

Physical Activity and Eating Disorders

Physical activity can play an important role in the recovery from an eating disorder. Engaging in activity that is appropriate for the individuals level of physical and mental health, **can help to improve motivation for recovery.**

Physical activity has a number of benefits:

- Helps to rebuild a healthy musculoskeletal and cardiovascular system
- Assists in joint flexibility and muscle strength
- Assists in managing constipation
- Assists with anxiety reduction and mood elevation
- Provides an opportunity for positive physical experiences to promote acceptance of the body
- Promotes general well-being
- Assists the return to a normal balanced lifestyle
- Improves appetite

While physical activity is important for general health and wellbeing, **for individuals with an eating disorder, medical, nutritional and psychological health are the priority.** It may not be appropriate for some individuals to be doing any physical activity until they are well enough.

Is physical activity a behaviour of the eating disorder?

Physical activity may be part of the eating disorder if:

- Commitment to exercise far exceeds any reasonable effort to achieve physical fitness or good health
- Exercise becomes more solitary and less enjoyable
- Exercise continues despite injury or illness
- Exercise continues despite significant weight loss to an unhealthy level
- Exercise continues despite medical recommendations not to
- The motivating factor for exercise is weight loss, rather than fitness or enjoyment
- There may be withdrawal symptoms, such as irritability, anxiety and depression when the person is unable to exercise
- Feelings of guilt exist where exercise is omitted or prohibited

How to include physical activity as part of treatment?

An appropriate level of physical activity should be determined by a number of physical, behavioural and psychological parameters including:

- Ongoing medical stability
- General medical condition
- Weight & weight-loss or weight-gain trajectory
- Adherence to treatment goals
- Motivation to change
- Insight into exercise behaviours and an ability to contain them
- Dietary intake
- Electrolyte balance
- Eating disorder behaviours i.e. purging
- Risk of fracture or injury (including previous injuries)
- Motivation to exercise (is the motivation health or is it for disordered reasons)
- Type of exercise – i.e. level of intensity

A physiotherapist or exercise physiologist with experience working with eating disorders can prepare a graded physical activity program that incorporates **stretching, strengthening and core stability that is appropriate for the individuals level of health.**

The decision to progress the physical activity plan must be agreed upon by the multidisciplinary team to ensure that increased physical activity is going to be most helpful from both a physical, behavioural and psychological perspective.

For some individuals, for whom exercise is an eating disorder behaviour, it can be most helpful to take a complete break from exercising, until they are able to incorporate it moderately and healthily. Providing firm guidelines and giving the person a 'permit' to cease exercise will often be the most helpful course of action.