



Eating disorders and sport

Participating in sport can be a healthy strategy to improve physical and mental health, social connectedness, and general fun and enjoyment. For some people however, their dedication to sport and exercise can become a major focus in their life to the exclusion of other areas which may increase their risk of developing an eating disorder.

Where people feel under pressure to maintain a certain body composition and physique, for example elite sports professionals or people significantly focused on changing their body weight or size, disordered eating and eating disorders are prevalent.

What are eating disorders?

Eating disorders are psychological illnesses which can lead to serious physical consequences and complications. They are characterised by an unhealthy preoccupation with eating and body weight or shape. Anyone can experience an eating disorder, but they are not always easy to detect. This is because eating disorders are primarily mental illnesses and not indicated by someone's shape and size. Often, a person with an eating disorder will go to great lengths to disguise worrying and dangerous behaviours.

What is disordered eating?

Disordered eating is problematic eating behaviour that fails to meet the clinical diagnosis of an eating disorder. Disordered eating may involve short-term restrictive diets, which progress to chronic energy or nutrient restriction, binge eating, active and passive dehydration, use of laxatives, diuretics, vomiting, and diet pills with or without excessive training [1]. Disordered eating behaviours and dieting are a

common indicators of developing an eating disorder.

Prevalence in athletes

Disordered eating and eating disorders can occur in any person or athlete, in any sport, at any time, crossing boundaries of gender, age, body size, culture, socio-economic background, athletic calibre and ability [2]. The estimated prevalence of disordered eating and/or eating disorders in athletes ranges from 0 – 19% in males and 6 – 45% in females [3]. Overall, there is a higher prevalence of disordered eating and eating disorders in athletes compared to non-athletes [4].

Some sports and activities have a particular focus on body shape, weight or composition. In particular, research shows that people who engage in aesthetic, gravitational and weight-class sports such as weight-lifting, boxing, horse racing, rowing, gymnastics, swimming, figure skating and dance are at higher risk of engaging in disordered eating [5]. The competitive nature of many sports can be a risk, especially when athletes are judged or compared with each other on an individual basis, such as in cycling, athletics, or swimming.

Health and performance consequences

Disordered eating and/or an eating disorder can affect athletes and those playing sports in many ways both physically and mentally. One of the major health risks is developing low energy availability (LEA) and relative energy deficiency in sport (RED-S) which means the person is burning more energy in training activities than they are consuming [2]. RED-S, especially if experienced over

a period of time can negatively impact metabolic rate, menstrual function and bone health [2].

Some other potential consequences of disordered eating and/or eating disorders on athletes include an increased risk of injury, gastrointestinal complications, social isolation, heightened anxiety, unstable mood, reduced ability to cope in high pressure situations and reduced cognitive function/ critical thinking [6]. Any of these could be detrimental to a person's sporting performance capability and impact on their mental and physical health.

Nutrition and excessive exercise

While each person's nutritional requirements are unique, one of the best measures for the energy we require is appetite. This is dependent on an individual's metabolism, activity level, age and a range of other factors.

Research suggests encouraging individuals to consider finding a balanced diet that works for them and that fuels their body appropriately, with the focus on obtaining positive health outcomes rather than kilojoule control [1]. A healthy focus on nutrition and exercise is a great way to find balance and health.

Excessive exercise, which can mean frequency or exercising through injury or fatigue or declining social invitations is a concerning behaviour that may indicate someone has a problem. Excessive exercise is not only unsustainable but can significantly endanger a person's health.

It can be difficult to identify an eating disorder or disordered eating because the dietary and exercise needs for athletes differ from non-athletes, especially at an elite level.

Below compares the difference between an athlete's healthy focus on nutrition and exercise vs. disordered eating.

HEALTHY ATHLETE FOCUS

- Aim is performance enhancement
- Emphasis is on adequate intake rather than restriction
- Likely to revert to normal at end of sporting career Talking to your doctor

DISORDERED EATING AMONG ATHLETES

- Use of potentially harmful weight control measures
- Excessive exercise
- Extreme, restrictive or fad diets

Communication - what should I say?

