Obsessed with building muscle (megarexia) [1]

Dear Alice,

I’ve heard about an eating disorder in men sometimes called megarexia. It is supposed to occur in bodybuilders or men who avidly workout. I heard it is an obsession with gaining weight or muscle. Can you tell me more about it?

Thanks,
Interested

Answer

Dear Interested,

You’ve heard right. From time to time, many people experience bouts of insecurity about their appearance. However, if these thoughts significantly impact behaviors or habits, serious problems may result. The good news is that treatment can help people build up their self-esteem and overcome body image concerns.

In recent years, clinicians have coined the term "muscle dysmorphia" (MD) to describe a mental health condition experienced by men and women with a distorted perception of their body muscle (specifically a lack thereof). People with MD (also known as bigorexia or megarexia) may feel that their muscles are inadequate, even if their body appears strong to others. Muscle dysmorphia seems to affect men more often than women, perhaps due to social and cultural pressures on men to have beefy bods. MD is characterized by a constant preoccupation with body and muscle size that often results in excessive or compulsive exercise and weight training, even when injuries are present. In order to meet the demands of a rigid exercise routine, people struggling with MD may sacrifice time with friends and family or shirk responsibilities at work or school. Some may even resort to using steroids or other muscle-building medications despite the risk of harmful consequences.

Although muscle dysmorphia shares some of the hallmarks of disordered eating (namely compulsive exercise and weight training), MD does not meet the diagnostic criteria for a specific eating disorder. No definitive standards have been established to diagnose muscle dysmorphia. However, clinicians believe that people with this condition may also experience symptoms of
body dysmorphic disorder, obsessive-compulsive disorder, a phobic response, or a state of anxiety.

Since our understanding of MD is still evolving, treatment options vary. A combination of cognitive behavioral therapy (or other counseling techniques) and antidepressant medications has been helpful to some people with muscle dysmorphia. However, acknowledging a problem and seeking help can prove difficult. First, someone with MD may not realize or be willing to admit that their thoughts and habits related to weight and body shape are harmful. Second, their loved ones may not pick up on the problem since people often associate muscled bodies with healthy eating and exercise practices.

For those with a distorted body image that proves harmful to their health or disruptive to daily life, there are many resources available to help. Scheduling a check-up with a health care provider familiar with these issues or speaking with a therapist who works with athletes and body image may be helpful.

Beefing up your understanding of muscle dysmorphia, and sharing your knowledge with others, may help more people recognize when normal concerns about body image, eating, and exercise cross the line.

Alice!
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Nutrition & Physical Activity [2]
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