Type 1 diabetes and eating disorders
Eating disorders are a considerable issue for many people living with diabetes. This information resource has been developed for people with type 1 diabetes, their family and friends to explain the different types of eating disorders and why people with type 1 diabetes may have a higher risk of developing an eating disorder. It also provides information about seeking help and further information and support you can find in Australia.
What is an eating disorder?

An eating disorder is a serious mental health issue that involves preoccupation with control over one’s body weight, shape, eating and exercise.

There are four main types of eating disorders.

**Anorexia Nervosa** involves:
- severe restriction of food intake;
- loss of body weight to an unhealthy level;
- in women, loss of menstrual periods; and
- an intense fear of getting fat and losing control of eating.

**Bulimia Nervosa** involves:
- eating binges with large amounts of food, usually secretly;
- attempts to compensate for these binges to avoid weight gain through unhealthy measures such as misuse of laxatives, fluid or diet pills, misusing medications including insulin, self-induced vomiting, excessive exercise and periods of strict dieting.

**Binge Eating Disorder** involves:
- periods of binge eating but without the compensatory behaviour which bulimia nervosa involves such as vomiting or excessive exercise.
- eating excessive amounts of food, often when not hungry, followed by intense feelings of guilt, depression and shame.

**Eating Disorder Not Otherwise Specified (EDNOS):**
- an atypical presentation of an eating disorder that does not fit into the above categories.
- this does not mean that someone experiencing an EDNOS is any less unwell or deserving of help.

All these conditions are serious, and need assistance and attention.
It is not known why people develop eating disorders. They most commonly develop in the adolescent and young adult years and affect more women but also men. Dieting, depression and anxiety are the largest risk factors for developing an eating disorder in adolescence.

An eating disorder is a serious and complex mental health issue related to eating behaviours, body image, body shape and weight. People of all ages and from all backgrounds, including various socio-economic and ethnic groups, can experience eating disorders.
Type 1 diabetes and eating disorders

Managing type 1 diabetes is a complex balancing act that is best supported when you and your diabetes health care team work together. Your diabetes health care team is you, working with your doctor, diabetes educator, dietitian, podiatrist and eye specialist to ensure you live well.

A healthy eating plan is a central part of managing type 1 diabetes, alongside insulin injections or a pump and regular physical activity. This means that a person with diabetes has to focus on their food intake, over a long period of time, which can sometimes lead to a problematic relationship with food and eating.

Research suggests that females with type 1 diabetes are approximately twice as likely to develop an eating disorder or disturbed eating behaviour as their peers without diabetes1.

The most common forms of eating disorders in people with type 1 diabetes are:

**Eating disorders not otherwise specified (EDNOS)**
- a category of disordered eating that does not meet the criteria for a specific eating disorder; and

**Insulin manipulation**
- restricting or skipping insulin to lose weight.

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1 Jones et al. 2000; Mannucci et al., 2005)
What are the effects of disordered eating on diabetes?

Insulin manipulation and other disturbed eating behaviours are strongly associated with poor metabolic control and an increased risk of early diabetes complications.

If I have type 1 diabetes am I at greater risk of an eating disorder?

Anyone living with type 1 diabetes may be at risk of an eating disorder.

Some parts of living with type 1 diabetes that may increase the risk of developing an eating disorder are:

- The dietary counselling and advice involved in diabetes health care can at times focus too much on restricting food intake.
- Feelings of depression, guilt and/or anxiety can be increased by some aspects of diabetes, such as the constant monitoring of blood glucose levels and worry about the long-term complications of diabetes.
- Hypos (low blood glucose levels) need to be treated by eating extra sugar and carbohydrate which can sometimes cause weight gain. As some people find hypos unavoidable if they are to have tighter blood glucose control, this situation can become very complicated. New diabetes management techniques such as insulin pumps, continous glucose monitoring and new insulins allow tighter metabolic control without as many hypos.
- Feeling of loss of control that can come with living with a chronic illness.
Eating disorders have substantial risks for a person living with diabetes. They are associated with many more short and/or long-term health problems associated with diabetes.

- Weight loss can occur with continued high blood glucose levels; however the risk of long-term complications also increases significantly.

- Severe hypos can occur if food is restricted or purged (vomited), especially if this is done secretly, so it can be very difficult to take the appropriate insulin doses in these situations.

- Missing or decreasing insulin doses so that glucose and calories are lost through the urine will lead to high blood glucose levels and may cause Diabetic Ketoacidosis (DKA), a potentially life-threatening condition. High blood glucose levels increase the risk of developing complications including:
  - Feet and eye problems, including amputation
  - Heart and blood problems
  - Erectile dysfunction
  - Nerve damage
  - Kidney damage
Dieting is the single most common risk factor for the onset of an eating disorder, especially in young women.

