

EATING DISORDERS IN WOMEN AND PSYCHOLOGICAL FACTORS

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ABSTRACT

Eating disorders are disorders that affect people's mental and physical development. Conditions such as the environment and the physiological structure of the individual affect the individual. Generally, it can be seen in individuals of all ages, regardless of whether they are male or female. The reason it is common, especially in women, has been explained as women's self and aesthetic concerns. The individual's anxiety about being overweight, not wanting to be fat, maturing early, and wanting to be physically liked cause changes in the nutritional level and shape. On the other hand, familial factors also cause eating disorders. These are why the individual's family is overprotective and dominant, there are obese individuals in the family, and the individual has conflicts with his family. Nutritional changes made by the individual in the social process to make himself accepted or unhealthy diet and heavy exercise also cause eating disorders. In the individual's environment, efforts to comply with the perceptions of beauty imposed by society, the effect of the media in this process, and the anxiety of conforming to the standards of physical attractiveness trigger this situation. A woman with social anxiety changes her diet. Heavy diets, additional medications, heavy exercises, and behaviors that disrupt the eating pattern (such as vomiting) lead to serious illnesses. The process that starts with bodily aesthetic anxiety causes problems that will lead to situations that threaten the individual's life. In this process, the individual experiences physical and mental discomfort. Individual, familial, and social factors and eating disorders affect the physical and mental health of the individual. There are many eating disorders within the experienced process, effects, and results. These; include pica, anorexia nervosa, bulimia, binge eating disorder, emotional eating disorder, and an unclassifiable eating disorder.

Keywords: eating disorders, anorexia, bulimia

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The historical process of eating disorders dates back 400 years ago. The development of eating disorders explains in terms of multifactorial approaches (such as family functioning, family history of eating disorder, low self-esteem, mood disorders, substance abuse, obesity, weight and food preoccupations, Obsessive-Compulsive Disorder-OCD, history of exposure to adverse events, sexual acceptance and puberty problems (Erol, Toprak and Yazıcı 2002).

Eating disorders are among the increasing group of diseases of the modern age. The association of weakness with attractiveness has also emerged with the change in aesthetic concerns. Individuals want bodily changes to find themselves beautiful and accepted by society. Unhealthy results can come across because this change is physical and goes through the diet. In the modern age, attributing the adjective old to overweight people and thin as more elegant has pushed young girls to be light. On the other hand, the creation of fashion understanding concepts such as thinness and fineness also caused a change in the bodily perception of young women (Toker and Hocaoglu 2009). Physically, it has dragged women into unhealthy processes by controlling their eating patterns or by being physiological and psychological factors.

Women have tried to stay thin with aesthetic concerns. Although this process of staying weak started with diet in general, it continued an unhealthy process with other factors. An eating disorder is caused due to individual's way of eating food and the deterioration of the individual's relationship with his own body, apart from the nutritional problem. This situation, which the woman entered, has adversely affected her in many ways, such as biological, psychological, and physical. Its consequences have sometimes had very serious consequences. The process that starts with aesthetic anxiety threatens the health of individuals in the following periods (Yücel 2010). The individual has excessive eating or unconscious behaviors due to low self-anxiety and psychological conflicts. Although the main reason is not known exactly, it explains that it is due to the lack of self-confidence of the individual. The individual's sociocultural environment and genetic structure affect their discomfort. As much as it

affects the individual with a nutritional problem, it also affects people on the primary axis, such as family and friends. (Ulaş, Uncu and Üner 2013).

Women show complex characteristics in their eating behaviors and their bodies. And eating disorders are described as a disorder that is more common in women today. One of the reasons women have eating disorders is that women want to receive aesthetic approval from society and that society puts women into bodily perception due to many factors.

Although the perception that women will look more beautiful when they are thin imposing on women in society, the media has also increased this situation. Developed countries and western culture influenced communities, to the concepts such as weight and body size give a lot of space. In this process, there is a process related to changing a continuous eating situation in societies. Finding perceptions and ideas about the constant change in eating patterns and individuals trying to apply them without considering their physical characteristics result in unhealthy conditions. Based on the changing eating pattern, there is an increase in concepts such as diet clinics and weight control drugs. On the other hand, there are multiple dietary recommendations on television, in magazines, and in newspapers. The process that starts with aesthetic anxiety causes individuals to encounter very serious health problems (Yücel 2010).

