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Eating disorders are eating disorders not a disease in themselves, but behavioral syndromes that exhibit a wide range of psychological, social and cultural characteristics. They are characterized by serious changes in deceitful behavior and among them we find anorexia nervosa, bulimia of nervousness and obesity. Anorexia nervosa anorexia is a complex disorder manifested by physiological, psychological and behavioral changes. Currently, the term anorexia is wrong, since true anorexia (loss of appetite) usually does not appear until the end of the disease. It is characterized by significant weight loss, usually caused by a voluntary decision to lose weight. This can be achieved by reducing the consumption of high-calorie foods (those that can fatten). Most patients with anorexia end up on a very limited diet; they can also often use drugs to cleanse themselves (laxatives, diuretics) or cause vomiting. Those with anorexia nervosa are severely afraid to gain weight or become obese, and this fear is not lost even if the person loses weight because there is a change in perception of weight and body silhouette. This disorder usually occurs between the ages of 14 and 18. Bulimia bulimia bulimia is an uncontrolled consumption of large amounts of food (drinking) for a short time. Consumption for a short period of time is much greater than most people will eat defined as binge eating. Binge drinking is also accompanied by a sense of lack of control and excitement when docking with food. Those who face this condition have inappropriate compensatory behavior to prevent weight gain, usually causing vomiting. This cleaning method is used by 80 to 90 percent of people with the disease. People with bulimia nervosness place too much emphasis on body weight and silhouette when assessing, and these factors are most important in determining their self-esteem. Obesity Obesity is a chronic disease characterized by excess fatty tissue in the body. An adult is obese when he or she has a body mass index of more than 30. This is calculated by dividing the weight (in kilograms) into a square of height (in meters). The amount of fat tissue (fat) is usually between 10 and 20 percent of body weight. When it increases, the fat cells of the tissue (adiposites) are loaded with an increased fat content in size. In the second stage, the cell can no longer grow, forming new adiposites, being able to Unlimited. The causes of obesity are numerous and include factors such as genetic inheritance; behavior of the nervous, endocrine and metabolic system; and the kind or lifestyle you adopt. The central theme in history was the eternal search for enough food. However, the psychological aspects of specific eating disorders are more related to the manifestations of luxury and abundance than to deprivation. People care more about the taste and atmosphere aspects surrounding the food than about the necessary food intake to survive. Paradoxically, while the hype on food that appears in the media encourages us to try new and better recipes, models and actresses show that thinness is appealing. Such double messages cause great confusion in vulnerable children and adolescents who struggle with identity problems in relation to their body image. The inability to control excess food and maintain thinness often leads to feelings of bewilderment, shame and guilt. Studies in the United States and Europe have shown that 70% of adolescents and young women consider them overweight, even if their weight is normal relative to their size. There are three main eating disorders: obesity, bulimia and anorexia. Of the three, the first is the easiest to differentiate. This is a serious health problem in Argentina, statistics show that at least 20% of the population suffers from its increase, being a pre-positive factor for infection with diseases such as: coronary heart disease, diabetes, high blood pressure, hyperlipidemia. There is evidence that obesity is not controlled in terms of prevention, diagnosis and treatment by a specialized group, which is a clear and visible risk of mortality in both overweight and obese populations. Bulimia is more discouraging, to the extent that it can coexist with obesity or anorexia nervosa, or is present as a whole. In both anorexia and bulimic patients, the disease begins with a search for thinness and eventually leads to a terrible fear of obesity, which determines that one or another disease develops, having food as a means to solve stressful or emotional conflicts. Eating disorders are becoming more common, perhaps stimulated persistently by the perfect silhouette. In our country, the figures are alarming: according to a study conducted by the Argentine Association of Anorexia and Bulimia, 9% of young women suffer from bulimia and 3% they suffer from anorexia. Early detection of the problem leads to early detection of the problem for successful treatment. Although anorexia is evident from weight loss, bulimia often goes unnoticed, and is equally dangerous. For more information you can contact (011) 4815-9015, email info@bace.com.ar, or consult online on: www.bace.com.ar Food has a