

DISTORTED PICTURE

The 'cult of the hunk' means gay and bisexual men are at greater risk for eating disorders by Inga Sorensen

Thin is (still) in. From the gaunt of "heroin chic" to the cut of a pumped gym rat, advertising and entertainment feed society a barrage of body expectations.

Just scan a club dance floor or the street, and it appears the gay community is buying into body image more than anyone else. It's not just speculation—research backs it up. But this quest for a perfect body sometimes has grave health consequences.

"Survey studies of homosexual men have shown that they are more dissatisfied with their body weight and shape than heterosexual men and that they consider their physical appearance to be more important to their sense of self," writes Dr. Daniel Carlat in a groundbreaking study published last summer in the *American Journal of Psychiatry*.

He and a team of associates tagged homosexuality and bisexuality as risk factors for males when it comes to the development of eating disorders.

"You have to be in a culture that values slenderness and also have an individual vulnerability to the disorder," says Dr. Arnold Andersen, head of the eating disorders program at the University of Iowa. He doesn't dismiss a genetic component, but concludes that social reinforcement is the dominant element.

Articles and advertisements in magazines targeted to young women are 10 times more likely to focus on weight loss than those targeted to young men, he says. But "pockets of males where weight loss or shape change become high priorities, like high school wrestlers, models or actors" may show 15 to 20 percent with eating disorders.

Andersen says this is because society sends the false message that "If you will only be thin, or shaped in a classic way, you are going to be liked."

In reality, he adds, attaining a slim or buff body is a "pseudo-solution to a lot of issues of self-esteem, social acceptance and identity."

Not to mention the fact that eating disorders can cause great harm to one's body.

"In patients with anorexia, starvation can damage vital organs such as the heart and brain," warns a National Institutes of Health pamphlet. To protect itself, the body shifts into "slow gear." The NIH brochure then lists dozens of ways body activity deteriorates.

One of the first things to go is a man's sex drive. Andersen speculates that in some extreme instances this may be an example of internalized homophobia. The patient is not happy with his sexual orientation and is subconsciously fighting it, punishing his body in the process.

Drew Cronyn, a Manhattan doctor, studied 150 gay men and presented his findings two

years ago at a meeting of the Gay and Lesbian Medical Association.

"Men tend to manifest eating disorders in much different ways than women," he says, adding that women often eat less, while men tend to engage in "excessive working out."

But the language and the concepts they use are often the same as heterosexual women suffering from eating disorders.

"It was very much they were doing this because they thought this was what men wanted of them," says Cronyn.

"One of the reasons why gays are over represented in males with eating disorders is probably because within the community of gay males there is a higher value on slenderness," Andersen adds.

Lesbians seem less vulnerable to eating disorders than either heterosexual women or gay men. Andersen points to socialization traits within that community as an explanation. Cronyn adds, "Most studies show that women's

criteria of attraction is not so much based on physical appearance as is men's."

Battling eating disorders can be tough, but Cronyn says an important first step is simply talking about it.

Andersen adds that people can assess whether they are at risk for developing an eating disorder by asking themselves a few simple questions: Have they lost significant weight on a diet? Do they engage in binge eating? Do they obsessively exercise? Are they inducing vomiting or purging by other means?

He says if they answer yes to any of the last three questions, they should seek a clinical evaluation.

According to Andersen, counseling is important to get to the underlying issues and impart effective problem solving and coping strategies. "Good treatment for eating disorders treats people individually," he says.

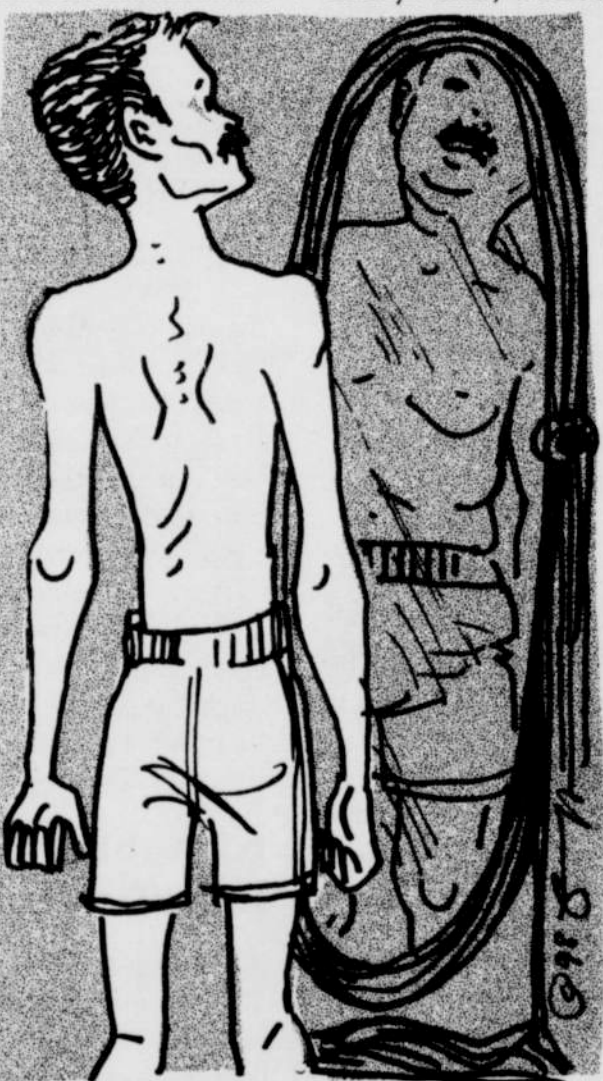
He also urges people to break the wall of silence and speak about the issue with their friends who may be suffering from eating disorders.

"If I see a person who is about to be run over by a truck, I would either yell or pull them back on the curb," he says.

Eating disorders are not different. "We need to do the right thing. It's how you do it, not whether you should do it."

■ NATIONAL EATING DISORDERS AWARENESS WEEK is Feb. 23-28. Free screenings will be offered at more than 1,000 sites nationwide. For more information, call 1-800-969-6642.

The screening site in Portland is ST. VINCENT MEDICAL CENTER, 216-2025; in Hillsboro it's TUALITY HEALTH EDUCATION CENTER, 681-1700; in Klamath Falls it's KLAMATH MENTAL HEALTH, (541) 882-7291. There is no designated screening site in Southwestern Washington.



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