The research done explains that eating disorder is not only caused by physical health. An individual's mental state causes eating disorders. The disturbing process or environment experienced by the individual mentally and spiritually caused the individual to eat less or often. The individual who has problems in self-management cannot make balanced decisions about nutrition. This point sometimes eats a lot or frequently eats; on the other hand, binge eats. An individual tends to eat as an escape from his mental state. This situation occurs either consciously or unconsciously. While a group of individuals with an eating disorder tends to eat, a decrease in food intake sees in some groups. In this case, it affects the physical and mental health of the individual (Çelik et al. 2016).

FACTORS CAUSED EATING DISORDERS

There are multiple causes of eating disorders. Identity and family conflicts include the individual's personality traits, mental disorders, and feeling

worthless. It is also possible to explain them in groups. The factors that cause eating disorders explains in three stages. These; are individual factors, family factors, and sociocultural factors. (www.florence.com).

INDIVIDUAL RISK FACTORS

- Being fat,
- Worry about being overweight,
- Early maturation,
- Initiation of dating (desire to endear oneself to),
- low self-anxiety,
- Depression,
- Perfectionism

In the developmental process of the individual, the physical and spiritual discovery process increases and continues with adolescence.

With the increased media use in the modern age, a general biological opinion forms. In particular, women try to go beyond their conditions and comply with the determined standard measures to gain a place in the social phenomenon. With the onset of aesthetic anxiety during adolescence, the search for physical and mental change begins, especially in women. Early maturing individuals try to change their bodies with the effect of looking different and older than their peers. They try to achieve maturity by changing their diet. In this case, individuals also bring about eating disorders, especially in women. In the individual who gains gender awareness with adolescence, the attitude of making himself liked by the opposite sex also emerges. The individual who desires to be appreciated by dating tries to lose weight, and at this point, he enters into unhealthy processes and encounters an eating disorder. On the other hand, individuals with low self-esteem experience nutritional disorders due to fear of being disliked or seeing themselves as inadequate (Button 1990, Ledoux et al. 1991). Individuals in the process of depression show

symptoms of eating disorders such as overeating or eating less, eating frequently, and vomiting after a meal. The individual's perfectionist structure and the feeling of being superior to other individuals and standards also cause eating disorders.

FAMILIAL RISK FACTORS

- Presence of obese individuals in the family,
- Conflict,
- Overprotective parents,
- Overly dominant parents,
- Psychological diseases,
- Physical and sexual abuse.

Another risk factor effective in the emergence of the disease in individuals with eating disorders is familial conditions. Having obese individuals in the individual's family affects the individual in terms of weight. The state of being a fat individual, in which the individual is one-to-one, also triggers the individual in the eating process. While psychological diseases affect the individual's mental structure, they also affect them physically.

Along with the psychological diseases they have experienced, the individual neglects their nutrition or eats unhealthy. In this case, it causes an eating disorder in the individual. In the society where the individual lives and the effect of his contradictory psychological state, unhealthy nutritional status emerges. Another familial risk factor that causes eating disorders in the individual is the individual's primary relatives, namely his family. With the birth of a person, his parents, who are with him at every moment of the world's life, move forward in the individual's life as a part of the individual's whole life and decisions. At this point, the attitude of the parent is important. Overprotective and dominant parents cause the individual to encounter some mental and physical problems in his life. One of the problems faced by individuals with such parents is an eating

disorder—physical and sexual abuse experienced by the individual causes eating disorders in the individual (Kuruoğlu 2000).

SOCIOCULTURAL RISK FACTORS

- The idea that physical appearance is important for success,
- Being ridiculed,
- Media effect,
- Worry about being overweight among peers,
- Society's impositions on beauty,
- The desire to be thin in the group.

