Eating disorders are serious, potentially life threatening mental illnesses. A person with an eating disorder has not made a ‘lifestyle choice’, they are actually very unwell and need help.

While eating disorders are often portrayed as illnesses that only affect females, large population studies suggest that up to a quarter of people suffering with Anorexia Nervosa or Bulimia Nervosa are male, and almost an equal number of males and females suffer with Binge Eating Disorder. We also know that under-diagnosis and cultural stigma mean that the actual proportion of males with eating disorders could be much higher.

Eating disorders can develop at any age but males and females are most at risk for Anorexia Nervosa and Bulimia Nervosa in their late teens/early twenties, while Binge Eating Disorder is more prevalent in a person in their mid-twenties.

Body dissatisfaction

Rates of body dissatisfaction in males are rapidly approaching that of females. For males, body dissatisfaction is more commonly manifested as the pursuit of a muscular, lean physique rather than a lower body weight.

Male athletes have an increased vulnerability to eating disorders, particularly those in sports with a greater emphasis on weight classes and aesthetic ideals such as weight lifters, wrestlers, gymnasts, dancers, jockeys and body builders. For some males, heightened concerns about muscularity may become part of an eating disorder, characterised by distorted perceptions about muscle bulk, and/or distorted eating and exercise patterns.

What are the risks for males?

Most of the common known risk factors for eating disorders apply to males and females (e.g. perfectionism, bullying, dieting, trauma, childhood obesity). Sociocultural influences play a role in the development of eating disorders and males are exposed to unique cultural messages that can increase their vulnerability towards developing an eating disorder. These include:

- Males should only have one body type - the ideal physical body shape for men is now more prescribed with lean, muscular body types in fashion to the exclusion of other male body types
- You are what you look like - males are more at risk if they confute having a ‘perfect body’ with success in other areas such as dating, getting a good job, and social desirability
- Males need to be in control – males can be expected to ‘take charge’ and be ‘in control’. When coping with particular issues beyond their control, males can sometimes displace these anxieties onto their bodies, manifesting in control over the body through excessive exercise and dieting

What are the warning signs of eating disorders in males?

Being aware about eating disorders and acting on the warning signs by seeking help immediately can have a marked influence on their severity and duration. However, the nature of an eating disorder means that the signs might be discreet, and there may be ambivalence about seeking help.

There are physical, psychological and behavioural warning signs that can signal the onset or the presence of an eating disorder in a male or a female but these are some warning signs that are more likely to occur in males:

- Preoccupation with body building, weight lifting or muscle toning
- Exercising when sick or injured
- Lowered testosterone
- Anxiety/stress over missing workouts
- Muscular weakness
- Decreased interest in sex, or fears around sex
- Possible conflict over gender identity or sexual orientation
- Using anabolic steroids

Our socio-cultural influences mean that over-exercising and the extreme pursuit of muscle growth are frequently seen as healthy behaviours for males and can even be actively encouraged. The truth is that these activities can indicate a significant disorder and lead to severe physical health problems.

Is it possible for a male to recover from an eating disorder?

Yes. It is possible for males to recover from eating disorders. Evidence shows that the sooner someone starts treatment for an eating disorder, the shorter the recovery process. Unfortunately, it is not uncommon for males to go untreated longer and to receive less professional care than females.

Commonly males only seek treatment or receive a correct medical diagnosis when symptoms become severe and few services are designed to meet the specific needs of males with eating disorders. The stigma associated with having a ‘female disease’ also contributes to a delay in seeking help.

Getting help

If you suspect that you or someone you know, male or female, has an eating disorder, it is important to seek help immediately. Your GP is a good ‘first base’ and can refer you to a practitioner with specialised knowledge in eating disorders.

To find help in your local area go to www.nedc.com.au/helplines