Anorexia athletica and the junior high level climber

Dr. Dr.med. Isabelle Schöfffl
Department of pediatrics Klinikum Bamberg
Anorexia athletica

- It is a disorder for athletes who engage in at least in one unhealthy method of weight control
- The pathology is not about body image (anorexia nervosa) but about performance
- Is not recognized as a mental disorder
- Is believed to lead to mental disorders
Anorexia athletica

Wrestling with Weight
Athletes offer a warning call to those seeking success in excessive dieting practices
By Chelsea Hawkins
City on a Hill Press

SozialStiftung Bamberg
HEILEN. WOHLFÜHLEN. BETREUEN.
Clinical development

• There are two possible pathways:
  • Athlete loses weight for a special event and then gains his weight again. Special attention is paid to the fact that a loss of muscle mass due to weight loss is balanced by the weight loss.
Clinical development

• There are two possible pathways:
  • Positive feedback from the new lighter bodyweight lead to ever higher need for controlling this body weight leading to Anorexia nervosa and other psychiatric disorders
Anorexia nervosa

- Eating disorder characterized by immoderate food restriction, inappropriate eating habits, obsession with having a thin figure, irrational fear of weight gain, distorted self perception
- Conflicts in or with the family
- Dependant of the opinion of others (teachers, parents, trainer)
- Often associated with other mental disorders (depression)
Warning signs

- Overtraining
- Strange eating habits with special diets
- Obsession with the competition, loss of fun in the sport
- Self esteem is defined by success (in school and in sports)
- Good students with high level of self discipline
- Mood swings
- Well informed about nutrients and caloric intake
Consequences

- Weight loss
- Osteoporosis
- Stress-fractures
Consequences

• Gastroenterological problems
• Ulcera
• Dental problems when associated with bulimia
• Dehydration
• Renal problems as a consequence of dehydration
Consequences

• Dry hair and dry skin
• Hair loss
• Anaemia with typical symptoms:
  • Tired
  • White skin
  • Dry tongue and lips
• Higher susceptibility to infection
• Depression
Depression

- listlessness

- Missing mood oscillation
Our approach

• A trainer or we suspect anorexia!
  • First an open discussion with parent and athlete
  • Athlete is asked to subject him- or herself to a two day medical examination on our pediatric ward to rule out other causes:
    • Ultrasound abdomen
    • Excessive bloodwork with hormones
    • Psychiatric evaluation
  • When diagnosed:
    • Psychological help from special psychologists
Our approach

• No sport restriction is imposed
• Athlete needs to choose for him-/herself:
  – Full medical workup and help if needed
  – Or immediate end of participation in championship
  – Or leave from participation in championship and return to outdoor climbing or ... 
• After one year the athlete needs to be better (not heavier!). He/she needs to decide how to get there!
No stop from climbing is imposed!!!
Thank you for your attention