As the individual experiences biological changes during adolescence, the process of social acceptance also begins. In this process, the individual also undergoes mental and physical changes with the awareness of aesthetic perception. The perception of beauty imposed by society also affects the individual at this point. The rapid distribution of the modern age through the media affects individuals, especially women. Perceptions of thin waist and weakness in society drag women into a quest. Even if women have normal weight, they think they are not within the specified standards and experience eating disorders. Society's imposition of beauty and its imposition with certain losses through the media cause a spiritual deficiency in women. The woman who enters this process tries to diet but does it without considering the health factors that cause eating disorders. On the other hand, since weakness is an element of beauty, the individual strives to be weak in the group. Being overweight among his peers in the society he is in does not want to be known in this way. The individual thinks being overweight will be a mockery among his peers, changes his diet, and even starts not eating. At this point, an eating disorder encounters.

SYMPTOMS OF EATING DISORDER

- Losing excess weight in a short time
- Doing excessive sports,
- Damages to the skin and mouth area, especially to the teeth
- Major loss of vitamins

- Frequent calorie counting
- Tension and avoidance of eating while eating in social areas
- Stomach ailments caused by vomiting
- A conversation about weight gain and constant weight loss

Due to reasons such as the results of the eating disorder formation process, there are many types of eating disorders in individuals. There are many symptoms that individual experiences depending on the eating disorder. These symptoms vary according to the eating disease and the individual's physical condition. Depending on the eating disorder the individual has experienced, excessive weight loss can observe in a very short time. Individuals who reach a weight below their current weight begin to have problems in terms of health. Individuals with eating disorders start to develop defects in their skin. On the other hand, discomfort occurs in the mouth area and especially in the teeth due to eating disorders. Wounds in the mouth area, problems arise in the teeth. These problems are visible as a result of overeating or the unbalanced nutrition of the individual. As a result of the eating disorder experienced, stomach problems occur in the individual due to vomiting. Individuals experience a large loss of vitamins due to the problems they encounter in their nutrition. Other symptoms of an eating disorder appear when the individual's psychological perception changes. In this process, the individual refrains from eating in social areas. He mostly wants to eat by himself. The individual is also extremely nervous while eating in social spaces. The individual with an eating disorder frequently calculates calories and builds his diet. This approach also causes eating disorders. On the other hand, individuals with eating disorders do excessive exercise. An individual who puts too much stress on his body by doing a lot of sports cannot overcome the anxiety of gaining weight. In the environments he is in, he constantly talks about losing weight. Individuals experiencing such symptoms are getting advice to seek help from a specialist. (npistanbul.com).

In 2013 changed, the diagnostic group for eating disorders in DSM-5. The diagnosis group's name was "Nutrition and Eating Disorders." Describes eating disorders in eight groups such as pica (in children and adults), anorexia nervosa (restrictive type), bulimia nervosa, binge eating disorder, avoidant/restricted food intake disorder, and other unspecified feedings,

withdrawal (rumination) disorders (Yılmaz 2017). As a result of the research, diagnosed more than one type of eating disorder.

FIVE COMMON EATING DISORDERS

- Anorexia nervosa
- Unspecified Eating and Eating Disorder
- Bulimia nervosa
- Binge eating disorder
- Emotional eating disorder.

ANOREXIA NERVOSA

William W. Gull, in 1873 defined anorexia nervosa as 'nervous appetite,' alleged that a loss of appetite caused the disease. This situation continued for many years. The studies identified that the condition is not related to anorexia. The studies determined that the state is unrelated to anorexia (Yücel 2010).

The studies show that the disease is not associated with anorexia. In anorexia nervosa, the patient cooks for his surroundings even if he does not eat and always has recipes in mind. Most of them cook very well and make others eat their prepared food. While the individual can cook well and has an appetite, he has difficulty controlling his weight. He is in a dilemma trying to control his cravings. The symptoms of the disease show themselves at this point. The individual who refuses to eat has some behaviors to reduce his appetite and not gain weight. To overcome this process, the individual tries to induce vomiting to avoid gaining weight after eating. In this case, it causes serious health problems. The individual is also seen in behaviors such as laxative-diuretic use and excessive exercise, apart from making himself vomit. (www.hastanemyanimda.com). Anorexia nervosa is a psychological disorder that affects the mind and body. The individual with the disease is an active life, although he sleeps less and eats less. Anorexia nervosa is a dangerous psychological disorder especially seen in young women. Studies show this disease is 1% in young girls (www.florence.com). Individuals with the disorder primarily go on a diet and make changes in their diet. The individual's primary goal is to be weak; they eat little or do

not eat. For this reason, individuals who have a physically unhealthy body are always cold.

