

Weight loss in the older adult: could it be anorexia nervosa?

A literature review

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Background

Anorexia nervosa is predominantly a disorder of young women and much of the guidelines and known literature focusses on this group. However, men and women above 50 years of age do present to eating disorder services and there is currently no clear consensus on how these cases should be treated.

Aims and Hypothesis

This was an exploratory project to describe the extent of the current literature concerned with anorexia nervosa in older adults, in order to formulate what further research is required.

Methods

PubMed was searched for any articles referencing the diagnosis or treatment of adults with anorexia nervosa aged 65 years or over. Given the dearth of appropriate articles, the search was expanded to include any reference to 'older adults' and the final form of the literature review was adapted to include what literature was available.

Results - a broad view

There were no papers identifying the prevalence of anorexia nervosa diagnosis in a population of adults over 65. There are a small, but significant, number of case studies focussing on new presentations of anorexia nervosa in adults aged 65 and over and describing pertinent factors. There are papers attempting to describe the phenomenology of this group, from both a psychiatric and psychodynamic perspective.

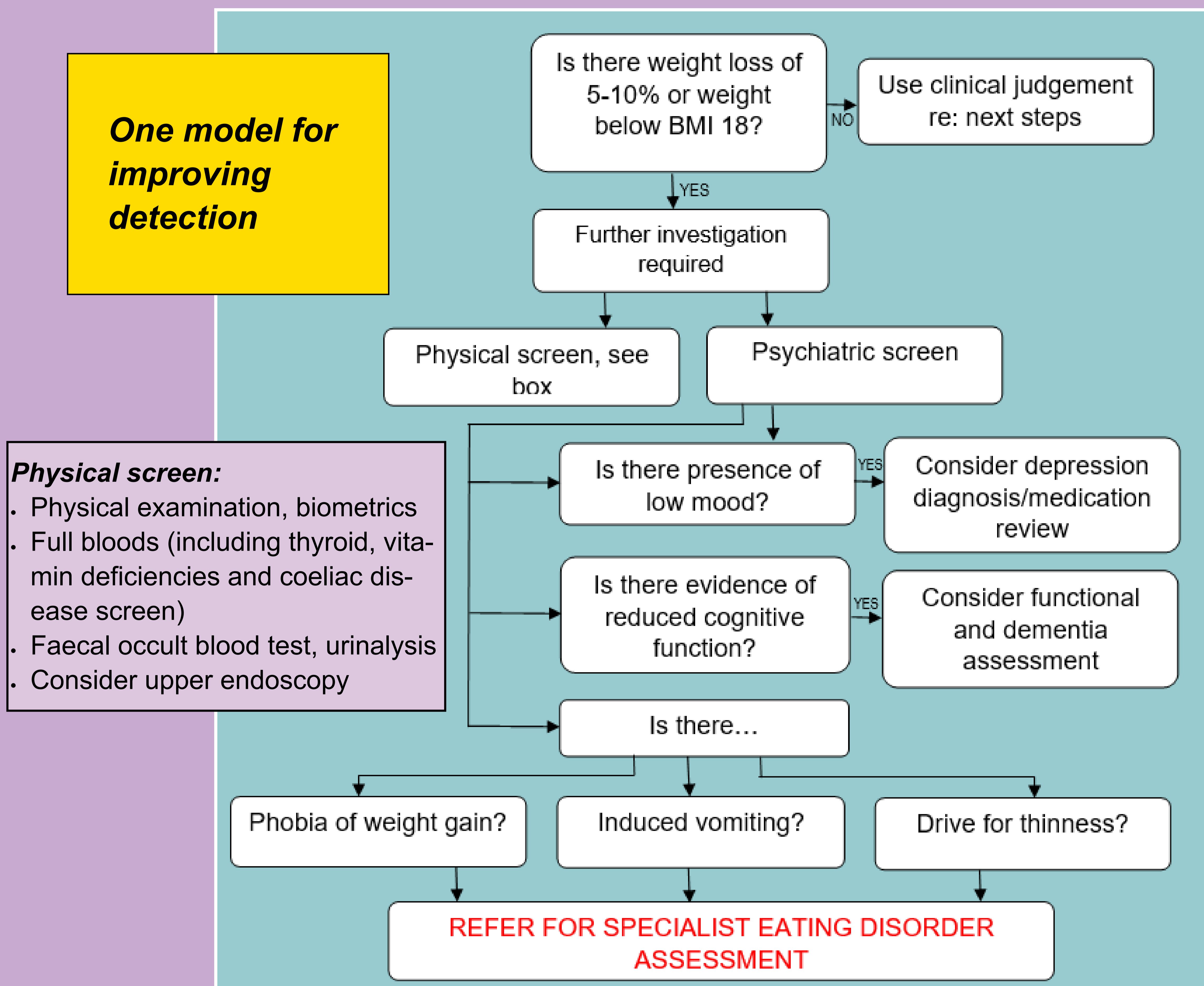
Conclusions

Anorexia nervosa in older adults is a small but important topic, largely not researched. Whilst there is evidence that anorexia nervosa does occur in older adults, and carries a significant morbidity and mortality, there have been few attempts (to our knowledge) to quantify the magnitude of the issue or offer suggestions for tailored treatments.

