

## **Body Dysmorphic Disorder (Dysmorphobia) and Anorexia Nervosa**

**Prof. Mahmood Hasan**

(MBBS, FCPS, FIPS)

Head of the dept of Psychiatry  
Bangladesh Medical College Hospital.

Anorexia Nervosa is frequently associated with neurotic trends and symptoms. This case study reveals the association and symptomatology and management is described. Role of family in maintaining the problems, use of external cues to control behavior overvalued, preoccupation with somatic ideas are also discussed. Anorexia Nervosa occurs along side a variety of neurotic symptoms. These include obsession, neuroticism introversion and depression. After recovery of weight and menstruation neurotic symptoms and social difficulties remain. **Anorexics over estimate there body size compared to normal.** Preoccupation with body image and food may become an overvalued idea, sometimes leading to delusion.

A 18 year old school going girl was referred to a tertiary care hospital for overdose of Benzodiazepines (25mg) three days back. Assessment was done and she was recovered fully. She claimed that she took roughly 120 calories per day. She did not induce vomiting and use laxatives for her weight loss. She was of average Bangladeshi height and low weight. She was unmarried. She reported being highly preoccupied with her physical appearance. Her aim was to appear slim and she considered herself as too broad. She was treated with Tab. Imipramine (50mg), which is a Tricyclic antidepressant; along with Behavior Therapy and CBT. Following the discharge after one week, family therapy was done. She regained her normal weight. Family therapy was done because she depends on external cues in relation to food. The patient sought reassurance regarding her appearance and was highly preoccupied especially with social situations. So social anxiety sometimes commonly associated with anorexia nervosa as we see in this case.

Family members should be taught not to reassure her regarding her body image. We should not also forget to explain regarding the secondary gain of this girl as many of her boyfriends came to visit her. The girl was preoccupied with her body image but not up to the level of delusion. In conclusion we see that management of Anorexia Nervosa should be carried out by drug treatment, individual psychotherapy and family therapy.