Many environmental and psychological factors cause the disease. The presence of individuals with eating disorders in the individual's environment has triggered the individual to suffer from the condition. During adolescence, the increasing awareness of sexual identity and the confusion at this point is another factor that pushes the disease. On the other hand, situations such as social anxiety of the individual and being admired during the dating process cause the individual to want to lose weight and to lose weight in an unhealthy way. Another factor in getting the disease is that individuals with anorexia nervosa work in areas where their bodies are functional, such as dance, ballet, and gymnastics [10]. The incidence of the disease is higher in women. Women's aesthetic concerns are high, and the media and the general diagnosis of beauty in the female body in society cause eating disorders to be seen more in women. Psychological and physiological symptoms occur during the disease processes experienced by the individual. Stress is one of the situations that cause discomfort because it affects the individual's nutrition. Another factor that causes an eating disorder is encountering traumatic events, changes in the environment in which the individual has lived, or the loss of a loved one (Yücel 2010).

Individuals with anorexia nervosa may also eat too much or too little. As a result, is seen significant weight loss. The individual loses his current weight very quickly and experiences an unhealthy process. In this process, the individual who eats a lot of food tries to make himself vomit after eating. An individual who does not have a regular diet also experiences irregular sleep. Even if the individual is weak during the discomfort process, he is afraid of gaining weight and thinks he is overweight. The individual who thinks he is psychologically fat does not eat and does very heavy exercise. On the other hand, the individual with constant eating is constantly dieting and thinking about his weight. The diet's deterioration affects the individual's health, and the use of other harmful foods occurs in the individual's body. This situation directly affects the psychology of the individual as well. If the individual with anorexia nervosa is a woman, the absence of menstruation for three months is another disease symptom. On the other hand, damage to the skin and hair appears due to insufficient nutrition. Gastrointestinal system disorders such as constipation and

diarrhea have resulted from irregular food in individuals. Due to eating less, eating often, or vomiting after eating, stomach disorders appear. At the same time, teeth damage due to stomach upset (Çelik et al. 2016).

Anorexia nervosa affects the person psychologically and physically. Psychologically, the disease process, which starts with the individual's desire to stay weak, especially in women, leads to physiological problems with nutritional irregularities. The situation that begins with women's fear of gaining weight causes serious health problems in the future. Health problems experienced by the individual in the process of anorexia nervosa are serious and even fatal diseases such as cardiac arrhythmias, electrolyte disorders, osteoporosis, organ damage, hormone balance disorders, and infertility. These health problems cause even disastrous consequences [10].

BULIMIA NERVOSA

The behavioral attitude of bulimia nervosa comes from the past years. Known that the rich people living in the Roman Empire vomited and continued to eat after eating uncontrollably to continue eating. Bulimia, a word meaning discomfort, derives from the origins of bous (ox) and limos (hunger). It means "to be as hungry as an ox or to be hungry enough to eat an ox." (Yücel 2010). One of the eating disorders, bulimia nervosa, is another disorder that causes serious health problems. This disorder appears in a high proportion of young women. Individuals with bulimia nervosa have a lot of anxiety about their body weight. Even if they have a normal weight, they cannot realize this, and they are to overeat and lose weight in a continuous cycle. Individuals cannot resist the urge to eat, and after eating, they try to avoid this situation in an unhealthy way. The use of harmful methods has consequences that threaten the individual's life. There are many symptoms of bulimia nervosa. The individual with constant weight anxiety tries to throw it out as an act of going to the sink or vomiting after eating. In this process, the individual eats more food than normal at one time. After vomiting, stains occur on the teeth due to stomach acid. At this point, health problems such as dental problems and sore throat. It uses various medical drugs in line with its desire to be thin. These drugs harm your health in many ways. As a result of an irregular and healthy diet of the individual, issues and diseases occur in the

digestive system. In these processes, even if the individual is weak, he feels overweight due to discomfort. Another symptom is excessive physical activity or exercise due to extreme anxiety about gaining weight. After these actions, physical health problems of the individual occur (Gürdal 1999).