Prevalence of anorexia nervosa in later life

- ♀ In a community sample of women 2.6% (50-64y) and 1.8% (65+) showed symptoms of disordered eating¹. The majority of presentations in later life are anorexia nervosa (80%), followed by bulimia nervosa (10%).
- ♂ An outpatient study of elderly underweight men found 11-19% had abnormal eating attitudes or body image². Late-onset eating disorder is more common (69%) than an enduring condition.
- New presentations after 45y are more common in men³. Most common comorbidity: depression (46%), anxiety disorders (31%), alcohol dependency (19%), personality disorders (19%)⁴.

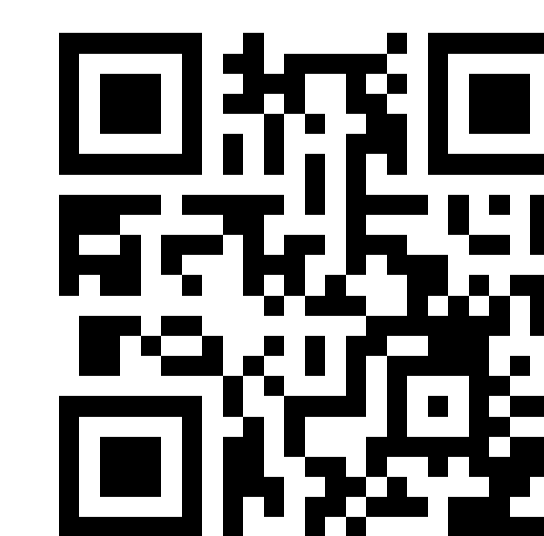
One model for improving detection



Morbidity & mortality

The most frequent complication is bowel dysfunction; the most disabling, osteoporosis +/- associated fractures⁴. The greatest frequency of AN-related deaths occur aged 45y and over (78.6%); the highest risk of death is aged 15-34y⁴.

All-cause mortality is estimated at 20%⁵.



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References

- Gadalla TM. Eating disorders and associated psychiatric comorbidity in elderly Canadian women. Archives of Women's Mental Health. 2008 Sep 13;11(5-6):357-62.
- Miller DK, Morley JE, Rubenstein LZ, Pietruszka FM. Abnormal Eating Attitudes and Body Image in Older Undernourished Individuals. Journal of the American Geriatrics Society. 1991 May;39(5):462-6.
- Hewitt PL, Coren S, Steel GD. Death from anorexia nervosa: Age span and sex differences. Aging & Mental Health. 2001 Feb;5(1):41-6
- Hewitt PL, Coren S, Steel GD. Death from anorexia nervosa: Age span and sex differences. Aging & Mental Health. 2001 Feb;5(1):41-6
- Lapid MI, Prom MC, Burton MC, McAlpine DE, Sutor B, Rummans T. Eating disorders in the elderly. International Psychogeriatrics. 2010 Feb 22;22(4):523-36.