

Sports Medicine Monthly

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COMMON MEDICAL ILLNESSES IN ATHLETICS: EATING DISORDERS



People who suffer with addictions or compulsive behaviors often suffer in silence. They look back on a history of personal challenges and they are frequently reminded of subsequent failures in their attempt to overcome a pressure or an addiction.

Whether these self-portrayed insufficiencies come as a result of an addiction or as a result of a misaligned self-image, the reminders in one's mind of how many times they have failed usually doesn't drive a person to seek assistance. Most often, it drives them to silence.

As a coach or parent, such silence on the team or in the household leaves the impression that all is well. It provides for a false confidence that our kids and athletes are successfully handling the day-to-day aspects of being a teenager or a young adult. Don't believe it. Without any accurate and self-respecting feedback from parents and coaches on a regular basis about what a healthy body image and lifestyle really are, managing the constant barrage of skinny jeans and/or the required weight loss that comes with athletics can seem a daunting task for an athlete who is attempting to build their own self-image. As a result, the presence of almost any such inner conflict is usually first reflected by an outer silence.

If you believe that you or a person whom you know is suffering from an eating disorder, talk to a parent or a well-respected school administrator or coach. Also realize that you are not alone and help truly is just a phone call away.

National Eating Disorders Association
Toll Free Confidential Hotline:
(800) 931-2237

How a Coach can help their athletes?

Usually the biggest help that one person can give another, regardless of the situation, is simply to be a good listener and choose not to be judgmental. Always keep in mind that the person who is challenged by an eating disorder is almost always severely judgmental on themselves; they don't need any more. Where they do need help and where a coach or a parent can be exceedingly proactive and helpful are outlined in the following.



PREVENTION:

#1. Accuracy

Provide your athletes with accurate information regarding their own weight management, body composition, appropriate weight loss techniques, and success stories for effective management.

#2. Education

Address body fat and weight management issues head on and consistently provide your athletes with accurate information on body image. For example:

- A. The average college-aged female has between 20-25% body fat. The average college-aged male has between 12-15% body fat.
- B. Under-eating to lose weight almost always affects performance negatively because of muscle and water loss.
- C. Consistent dieting is not normal behavior for an adolescent who has a developing body; male or female.

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How a Coach can help... ...continued from page 1

#3. Listen

The more an athlete believes that your number one priority is the person and not their performance, the more likely they will talk.

#4. Monitor Diet, Weight, and Percent Body Fat

Checkups are a great way to demonstrate your commitment to your athlete's overall health as well as to their performance. The two cannot be separated. Much like academic grade checks, when you monitor for excellence you reduce the likelihood for concerns before they ever start.

TREATMENT:

#1. Education

The first treatment intervention occurs before the season ever starts. Educate yourself on warning signs, training regiments, and meal planning for your respective sport.

National Eating Disorder Association Coach & Athletic Trainer Toolkit

<https://www.nationaleatingdisorders.org/coach-trainer>

#2. Intervention Planning

Build yourself a network of support personnel who are ready to assist any athlete at a moment's notice, and keep in mind that there can be a number of legal issues that surround individuals and eating disorders. Therefore your support network should include school counselors, administrators, & nurses, as well as your athletic trainer and team physician, etc...

#3. Be Supportive and Act Swiftly

If you suspect an athlete of an eating disorder, go into action immediately. The faster that counseling, treatment, and assistance is put forth, the greater the likelihood of a successful recovery. Usually eating disorders start out based in minor inaccuracies on what a healthy life really is and what is accurately required of one's sport. Addressing inaccuracies quickly and often helps tremendously to prevent small discrepancies from becoming long-term complications.

Males and Females by the Numbers

Males:

-In a 2009 study by the NCAA, 7% of all athletes who reported having an eating disorder were male.



-Males are more likely to modify their eating habits for muscle gain rather than weight loss.

-Males very commonly have a greater sense of shame, and, therefore, it may be best to address the issue without using the phrase "eating disorder."

Females:

-Body fat percentages below 20 can begin to affect the menstruation cycle and can even stop it completely. The cycle should be regular and it should begin no later than 16 years of age.



-Excessive dieting in females is decimating to bone density and greatly increases the likelihood for injuries such as stress fractures in sports like cross country, track soccer, and basketball.

-Among U.S. females in their teens and 20's, the prevalence of clinical anorexia may be as high as 15%.

A Note to the Reader.....

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