The process leaves the individual physically and mentally sluggish. The process goes through the individual physically and mentally slow. The disease of bulimia nervosa causes problems in the heart and kidneys in the individual and explains as an important ailment at the point. There are many health problems that individual experiences due to nutritional deficiencies. On the other hand, it damages the organs of the digestive system due to the individual's vomiting after overeating in one go. During the vomiting process, irritation or tears occur in the esophagus. Again, depending on bulimia nervosa, digestive system-related disorders such as stomach disorders, constipation, swelling due to intestinal damage, and reflux occur. Vomiting frequently due to the discomfort experienced by the individual causes fluid loss and electrolyte loss. Electrolytes are calcium, potassium, sodium, and magnesium in the body. The human body has a delicate balance between these electrolytes within the heart's work. The balance between these electrolytes in the body disrupts an unhealthy diet. When this balance is disturbed, weakness occurs in the heart muscle (Keçeli 2006).

The continuation of the process and the progression of the disease can also lead to heart failure. Bulimia greatly affects and damages the circulatory system. It lowers blood pressure and heart rate. The individual's blood vessels get damaged due to the pressure created during the act of vomiting. Bulimia also damages the nervous system of individuals. Discomfort affects the individual psychologically as well as physically. Mental disorders such as depression and anxiety occur in the individual. On the other hand, obsessive and compulsive behaviors occur due to excessive pressure and stress in the disease process. It causes nutritional deficiency due to the individual's unhealthy and unbalanced diet. Due to the lack of nutrients, the hormones do not work as they should, which harms the individual's reproductive system. This process appears as the cessation of menstruation in women (Yücel 2010). Bulimia nervosa, especially in women, is an unhealthy ejection of the individual based on eating attacks. It must come at least once a week and continue for three months to make

the diagnosis. At this point, the nutritional history taken from the individual is important. Although individuals with this disease have standard body measurements, they have weight concerns. On the other hand, obesity during the disease process is considered a negative situation in the progression of the disease. There is more than one treatment process for the treatment of bulimia nervosa. These;

- Psychotherapy sessions, such as cognitive behavioral therapy, including talking and counseling,
- Use of various psychiatric drugs,
- Raising awareness about foodstuffs and nutrition,
- Admit to hospital in the presence of serious and life-threatening symptoms.

BINGE EATING DISORDER / BINGE EATING DISORDER:

Binge eating disorder, another eating disorder, results from the inability of the individual to control the eating attacks. It is a disorder in which the individual consumes a lot of food, and the process repeats although he does not have a physical need. Although its symptoms are similar to Bulimia Nervosa, individuals with this disease have different symptoms from bulimia nervosa. After repetitive binge eating attacks, the individual does not exhibit behaviors that prevent weight gain. The individual is at risk for heart, diabetes, obesity, high blood pressure, and cholesterol due to consuming too much food. In this process, the individual eats more than normal at close intervals. This interval is even once every two hours. To diagnose a binge eating attack, the individual must have some symptoms. The individual who wants to eat cannot prevent himself. He continues to eat uncontrollably (Bahadır, 2013). To diagnose a binge eating attack, the individual must have some symptoms. A binge eating disorder is diagnosed if the individual shows at least three symptoms [13]. The symptoms of binge eating disorder are as follows;

- In this process, the individual eats much faster than normal,
- He eats a lot even though he is not hungry,
- He eats until he feels uncomfortably full,
- The individual is ashamed of not wanting to be seen by the amount of food he eats and therefore eats alone,

- When an eating attack comes, it cannot prevent it and cannot stop how much it eats. There is an uncontrolled and unbalanced diet,
- After eating, the individual feels depressed and guilty,
- These eating attacks must continue for three months and must-see once a week
- In binge eating disorder, the individual does not have behaviors that prevent weight gain, as in anorexia nervosa and bulimia nervosa.

Recent studies have revealed a relationship between binge eating disorder and obesity. Institutions such as the American Dietetic Association and the Adolescent Health Association stated that physicians should get supported in diagnosing and treating eating disorders. In this process, mentioned that the diagnosis and progression of eating disorders would be easier to progress by performing all weight follow-ups and other procedures by physicians.

Also explained is that weight monitoring is important in binge eating disorders and is associated with obesity (Çaka, Çınar and Altınkaynak 2018).

