



DiabetesSisters is honored to work with a wide variety of organizations, companies, institutions, health systems, government agencies, diabetes bloggers, and online communities serving people with diabetes in order to reach more women with diabetes with our messages of healthy living and positive peer support. We are grateful for the support of the organizations that have supported the creation and distribution of this brochure.

The creation of this educational piece was a result of collaboration among AstraZenca, BI, Center for Hope of the Sierras, Dexcom, The Leona M. and Harry B. Helmsley Charitable Trust, Lilly, and Regeneron.













# No Woman Should Walk Alone in her Diabetes Journey

More than 15 million women in the U.S. and 181 million women worldwide are currently living with diabetes. They quietly face unique challenges every day such as fluctuating blood sugars due to pregnancy, menses, and menopause. For reasons not fully understood, women with diabetes also face increased health risks with heart disease, depression, eating disorders, osteoporosis, and ketoacidosis. And they also report higher levels of loneliness and isolation.



# **Our Mission**

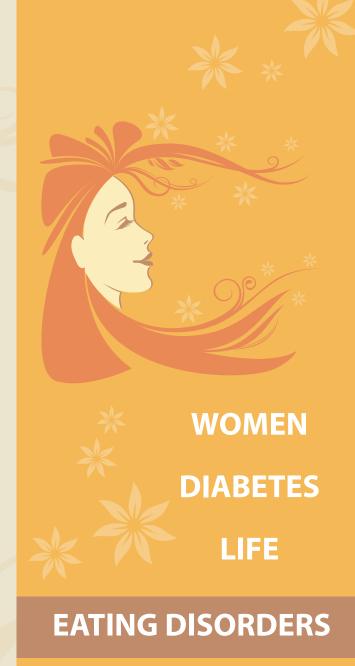
To improve the health and quality of life of women with, and at risk for, diabetes and to advocate on their behalf.

## **Our Vision**

A world where women are fully empowered to effectively manage their diabetes.



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# **Eating Disorders**

Eating disorders are more common among women living with diabetes than their peers without diabetes. Although good diabetes management requires attention to numbers, food choices, and weight monitoring, many of the behaviors of those with diabetes can develop into the behaviors of an individual with an eating disorder, thus setting up an individual who has diabetes to also develop an eating disorder. Furthermore, for those who struggle emotionally with a diabetes diagnosis, an eating disorder can serve as a coping mechanism and way to regain a sense of control, albeit a dangerous one.

Eating disorders have the highest mortality rate of any mental health disorder. A combination of under-managed diabetes and an eating disorder increases the risk of long-term complications or even death when not treated swiftly and appropriately.

**Diabulimia**, also known as ED-DMT1, refers to a condition in which people who suffer from type 1 diabetes intentionally administer less insulin than they need as a means of controlling their weight. It is an eating disorder unique to type 1 diabetes and unfortunately is relatively common among this population, with up to 40% of women with type 1 diabetes reporting also having some type of eating disorder.

### **Symptoms of Diabulimia**

- Hyperglycemia symptoms such as exhaustion, confusion, frequent urination, extreme thirst
- An HbA1c value much higher than would be expected
- Changes in eating habits or unusual eating patterns
- Eating more but losing weight
- Binge eating, especially on carbohydrates
- "Forgetting" to dose insulin
- · Less frequent blood glucose monitoring
- Increased desire for privacy in diabetes-care behavior
- Missing appointments with medical team
- Early onset or rapid progression of diabetes complications, such as blurry vision, neuropathy, irregular/absent menses, and gastroparesis.

The health consequences of diabulimia can be severe. These consequences can include the early onset or rapid progression of diabetes complications such as blurry vision, neuropathy, irregular/absent menses, gastroparesis, gum disease, heart attack and infertility. There is also the possibility of death.

**Binge Eating Disorder (BED)**, is characterized by eating far more food than normal and feeling that one's eating is out of control. BED affects women slightly more than men, and most who experience it can have normal or heavier than average weight.

### **Symptions of BED**

- Frequent episodes of consuming large amounts of food without accompanying behaviors to prevent weight gain, such as food restriction, over-exercise, laxative abuse, or vomiting
- Feeling of loss of control during binge eating episodes
- Feeling of shame or guilt regarding eating episodes
- Indications that eating is out of control, including eating when not hungry, eating to the point of discomfort, or eating alone due to shame

The health consequences of BED can vary and are linked to weight gain, including high blood pressure, high cholesterol levels, heart disease, and type 2 diabetes.

orthorexia Nervosa (Orthorexia), is characterized as an obsession with eating foods one considers healthy. Those who experience it systematically avoid specific foods and food groups in the belief that they are harmful. This behavior can result in not getting necessary nutrients because of dietary rules based on avoiding "bad" foods. The focus is not necessarily on losing weight, rather on purity and achieving a "perfect" diet. These behaviors are accompanied by obsessive thoughts and an association between dietary and moral perfection.



- Fixation on eating foods that give feelings of being pure and healthy
- Omission of numerousfoods and food groups
- Drastic reduction in numbers of acceptable food choices

The health consequences of orthorexia may include loss of enough weight to lower one's body mass index to less than 18.5. Malnutrition can result as well, and in some cases, orthorexia causes cardiac complications or even death.

Even in less severe cases, the mental fixation on diet can obstruct an individual's ability to engage in previously normal life activities, such as eating in restaurants and socializing.

#### **Treatment for Women with Diabetes**

The treatment for eating disorders coupled with diabetes requires a plan to provide both medical and mental health treatments to avoid short and long-term complications. Treatment should focus on improving self-confidence and self-image, managing diabetes in a healthy manner, and acquiring skills needed to live healthy lives while managing a chronic disease.

#### Resources

Center for Hope of the Sierras: www centerforhopeofthesierras.com

**Diabetics with Eating Disorders:** www.diabeticswitheatingdisorders.org.uk

Diabulimia Helpline: www.diabulimiahelpline.org

**Duke Medicine:** www.dukemedicine.org/treatments/psychiatry/eating-disorders

**University of North Carolina at Chapel Hill Center of Excellent for Eating Disorders:** www.med.unc.edu/pysh/eatingdisorders/patient-care-1

We Are Diabetes: www.wearediabetes.org



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