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Understanding the relationship between Restriction and Control in a Case of Anorexia Nervosa

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Abstract: This case study looks forward to the behaviour of a 20-year-old female who has been brought to a mental health professional because of her diagnoses of Anorexia Nervosa (Eating Disorder). The patient is a student who has been showing symptoms of Anorexia Nervosa for the last 9 months. Her father decided to bring her to a mental health professional after witnessing her symptoms get worse since the last 7 days compared to the last 9 months of her first showing symptoms of anorexia nervosa. The patient admits to be in stress because of being under pressure of looking like a perfect girl with a slim and fit body which led her to develop these obsessive thoughts and compulsive behaviours regarding food and physical appearance. Due to the maladaptive thoughts the feelings of shame and socially avoiding interaction had increased. Her treatment includes a mixture of therapies like Cognitive Behavioural Therapy (CBT-E), Medical monitoring, Nutritional Rehabilitation and Family Psychoeducation help reduce the symptoms of food restrictive behaviour and remove maladaptive thought processes.

Keywords: *Compulsions, Mental Health Professional, Eating Disorder, Anorexia Nervosa, Shame, Socially Avoidant Behaviour.*

1. Introduction

The patient, a 20-year-old female was taken to a mental health professional by her mother because an underlying issue was discovered termed as Anorexia Nervosa. It was observed that she had been experiencing these symptoms of dizziness, daily mirror checking, excessive exercise schedule. It was noted that her BMI was 16.5. The patient is the eldest child in the

family of 5 members. The mother had always been strict with eating habits and physical appearance especially for girls. Due to these strict rules and regulations the patient has always felt the need to be under control for the choices she takes which resulted in rigidity with her eating habits and also the way she looks at herself.

Due to the obsession about not gaining weight and compulsion of restriction of food intake and rigorous exercises to lose weight has caused the patient extreme biological, psychological impairment and also decreased the social inclusivity which resulted in self isolation and avoiding social gathering especially where eating is included.

This case study aims to understand the factor contributing to the patient's compulsive behaviour including her personal relationships and psychological assessment. This study provides an insight on managing challenges related to different aspects of life like physical, psychological, social. This is a comprehensive study of the patient, highlighting the therapeutic approaches and techniques in regards to her diagnosis.

2. Suggested Treatment

The patient's treatment plan should be tailored to her condition and planned as a multidisciplinary outpatient treatment program:

1) Medical Monitoring: Going for regular check-ups regarding assessments for weight, vitals and malnourishment.
2) Nutritional Rehabilitation: Making a tailored diet plan in consideration of the needs and importance for gradually improve and restore healthy weight.
3) (CBT – E): This is an evidence based approach used to target the distorted thought process about food, body image and control.
4) Anxiety Management: Mindfulness based approach can be helpful in reducing the anxiousness and stress arising due to the obsessiveness regarding food and body image.
5) Family Therapy: Psychoeducation of the family members can be helpful with building strong and positive communication among the family members and the patient.

3. Research Evidence

The research studies underlined share common ground with eating disorders in an individual. Research shows that Eating Disorders is quite prevalent in people who have a family member with a history of Eating Disorder, people with diagnoses of anxiety, OCD, trauma etc or if the family is of perfectionists. In the case of the patient, her condition can be understood by these findings. This study had stated that having eating disorder, it is clear that there is going

to be maladaptive thought processes hence CBT-E has been the most effective treatment approach for adults with mild or moderate symptoms of distorted thoughts and focuses on addressing cognitive distortions and behavioural avoidance (Fairburn et al., 2015).

The same reason that triggered anorexia nervosa in the patient, was the perfectionism the patients mother had towards the physical appearance of a girl. This study also explores the interconnectedness between perfectionism and eating disorders (Stoeber et al., 2017).

The patient, also showed socially avoidant behaviour because of the physical appearance of herself and the fear of being judged because of their eating habits and preferences and to avoid answering questions regarding how they look, this study (Lampard et al., 2011) explored the connection of poor distress tolerance with maintenance of eating disorders has been addressed.

4. Conclusion

The case of this patient, shows how a familial thought processes can trigger and cause eating disorders in an individual, because of the perfectionist behaviour of her mother regarding food habits and physical appearance of girls acted as a trigger of Anorexia Nervosa for her, which affected her life in different aspects be it physical, psychological and social. She became socially avoidant because of the way she physically appeared due to the obsessive thoughts of being fat and compulsive exercising and activities of getting into shape resulted in a sense of low confidence in oneself.

Other than physical appearance her psychological health is also affected stress and depression is also playing a role to her underlying disorder. Socially withdrawn because anyway she can be triggered and believes that staying with oneself is better than being vulnerable with people.

Treatment for her is tailored to help her with the eating disorder but also help her on a wholistic level. CBT-E is the most widely used therapy to help change faulty thought processes and build an insight in an individual to modify their behaviour. Medical monitoring and nutrition rehabilitation both is seen to be helpful in enhancing healthy diet and restore healthy body weight. Psychoeducation of the family is also a must as it helps the family members be supportive of the patient and build strong and healthy communication between the family and the patient.

Research added highlights the importance of understanding the patient's case on a wholistic platform rather than just a disorder. The trigger which was responsible for Eating disorder or Anorexia Nervosa depicted on how perfectionism is one of the reason an individual can get

diagnosed with Eating disorder which not only affects the physical appearance of the patient but also effects on the important components of live like biological, psychological and social domain of life of the patient. Even though this is a disorder but to help the patient the professional has to look in the depts of the issue to help the patient get back on track with their life.

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