EMOTIONAL EATING DISORDER

An emotional eating disorder; is defined as the situation in which the emotions of the individual experience such as anxiety, joy, and stress very intensely or eats to overcome the lack of such feelings. Although the individual knows he is full in this process, he cannot stop the eating attacks. The individual, who cannot express himself emotionally and cannot speak, tends to eat as an escape from them. In the process of emotional eating disorder, the individual has difficulty controlling his emotions. Another reason for an emotional eating disorder is the eating habits the individual gained in childhood. Being rewarded with food for every success in childhood will tend individuals to eat in case of failure in adulthood. An individual who cannot create a diet plan eats unhealthy. When the individual cannot control his emotions or is stressed, he tends to eat. Stress affects the individual both psychologically and physiologically. Stressed individuals tend to eat sugary and carbohydrate foods due to emotional eating disorders. When individuals with emotional eating disorders want to reward themselves and encounter negative

emotions, they choose to eat to cope with them. Physical and emotional hunger are two different concepts (İnalkaç and Arslantaş 2018). Although the individual with an emotional eating disorder is not physically hungry, he wants to eat based on his emotional hunger. He eats with a sudden appetite when he cannot express himself emotionally. The individual exhibits an attitude that is more prone to filling this sudden hunger in foods that are very dense, sweet, and easy to access, such as fast food. The meals the individual eats due to the sudden feeling of hunger do not create a sense of satiety. A feeling of regret occurs in the individual after the meal he eats. In this process, the individual blames himself, becomes shame, and turns to dining again. And this continues in the life of the individual in a cycle. This cycle also affects the mental state of the individual. Individuals eating after regret causes internal conflicts, deterioration of self-confidence, and difficulty maintaining nutrition programs. The emotional eating disorder causes damage to body image in the individual. The disease has many symptoms. (www.uzmandoktor.net).

These;

- The individual eats very often in short intervals,
- He eats very quickly,
- He eats instead of expressing his feelings such as anger and stress,
- He prefers solitude while eating and eats secretly,
- On the other hand, he eats when he experiences negative emotions,
- There is a state of mental well-being in the individual after eating,
- In short, when the individual encounters negative events, he prefers to eat instead of solving them by talking

Based on the nutritional problem described in an emotional eating disorder, the treatment solution process for changing the diet is specified. At this point, is suggested a healthy diet routine for the individual. At this point, experts explain that keeping a nutrition diary is important to determine the individual's desire to eat. The purpose of this routine is not to lose weight but to overcome the individual's sense of eating related to the emotional eating disorder. In this process, the individual needs to believe in himself and be supported by his environment.

UNSPECIFIED FEEDING OR EATING DISORDERS

Another eating disorder is unclassifiable. These eating disorders are not among other eating disorders. An unclassifiable eating disorder is the most commonly diagnosed and least studied. It does not meet the diagnostic criteria used in specific eating disorders. It does not fit any eating disorder in the diagnosis and classification process (Yılmaz 2017).

OTHER EATING DISORDERS, EXCEPT FOR THE SPECIFIED EATING DISORDERS

PICA

There are many factors and stages in which eating disorders occur. Eating disorders are described as specific to infancy and childhood. One of them is "pica." Pica is common in infancy and childhood. It is the attitude of eating foods that are not suitable for the individual's diet for at least one month. This eating order in which the individual is in is not socially acceptable. In this process, the individual consumes foods that have no nutritional value, and this affects the individual's nutrition. When this disordered and unhealthy eating process causes mental disorders in the individual, it explains a condition that should be investigated clinically, such as schizophrenia. In this process, the individual consumes nutrients such as soil, hair, and paper. Pica is also referred to as an eating disorder in pregnant women. It has food poisoning, infection, and digestive system poisoning in the individual (Kaçar and Hocaoğlu 2019).

RUMINATION DISORDER

Another common eating disorder in infants and children is purging (rumination). It is the situation in which the individual withdraws the food he has eaten for at least one month. In this process, the individual can swallow, chew, or spit out the foods she took back. If mental illnesses accompany withdrawal disorder, it is a disorder that should investigate in the clinical process, such as neurodevelopmental disorder. During the disease process, many discomforts, such as stomach discomfort, occur in the individual. Another eating disorder encountered in individuals is avoidant/restricted food intake disorder. It is an eating disorder caused by the lack of a diet suitable for the individual's developmental level. During

the disease process, the individual observes significant weight loss or cessation of development. The individual is fed with the help of a tube and orally with food support. In this case, it affects the development of the individual spiritually. (www.yasinalaca.com).