Before approaching someone about your concerns, it is important to be prepared. Consider the time and place you wish to approach them and choose a place where they will feel comfortable. It is a good idea to inform yourself about eating disorders (many resources can be found at the Eating Disorders Victoria website www.eatingdisorders.org.au) in order to gain a better understanding about why they may be engaging in disordered eating behaviours and ask about the treatment and referral pathways to assist them.

Remember it is not your responsibility to provide ongoing psychological assistance. Be clear about your role and what you can offer.

When communicating with the athlete ensure that you:

- Let them know they are safe talking to you. You are concerned for their welfare and that support is available
- Let them know admission of physical or mental health problems will not jeopardise their participation in the sport, and identify how compromised health may put them at risk of injury

- Use 'I' statements rather than 'you' – this is less threatening
- Encourage the athlete to discuss any pressures they are experiencing as a result of their engagement in the sport and to find ways of managing it proactively
- Try to be considerate, non-threatening, empathetic and non-accusatory
- Focus on behavioural or psychological changes that you have noticed rather than weight, food consumption and appearance
- Don't seek to label or diagnose the person
- Encourage the athlete to manage their nutritional and sporting requirements in a healthy manner
- Remind the athlete of their positive personal qualities outside of their chosen sport, and discuss the benefits of recovery while encouraging seeking professional help
- Consider duty of care requirements
- Refer to relevant organisational policies and procedures if available

What not to say or do

- Don't threaten, bribe or manipulate the athlete
- It is not helpful to ignore the problem and hope that it will go away
- Don't try and convince the person that they are 'not fat'
- Eating disorders are mental illnesses and cannot be resolved with logic
- Try not to take on the role of a therapist or counsellor
- Instead, encourage the athlete to seek professional help. Don't encourage disordered or unhealthy behaviours

Further info and resources

Eating Disorders Victoria -

www.eatingdisorders.org.au
Call 1300 550 236, email edv@eatingdisorders.org.au or drop into the office between 9.30am-4pm, Monday to Friday.

How Far is Too Far –

understanding the risk factors and warning signs related to eating, exercise and body image including specific information for fitness professionals - www.howfaristooofar.org.au

The National Eating Disorders

Collaboration (NEDC) – detailed information and tips including a coach and trainer toolkit. www.nationaleatingdisorders.org/eating-disorders-athletes

Australian Institute of Sport (AIS) –

joint position statement with the NEDC regarding disordered eating and athletes - www.ais.gov.au/disordereating.

References

- Wells K, et al. The Australian Institute of Sport (AIS) and National Eating Disorders Collaboration (NEDC) position statement on disordered eating in high performance sport. 2020
- Mountjoy M, Sundgot-Borgen JK, Burke LM, et al. IOC consensus statement on relative energy deficiency in sport (RED-S): 2018 update. *Br J Sports Med* 2018;52(11):687-97.
- Reardon CL, Hainline B, Aron CM, et al. Mental health in elite athletes: International Olympic Committee consensus statement (2019). *British Journal of Sports Medicine* 2019;53(11):667-99.
- Bratland-Sanda S, Sundgot-Borgen J. Eating disorders in athletes: overview of prevalence, risk factors and recommendations for prevention and treatment. *European Journal of Sport Science* 2013;13(5):499-508.
- Sundgot-Borgen J, Meyer NL, Lohman TG, et al. How to minimise the health risks to athletes who compete in weightsensitive sports review and position statement on behalf of the Ad Hoc Research Working Group on Body Composition, Health and Performance, under the auspices of the IOC Medical Commission. *Br J Sports Med* 2013;47(16):1012-22.
- Bowman D, Carson, Franks, Hecht, Lebrun, Matuszak, Nattiv; Boyajian-O'Neil, Sutton., Female Athlete Issues for the Team Physician: A Consensus Statement—2017 Update. *Medicine & Science in Sports & Exercise* 2018