ORAL AND PHYSICAL MANIFESTATIONS OF ANOREXIA AND BULIMIA NERVOSA

John R. Antonelli, DDS, MS
Robert Seltzer, DMD

ABSTRACT

Food avoidance and disordered eating behavior are hallmarks of the psychopathologic disorders known as anorexia nervosa and bulimia nervosa. Anorexia nervosa is characterized by severe restriction of food intake, which leads to weight loss and the medical consequences of starvation. Bulimia nervosa is characterized by attempts to curtail food intake, interspersed with binge eating, followed by self-induced vomiting to rid the body of food. Tooth erosion and heightened sensitivity, caused by tooth contact with gastric acid during vomiting, are among several intraoral signs and symptoms of anorexia nervosa and bulimia nervosa. Self-induced vomiting in bulimic patients may cause trauma to intraoral soft tissues in the form of epithelial ulceration. Dentists and dental hygienists are often the first healthcare providers to examine patients with anorexia nervosa and bulimia nervosa, and are in a good position to recognize the physical and oral effects of eating disorders. Unfortunately, too few oral health practitioners consistently assess patients for oral manifestations of eating disorders, and equally few patients suffering with eating disorders regard their oral health practitioners as an important source of information about eating disorders. Lack of knowledge about the intra- and extraoral effects of eating disorders creates barriers that prevent patients from speaking frankly with oral health practitioners about their issues. It is incumbent upon oral health practitioners to recognize and diagnose the effects of these disorders and render appropriate treatment.

KEY WORDS

Anorexia nervosa, bulimia nervosa, ulceration, perimyolysis, eating disorders, erosion, Russell’s sign, glossodynia, atrophic glossitis, angular cheilitis, candidosis