AVOIDANT\RESTRICTED EATING DISORDER

Anorexia nervosa and bulimia nervosa is an eating disorder that occurs due to the individual's constant avoidance of food and restrictions on his diet, without weight and body image concerns, which are also important criteria in the disorders. As a result of the disease, the individual loses weight significantly, lacks nutrients, decreases in social and individual activities, and takes nutritional supplements or tube feeding in the later stages of the disease (Karadere and Hocaoglu 2018).

CONCLUSION

Eating disorders affect the individual mentally and physically in many ways. Mental reasons can cause discomfort and seriously threatens the individual's health. The family and society in which the individual lives increase their anxiety level and try to put them into certain patterns. In modern times, with the influence of the media, the condition of being thin is put forward for women to perceive as beautiful. Individuals with low self-confidence and anxiety try to lose weight to be approved by society. In this process, he does unhealthy diets and very heavy exercise. Due to these harmful nutritional processes, the individual experiences psychological and physiological problems. Individual faces many health problems with this inconvenience.

Early diagnosis is very important to reduce the disease's effects and realize the healing process. The immediate environment is important in this disorder, which affects the individual in biological, psychological, and sociocultural dimensions. Evaluating eating disorders and the individual's recovery require the cooperation of the disciplines in this field. Because the treatments are long and difficult, it is important to guide and support individuals correctly. In this process, the participation of the individual's family in this process will positively affect the individual's health.

REFERENCES

1. Annagür, B. B., & Zincir, S. B. (2012). Anoreksiya Nervozada Hormonal Degisimler. *Dusunen Adam*, 25(1), 63.
2. Button B (1990) 11-12 yaşlarındaki kızlarda benlik saygısı: Yeme bozukluklarına karşı savunmasızlık üzerine planlanmış ileriye dönük çalışmadan temel bulgular. *Ergenlik*, 13:407-13.
3. Çaka, S. Y. Çınar, N. & Altınkaynak, S. (2018). Adolesanda Yeme Bozuklukları. *Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi*. 7(1): 203-209.
4. Çelik, S. Yoldaşcan, E. B. Okyay, R. A. & Özenli, Y. (2016). Kadın Üniversite Öğrencilerinde Yeme Bozukluğunun Yaygınlığı ve Etkileyen Etkenler. *Anatolian Journal Of Psychiatry/Anadolu Psikiyatri Dergisi*. 17(1).
5. Erbay, L. G. & Seçkin, Y. (2016). Yeme Bozuklukları. *Güncel Gastroenteroloji*, 20(4): 473-477.
6. Ergüney, F. E. (2012). Yeme Bozukluğu Hastalarında Tedavi Motivasyonu, Beden İmgesi ve Depresyonun Değerlendirilmesi. *T.C. İstanbul Üniversitesi Sosyal Bilimler Enstitüsü Psikoloji Anabilim Dalı Psikoloji Yüksek Lisans Programı, Yüksek Lisans Tezi, İstanbul. Role Of Body Image Dissatisfaction. Journal Of Psychosomatic Research*, 69(6), 573-581.
7. Erol, A.Toprak, G. & Yazici, F. (2002). Üniversite Öğrencisi Kadınlarda Yeme Bozukluğu ve Genel Psikolojik Belirtileri Yordayan Etkenler. *Türk Psikiyatri Dergisi*. 13(1):48-57.
8. Ersoy, G. (1991). Yeme Davranışı Bozuklukları Anoreksia ve Bulimia Nervoz. *Beslenme ve Diyet Dergisi*, 20(1), 95-106.
9. Gürdal, A. (1999). Yeme Bozuklukları ve Tedavisi. *Klinik Psikofarmakoloji Bülteni*. 9(1): 21-27.
10. İnalkaç, S., & Arslantaş, H. (2018). Duygusal Yeme. *Arşiv Kaynak Tarama Dergisi*, 27(1), 70-82.
11. Kaçar, M., & Hocaoğlu, Ç. (2019). Pika, Geri Çıkarma Bozukluğu Nedir? Tanı ve Tedavi Yaklaşımları.

