

# Do I Look Fat to You?

EATING DISORDERS AREN'T JUST FOR GIRLS ANYMORE

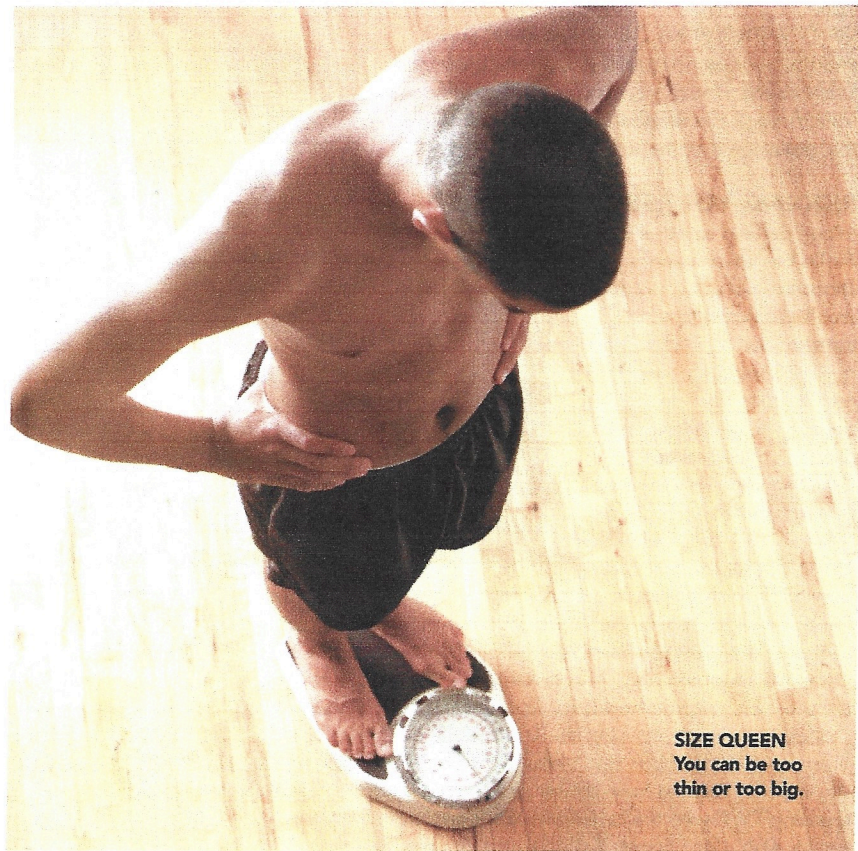
WORDS/MARCY LOVITCH

>> FOR THE LAST FOURTEEN YEARS, Alex, a 28-year-old New Yorker who works in publishing, has been on a rollercoaster—either starving himself, or overeating to the point of physical pain. “I’m not heavy, but I’m always thinking my body is gross, disgusting and abnormal,” he says. “I often change or cancel social plans so I can stay home, eat and go to sleep. Food for me has always been self-medication and escape.” At one point in a starvation cycle, Alex whittled his 5’10” frame down to 98 pounds.

Alex is not alone. According to the National Association of Anorexia Nervosa and Associated Disorders, an estimated one million men suffer from bulimia (binging and purging with laxatives, vomiting or excessive exercise), anorexia (self-starvation), or binge eating (overeating without purging). And research has shown that the number of gay sufferers is significant. A 1999 study from Deakin University in Australia found about 56 percent of gay men are unhappy with their body shape, compared with 43 percent of heterosexual men. The study also found gay men are significantly more likely to engage in chronic dieting.

“Gay men fall right behind heterosexual women in the numbers of those who suffer from eating disorders,” says Arnold Anderson, M.D., a professor of psychiatry at The University of Iowa College of Medicine and co-author of *Making Weight: Healing Men’s Conflict with Food, Weight and Shape* (Gurze Press, 2000). While some men aspire to thinness, others become preoccupied with their muscles. They can develop an obsession with increasing muscle mass—known as muscle dysmorphic disorder, or reverse anorexia.

“These men overdo it in the gym, and focus on wanting to be strong, powerful and chiseled. But regardless of how big they get they view themselves as small,” says psychiatrist Dr. Ted Weltzin, M.D., director of The Eating Disorder Center at



**SIZE QUEEN**  
You can be too thin or too big.

## IT'S NOT ABOUT THE FOOD ITSELF, BUT ABOUT A WAY TO HAVE CONTROL

Rogers Memorial Hospital located in Oconomowoc, Wisconsin. Sometimes the disorder leads to burnout—“that’s when they’re at risk for bulimic behavior, bingeing and purging with laxatives or vomiting,” Dr. Weltzin says. Later, men can develop digestive problems such as acid reflux (from excessive vomiting), irritable bowel disease, dizziness, fainting, impotency, and a weakened heart.

According to experts, food often becomes medicine for emotional pain. “It’s not about the food itself, but about a way to have control over something in your life,” says Sima Ariam, Ph.D., a New York City-based psychologist who specializes in treating patients with eating disorders. “You’re avoiding painful feelings by overindulging. Resorting to food instead of

dealing with your problems is easier.”

Many gay sufferers say their eating disorders stem from childhood abuse, or from being teased as a child. Scott, 34, an executive in Washington, D.C., suffered from bulimia as a teenager. “I was heavy, and effeminate, and was teased for being ‘queer.’ I wanted to get thin to prove I was as manly as the guys who played football,” he says. Scott was bulimic for eight years before stopping the cycle on his own.

But few people can get through the process alone. “Seek some sort of professional treatment, either on an outpatient or inpatient basis,” says Dr. Weltzin. “Getting away from your old eating habits and dealing with the underlying issues are critical for recovery.”

For more information about eating disorders, call The National Association of Anorexia and Associated Disorders. [anad.org](http://anad.org); 847.831.3438