosed with a Purging Disorder, it is more likely to be diagnosed in young females, who have had some early life experience of living in a larger sized body, have a mother or close carer with an Eating Disorder, have high levels of dissatisfaction with their bodies and who have had a history of dieting.

Purging Disorder may be more common than previously thought, with slightly more teens purging whilst not engaging in other ED behaviours.



Research has shown that children who are in the higher weight percentiles at age 5-6 years when compared to their personal growth chart at birth are more likely to be diagnosed with Bulimia Nervosa or Purging Disorder in adolescence. Similar patterns have been seen in young people later diagnosed with Binge Eating Disorder. The higher weight at the onset of the illness misleads parents and professionals into not noticing the Eating Disorder emerging as the young people remain at a higher weight than those with anorexia.

Is Purging Disorder the Same As Anorexia?

No, purging disorder shares features with Anorexia and shares some links with Bulimia, but sits somewhere between the two and is often overlooked or misdiagnosed. There is very little research in this area. This makes it more difficult to reach a diagnosis and more difficult to pinpoint treatment methods and long term outcomes.

Young people and teenagers with symptoms of Anorexia are more likely to be admitted to a teen residential eating disorders program or other inpatient admission than those with either Bulimia or Purging disorder. In fact, there are nearly twice as many young people admitted with Anorexia than there are with Bulimia.

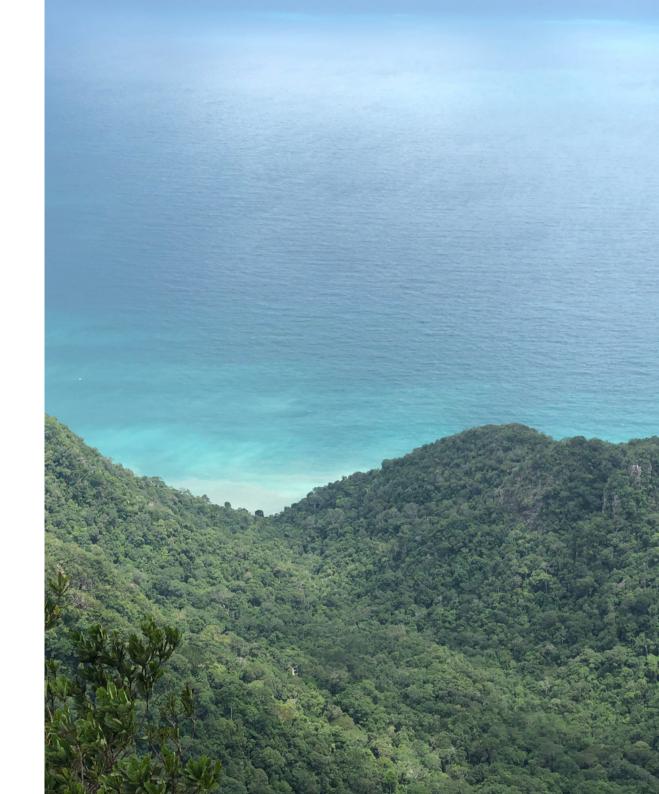
Young people with purging disorder may feel a loss of control over their food. They may feel full to purging at relatively small portion sizes.

Purging Disorder is not diagnosed in teens and young people who are considered to be at a low weight (often classified as underweight in medical notes). Young people who have recently lost weight, continue to lose weight or who are considered to be a low weight for their personal body structure are not diagnosed with purging disorder and instead may be diagnosed with Atypical Anorexia. Purging Disorder is diagnosed in young people with a stable weight. This is an area that needs further research to look at the patterns of purging, with and without weight loss.



Purging Disorder and Fullness

Young people diagnosed with Purging Disorder may feel full quickly, leading to uncomfortable feelings of sickness, tummy aches, the desire to vomit or actually vomit.





Finding Help for Purging Disorder?

Purging Disorder has many differences from both Anorexia and Bulimia, however in common with all eating disorders, PD is very distressing for the young person and family.

Young people with PD may find themselves increasingly anxious in social settings with a fear of being judged. This social anxiety can lead to further problems with interpersonal relationships. Education and early work experiences may be difficult to manage in a young person who vomits regularly.

It is important for parents to consult Eating Disorder Professionals to assist with the complexity of Purging Disorder in young people.

Purging Disorder may require an impatient or residential stay. This will help the treatment team to provide constant observations and care to be able to help the young person to look at the physical and psychological impact of Purging Disorder and to make a plan to create a life of full recovery.