12. Karadere, M. E., ve Hocaoglu, Ç. (2018). Kaçınan/Kısıtlı Yiyecek Alımı Bozukluğu Nedir? Tanı Ve Tedavi Yaklaşımları, Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi.
13. Keçeli, F. (2006). Yeme bozukluğu hastalarında obsesif kompulsif bozukluk ve kişilik bozukluğu. Bakırköy Ruh Sağlığı ve Sinir Hastalıkları Eğitim ve Araştırma Hastanesi Uzmanlık Tezi, İstanbul.
14. Kuruoğlu, A. Ç. (2000). Yeme Bozukluklarında Genetik Etkenler. Klinik Psikoloji Bülteni. S.10. 32-37.
15. Kuşçu, T. Ayaz, A. Y. Ş. E. & Arman, A. Y. Ş. E. (2018). Erken Başlangıçlı Anoreksiya Nervoza Tanılı 8 Yaş Erkek Çocuk: Genetik ve Çevresel Etkinlerin Etkileşimi. Çocuk ve Gençlik Ruh Sağlığı Dergisi. 25(3).
16. Ledoux S, Choquet M, Flament M ve ark. (1991) Seçilmemiş bir Fransız popülasyonunda ergenler arasında yeme bozuklukları. Int J of Eat Disord, 10:81-89.
17. Serin, Y., & Şanlıer, N. (2018). Duygusal Yeme, Besin Alımını Etkileyen Faktörler ve Temel Hemşirelik Yaklaşımları. *Psikiyatri Hemşireliği Dergisi*, 9(2), 135-146.
18. Sönmez, A. Ö. (2017). Çocuk ve Ergenlerde Yeme Bozuklukları. *Psikiyatride Güncel Yaklaşımlar*. 9(3): 301-316.
19. Toker, D. E. & Hocaoglu, Ç. (2009). Yeme Bozuklukları ve Aile Yapısı: Bir Gözden Geçirme. *Düşünen Adam*. 22(1-4):36-42.
20. Turan, Ş., Aksoy Poyraz, C., & Özdemir A. (2015). Tıkınırcasına Yeme Bozukluğu. *Psi Gün Yak*. 7(4), 419-435.
21. Ulaş, B., Uncu, F., ve Üner, S. (2013), Sağlık Yüksekokulu öğrencilerinde sinema Yeme Bozukluğu Sıklığı ve Etkileyen Faktörler, İnönü Üniversitesi Sağlık Bilimleri Dergisi, 2, 15-22.
22. Yaykiran Altınel, Ş. (2018). Kadınlarda Yeme Bozuklukları Belirtilerinin Algılanan Ebeveynlik Biçimleri, Duygu Düzenleme Güçlüğü, Psikolojik İyi Oluş ve Yeme Tutumları ile İlişkileri (Master's Thesis, Maltepe Üniversitesi, Sosyal Bilimler Enstitüsü). Psikoloji Anabilim Dalı, Yüksek Lisans Tezi, İstanbul.

23. Yılmaz, B. (2017). *Bir Grup Lise Öğrencisinin İnternet Kullanımlarının Beden Algıları ve Yeme Tutumları ile İlişkisi* (Master's Thesis, Işık Üniversitesi). Ana Bilim Dalı Psikoloji, Yüksek Lisans Tezi, İstanbul.
24. Yücel, B. (2010). Estetik Bir Kaygıdan Hastalığa Uzanan Yol: Yeme Bozuklukları. İlk Söz. 22(4):39-45.

Internet Resources

25. <https://www.florence.com.tr/yeme-bozukluklari>, (Erişim Tarihi: 20.06.2022).
26. <https://npistanbul.com/eriskin-psikiyatri/yeme-bozuklugu>,(Erişim Tarihi: 20.06.2022).
27. <https://www.hastanemyanimda.com/blog/anoreksiya-nervoza-nedir/30>, (Erişim Tarihi: 20.06.2022).
28. <https://www.uzmandoktor.net/duygusal-yeme-bozuklugu>, (Erişim Tarihi: 20.06.2022).
29. <https://www.yasinalaca.com.tr/gevis-getirme-bzouklugu/>, (Erişim Tarihi: 20.06.2022).