There are many warning signs of an eating disorder. It is important to seek help if you suspect that you or someone you know may have an eating disorder.

Warning signs of an eating disorder in a person who has diabetes can include:

• Extreme fluctuations in blood glucose levels (frequent high or low)
• Recurrent diabetic ketoacidosis (DKA), possibly resulting in hospital admission
• Consistent extremely high HbA1c (a blood test which measures the overall blood glucose levels over the last two to three months)
• Fluctuating HbA1c
• Missing insulin doses, or changing doses significantly or frequently
• Weight loss without beginning a healthy eating plan or exercise program.

When should an eating disorder be suspected?

The warning signs of an eating disorder can include:

• Unhealthy and excessive preoccupation with body appearance, weight and food
• Periods of dieting and overeating
• Avoidance of social situations involving food
• Anxiety, depression, and social withdrawal
• Change in clothing style or wearing baggy clothes to hide weight loss
• Frequent excuses not to eat or wanting to eat alone
• Playing with food i.e. cutting food in small pieces
• Excessive exercise
• Faintness, dizziness, fatigue, weakness
• Trips to the bathroom after meals
• Vomiting
• Feelings of being out of control with food
• Impaired concentration, alertness, comprehension
• Evidence of binge eating
If you think you may have an eating disorder, it is important to seek help and treatment from a team of health professionals that understand both type 1 diabetes and eating disorders. You may find it challenging at first to find someone to help you who has experience in both areas but there are many places to start.

Health professionals that may be able to help you include a GP and endocrinologist, your diabetes educator, a dietitian, a social worker and other mental health professionals (e.g. counsellor or psychologist). Many hospitals provide services through an eating disorders clinic. Your GP can refer you to a clinic or you can phone your nearest major hospital directly and ask how you can attend an eating disorders clinic.

You may feel that you are able to manage your eating disorder without professional assistance. Seeking professional help is the best way to start to address the problem.

If you are studying at school, your school counsellor or welfare officer will be able to refer you to people who may help. University and TAFE students can access counsellors through your institution. It is important to remember that although counsellors are not experts in diabetes and eating disorders, like your GP, they can help you get the type of help you need, such as professionals who are experienced in managing eating disorders.

Tips on how to communicate with health professionals:

- Remember health professionals are there to help and support you.
- Health professionals can help you manage your weight in a safe and supported way.
- If you are not comfortable speaking to a diabetes health professional you can ask to be referred to a counsellor or mental health professional such as a social worker or psychologist.
What can I do to help my child, partner or friend who has type 1 diabetes and may have an eating disorder?

If you are worried that someone you know with type 1 diabetes could have an eating disorder, encourage them to seek professional help.

State based Eating Disorder Foundations and Diabetes Australia offices welcome enquiries from families, partners and friends as well as people affected by the conditions themselves.
Where can I go for more information?

The NDSS
To help you live well with diabetes contact your NDSS Agent for diabetes information and support services.
1300 136 588
ndss.com.au

MyD
Support for people aged 16 to 25 years living with diabetes.
1300 136 588
ndss.com.au/myd/

Type 1 Diabetes Network
An online forum to share your experiences of life with diabetes and to read other people’s stories.
d1org.au

The Butterfly Foundation
Support for Australians with eating disorders and negative body image issues and their carers.
1800 33 4673
thebutterflyfoundation.org.au

The Eating Disorders Foundation
A non-profit organisation supporting people with eating disorders and those whose lives are affected by eating disorders. Aiming to better inform the community about eating disorders.
1300 550 236
eatingdisorders.org.au

Beyond Blue
An organisation devoted to increasing awareness and understanding of depression in the community.
1300 651 251
beyondblue.org.au

Kids Help Line
A 24 hour telephone counselling service for young people aged 5-18.
1800 551 800

Diabetes Counselling Online
An online weight management programme for people with diabetes. Includes support groups & resources for weight, body image and healthy management of diabetes.
diabetescounselling.com.au

Lifeline Australia
A 24 hour telephone counselling service.
13 11 14
The NDSS provides information and support services to help people self-manage and live well with diabetes. The NDSS also delivers diabetes products at subsidised prices. Registration is free and open to all Australians diagnosed with diabetes.

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For more information on the NDSS visit our website [ndss.com.au](http://ndss.com.au) or call 1300 136 588

Diabetes Australia