bordering social relationship function that goes beyond pure nutrition, configured as a complex phenomenon. Cultural aspects celebrate our attitude to food, making our body an element of expression of different meanings. Eating disorders can be created as anorexia nervosa, bulimia or obesity starting in childhood or adolescence, with varying degrees of affectation and severity. Eating disorders have a psychological basis on which people are bound by distortion of body image and are accompanied by a feeling of inefficiency. Weight control becomes a foundation that emphasizes autonomy and personal competence. Patients, especially families, find themselves caught between anger and overprotective, provocation and guilt, violence and despair. Patients with eating disorders may develop restrictive behavior (anorexia) or bulimic behavior at different times in their process. Through their own denial, people with eating disorders become incapable or ineffective in developing a genuine awareness of their needs and desires, more concerned with the experiences of others than their own. In many cases, these photos coexist with depression or anxiety problems. Such is the complexity of the interdisciplinary therapeutic approach, both medical and psychological. Psychologists and psychiatrists psychoafirma provide care to the patient and their family from all sides. The first step is to recognize the problem of eating disorders. After the establishment of therapeutic relationships, the issues of control of altered dietary behavior and the approach of cognitive distortions, values associated with symptomatology, cope with feelings, difficulties in individualization and autonomous functioning, planning periodic follow-up sessions are solved. We are investigating the dynamics of the family to improve intervention. Constant and teamwork, professionals and patients, depends on the success of intervention in the treatment of eating disorders. Ortega y Gasset Psicoafirma in Madrid provides you with an online psychologist with whom you can talk through a virtual clinic. Back to treatment at the Center for Psychological Treatment Thomas we specialize in all kinds of eating disorders. Food Problems It's quite common for the media to talk about anorexia when some models appear exaggeratedly thin on the catwalks. However, it is not the only eating disorder (or eating behavior). Bulimia, binge drinking and obesity are other problems that psychologists help solve. Otherwise, they can have very serious consequences for the physical and emotional health of people with it. Anorexia, bulimia, binge drinking and obesity, Orotexia and Limorexia are not only the result of the importance that body image has acquired in our society. Deeper aspects (psychological and environmental) affect the origin and maintenance of these problems. Food is used as a way to alleviate all negative feelings (anxiety, low self-esteem, insecurity, dissatisfaction, difficulties that we don't know how to solve, etc.) It is therefore necessary for psychological treatment to be addressed in a comprehensive and comprehensive manner, all those factors that, directly or indirectly, are associated with various eating disorders, adapting to the needs of each individual. If you need more information, you can contact the Consuelo Tomas Psychological Center. Nutritional problems include: anorexia, bulimia, binge eating disorders, Ortorexia, Vigorexia, and obesity, which we describe below: Anorexia: It is an eating disorder that makes a person not want to maintain the necessary body weight, depending on their age and size, so they drastically reduce their food intake, getting to fasting (not eating anything), accompanied by excessive exercise. It makes people very thin. However, far from knowing their low weight, they look fat and can resort to purgatory behaviors (self-induced vomiting, excessive use of laxatives and/or diuretics), as well as to the use of all kinds of tablets, weight loss or contractions and anti-cell creams. They become so obsessed with scale that they calculate all the calories they eat, and need to weigh the most to check that they haven't put on a gram and continue to lose weight. The consequences are extremely serious because they can lead to human death due to problems caused by malnutrition. Hair loss, weakness of nails and hair, cold, dry skin, chronic constipation, fatigue, dizziness, anemia, abdominal pain, heart and respiratory rhythm disorders, low blood pressure, loss of potassium, etc. are symptoms that seriously threaten the health of a person who is Anorexia. Bulimia Nervous: Characterized by the presence of a binge-cleaning cycle: large amounts of food gets into binges in a short amount of time, along with a sense of loss of control over what you eat. All this is accompanied by cleansing compensatory behavior, so as not to gain weight and not to eliminate a large number of calories absorbed (causing vomiting, excessive use of laxatives, diuretics, enemas, fasting, excessive exercise...) can be manifestations in general, in front of others, they eat well - unlike anorexia, in which patients do not want to eat or eat very little. However, going to the