

CHRONIC EATING DISORDERS IN CHILDREN

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Abstract: The prevalence of chronic eating disorders in children has become a pressing issue that warrants immediate attention from parents, educators, and healthcare professionals. Eating disorders, such as anorexia nervosa, bulimia nervosa, and binge eating disorder, were once considered to be the domain of adolescents and young adults. However, in recent years, there has been a disturbing trend of younger children being affected by these conditions. This article will examine the causes, consequences, and potential solutions to chronic eating disorders in children, highlighting the need for a comprehensive approach to address this complex issue.

Keywords: adults, eating issues, different methods, studies, environmental factors

Introduction: Eating issues are complicated ailments associated to peculiar ingesting behaviors that can have an effect on the biopsychosocial fitness and functioning of the affected individuals. Most ingesting issues contain an obsessive focal point on physique image, physique weight and food, main too risky consuming patterns that have deleterious consequences on the younger person's nutrition, boom and development. Other kinds of ingesting issues can also now not always center round physique picture concerns, however can additionally contain behaviors that hinder weight gain, or contain a compulsive pressure to pursue fitness and fitness. The greater frequent kind of consuming problems that may also current to a regular practitioner or pediatrician consist of anorexia nervosa (AN) and bulimia nervosa (BN), each of which can lead to scientific issues related with malnutrition or purging. Features of AN encompass a good sized restrict of consumption relative to each day necessities and presence of physique picture disturbance with undue have an impact on of physique weight/shape on self-evaluation. BN in a similar fashion stem from obsessive issues over physique structure and weight however is uncommon from AN with the aid of the presence of binge consuming and recurrent compensatory behavior to stop weight gain, such as purging and the use of laxatives or diuretics. It is necessary to observe that humans with ingesting problems do no longer always have a low weight or physique mass index (BMI).

While it is developmentally ordinary for teenagers to increase an improved activity in their look and physique image, sizeable weight loss or overly restrictive dietary habits are no longer an everyday segment of adolescence, and teens exhibiting such behavior have to be evaluated for serious stipulations such as a consuming disorder.

In our neighborhood context, many sufferers with ingesting problems might also now not existing with issues of weight loss or particularly for comparison of an ingesting disorder, however can also alternatively current with bodily manifestations and issues of malnutrition such as bloating, stomach pain, early satiety, constipation, giddiness, secondary amenorrhea and low mood.

Eating issues are serious ailments and have the perfect mortality price amongst all psychiatric disorders, with mortality stemming from each the bodily and psychiatric complication. Eating issues are underdiagnosed and undertreated, as most affected sufferers have bad perception and deny the severity of their illness. The foremost care health practitioner is uniquely located to notice the warning signs and symptoms of early ingesting disorders, as teens in many instances current to predominant care for worries or issues ensuing from ingesting disorders. Early identification and prognosis of ingesting issues via most important care docs is critical, as well-timed intervention is related with a greater possibility of profitable treatment. Studies have proven that early intervention is related with greater fees of recovery.

Studies have determined that lady gender, concurrent psychiatric issues such as temper and nervousness disorders, and premorbid perfectionistic persona characteristics are threat elements for growing ingesting disorders. A household records of a shut relative with a consuming ailment or psychiatric sickness has additionally been observed to be related with a greater hazard of growing an ingesting disorder. It is essential to notice that ingesting issues can additionally manifest in humans with no good-sized hazard elements and in males. In males, physique picture worries may also contain fitness, muscularity, and enticing in muscle-enhancing behaviors such as ingesting greater or in a different way or taking dietary supplements to construct muscles.

One of the primary causes of chronic eating disorders in children is the rise of societal pressures and unrealistic beauty standards. The media's portrayal of ideal body shapes and sizes has created a culture of body dissatisfaction, where children as young as six or seven years old feel the need to conform to these unattainable standards. Moreover, the proliferation of social media has exacerbated this issue, with children constantly bombarded with images of peers and celebrities who embody these ideals. This can lead to a distorted body image, low self-esteem, and a preoccupation with weight and appearance, ultimately paving the way for the development of eating disorders. Another significant factor contributing to the rise of chronic eating disorders in children is family dynamics and parental influence. Children learn by observing and imitating their caregivers, and if they witness unhealthy eating habits or negative body image at home, they are more likely to adopt these behaviors themselves. Furthermore, parents who are overly critical or perfectionistic can inadvertently contribute to their child's body dissatisfaction and low self-esteem, increasing the risk of developing an eating disorder.

In addition to these psychological and environmental factors, there is a growing body of research suggesting that genetic predisposition may also play a role in the development of eating disorders in children. Studies have identified several genetic markers that may increase an individual's susceptibility to eating disorders, highlighting the need for early identification and intervention.

The consequences of chronic eating disorders in children are far-reaching and devastating. These conditions can lead to a range of physical health problems, including malnutrition, electrolyte imbalances, and even organ failure. Furthermore, eating disorders can have a profound impact on a child's emotional and psychological well-being, resulting in anxiety, depression, and social withdrawal. Perhaps most alarming is the long-term impact of eating disorders on a child's development and future health. Children who suffer from eating

disorders are more likely to experience growth retardation, bone loss, and menstrual irregularities, which can have lasting effects on their physical and reproductive health. Moreover, eating disorders can perpetuate a cycle of disordered eating patterns, making it challenging for individuals to maintain a healthy relationship with food and their bodies throughout their lives. In light of these findings, it is imperative that parents, educators, and healthcare professionals work together to develop a comprehensive approach to address chronic eating disorders in children. Firstly, parents must be educated on the warning signs of eating disorders and encouraged to promote healthy eating habits and body positivity in the home environment. This can be achieved through workshops, support groups, and online resources that provide parents with the necessary tools and knowledge to support their children. Schools also have a critical role to play in addressing chronic eating disorders in children. Educators can incorporate body positivity and self-esteem promotion into the curriculum, providing children with a safe and supportive environment to discuss their feelings and concerns. Additionally, schools can offer healthy eating options and promote physical activity, helping to foster a positive relationship between food, exercise, and overall well-being.

Healthcare professionals must also be trained to identify the early warning signs of eating disorders and provide timely and appropriate interventions. This may involve working with multidisciplinary teams, including psychologists, dietitians, and pediatricians, to develop personalized treatment plans that address the physical, emotional, and psychological needs of children with eating disorders.

Conclusion: In conclusion, chronic eating disorders in children are a pressing concern that requires immediate attention from all stakeholders. The causes of these conditions are complex and multifaceted, involving societal pressures, family dynamics, and genetic predisposition. The consequences of eating disorders are far-reaching and devastating, affecting a child's physical, emotional, and psychological well-being. However, by working together, we can develop a comprehensive approach to address this issue, promoting healthy eating habits, body positivity, and self-esteem in children. It is our collective responsibility to ensure that future generations grow up with a positive and healthy relationship with food and their bodies.

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