toilet (brushing your teeth, urinating, washing your hands...), go rest, etc. are manifestations that can alert us to the problem of bulimia, as these weights of these people is normal, although it fluctuates very often. Conducting very strict diets is one of the triggers at the beginning of bulimia. The feeling of hunger, which accompanies a very strict diet, makes people unable to resist the need to eat, but far from eating properly and satisfying hunger properly, they ingest a large amount of all kinds of food (generally, hypercaloric and excessive polyunsaturated fat), resulting in what we call binge eating. After binge drinking or, in other cases, in situations in which abundant nutrition has been done, a person vomits to banish calories, entering a vicious cycle dominated by the frustration of binge eating disorder: It is a problem in which excessive food intake occurs over a short period of time accompanied by a sense of loss of control. People who binge eating disorders can't stop eating or can't control what and how much they eat. Unlike bulimia, it is not accompanied by brushing behaviors such as vomiting. Food can be used to alleviate a condition in which a person feels anxious, irritated, sad, bored, etc. however, after sticking a drink, he feels worse, emphasizing negative feelings even more, entering the circle from which he is difficult to escape without psychological treatment. A treatment that will help you manage yourself and deal with the emotional situations underlying the problem. Obesity, as a result of binge eating, causes health problems to increase both physically (hypertension, difficulty moving ...), and emotional (dissatisfaction with your body, low self-esteem, difficulties with others, etc.). Obesity: Obesity and/or overweight problems are increasingly affecting a greater number of people of both sexes and different ages. Let's think that every time, in developed societies, the percentage of children who are obese and/or overweight is increasing. Obesity is a serious problem because it jeopardizes our physical health (hypertension, mobility problems, heart problems...), psychological health (it makes us feel bad about ourselves, reduces our self-esteem...) and jeopardizes our relationships (discussions with family without following a diet or weight loss, not being able to practice certain sports, insecurity when it comes to meeting people, etc.). In general, obesity is due to excessive consumption of food, which is not burned (reducing calories). The causes, in adults and children, are numerous and reinforce each other. Among other things, they include: - Physical and/or genetic causes: high production of cortisol (Cushing syndrome), thyroid problems, hormonal problems, metabolic problems, taking some medicineetc. - Psychological reasons: use food as a way to alleviate unpleasant negative states (anxiety, depression, boredom ...), suffering from binge eating disorders, having poor body image and low self-esteem, dissatisfaction with those that not having what you want (partner, friends ...), punishing yourself if something goes wrong ... - Environmental reasons: sedentary lifestyle (lack of physical activity), spending a lot of time in front of THE TV and computers, abusing junk food (industrial pastries, burgers, pre-cooked ...), carrying inadequate food (e.g., skipping meals, very restrictive diets that increase the feeling of hunger, eat between food). Treatment focuses on both the person to control what they eat, and psychotherapeutic work for aspects or reasons that are related to the problem, according to each person's needs. Ortorexia: This problem is characterized by people who have it, they have an extreme need for their diet to be healthy. They eat only healthy (environmental) foods, being unable to eat anything else they consider harmful (products with dyes or preservatives, fats, foods grown with pesticides or herbicides prepared in which their processing process is not, being unable to eat products with dyes cooked in dishes containing certain materials, etc.). This leads them to spend many hours thinking about their diet or getting information about properties, and processing food, avoiding eating away from home or with friends and family. If they skip an exceptionally healthy diet, they feel guilty and anxious. Vigorexia: This is an exercise addiction to 10 bodies. This disorder has been included in the eating disorders section because people with energy, in order to increase muscle mass, exaggerated the intake of proteins and carbohydrates, to the detriment of other types of necessary products, along with the use of anabolics. Anorexia-Bulimia-Atrakons-Obesity-Orthorexia Consuelo Tomas Benlloch, Consuelo Tomas Tratamientos psicológicos es treatment Valencia psychological Valencia obesidad anorexia y bulimia pdf. trastornos alimenticios obesidad anorexia y bulimia. sobrepeso obesidad anorexia y bulimia. conclusion de obesidad anorexia y bulimia. anuncios de obesidad anorexia y bulimia. que es la obesidad anorexia y bulimia. cuadro comparativo de obesidad anorexia y bulimia. imagenes de obesidad anorexia y bulimia

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