Psychoanalytic Insights into Eating Disorders: A Historical and Theoretical Exploration

Yeme Bozukluklarına Psikanalitik Bakış: Tarihsel ve Teorik Bir İnceleme

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ABSTRACT

This article thoroughly examines the psychoanalytic foundations of eating disorders, tracing their conceptual evolution from Freud's early theories to contemporary relational approaches. Freud initially conceptualized eating disorders as manifestations of unconscious conflicts, interpreting behaviors such as food refusal as expressions of psychosexual struggles. The development of object relations theory shifted the analytic focus to the relational dynamics between mother and child, emphasizing the critical role of early interactions in emotional regulation and identity formation. Lacanian psychoanalysis further deepened this perspective by framing eating behaviors as symbolic acts shaped within linguistic and relational structures, particularly in the context of the triadic relationship between mother, child, and father. Modern approaches, including self-psychology, attachment theory, and intersubjectivity, have expanded this understanding by highlighting the roles of unmet self-object needs, disrupted attachment patterns, and intergenerational family dynamics in the persistence of eating disorders. These frameworks center the individual's subjective experiences and relational contexts, offering a more nuanced understanding of the complex nature of eating disorders. The article underscores the importance of integrating psychoanalysis's historical insights with modern relational theories to develop a comprehensive understanding of eating disorders and to design effective therapeutic interventions that address their symbolic, relational, and emotional dimensions.

Keywords: Eating disorders, psychoanalytic theory, psychological dimensions of eating

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Bu makale, yeme bozukluklarının psikanalitik temellerini derinlemesine inceleyerek, bu rahatsızlıkların Freud'un erken dönem teorilerinden başlayarak günümüzün ilişki odaklı yaklaşımlarına uzanan kavramsal evrimini ayrıntılı bir şekilde ele almaktadır. Freud, yeme bozukluklarını bilinçdışı çatışmaların bir yansıması olarak tanımlamış ve özellikle yemek yemeyi reddetme gibi davranışları, psikoseksüel gelişim aşamalarındaki mücadelelerin dışavurumları olarak yorumlamıştır. Nesne ilişkileri kuramının gelişimi, analitik çerçeveyi anne-çocuk ilişkisinin erken dönem dinamiklerine kaydırarak, bu etkileşimlerin duygusal düzenleme, kimlik oluşumu ve benlik algısı üzerindeki derin etkilerini vurgulamıştır. Lacanyen psikanaliz, yeme davranışlarını dil, sembolizm ve özellikle anne, çocuk ve baba arasındaki üçlü ilişki bağlamında şekillenen sembolik eylemler olarak yeniden çerçevelendirmiştir. Benlik psikolojisi, bağlanma kuramı ve karşılıklı öznellik gibi modern yaklaşımlar, karşılanmamış benlik-nesne ihtiyaçlarının, bozulmuş bağlanma örüntülerinin ve kuşaklar arası aile dinamiklerinin yeme bozukluklarının ortaya çıkışında ve sürekliliğinde oynadığı kritik rolleri öne çıkarmıştır. Ayrıca, bu yaklaşımlar, bireyin öznel deneyimlerini ve ilişkisel bağlamlarını merkeze alarak, yeme bozukluklarının karmaşık doğasını daha iyi anlamayı mümkün kılmıştır. Makale, yeme bozukluklarının sembolik, ilişkisel ve duygusal boyutlarını ele alan bütüncül bir anlayış geliştirmek ve bu doğrultuda etkili terapötik müdahaleler tasarlamak için, psikanalizin tarihsel birikiminin modern ilişkisel kuramlarla entegrasyonunun gerekliliğini vurgulamaktadır.

Anahtar sözcükler: Yeme bozuklukları, psikanalitik kuram, yemeğin psikolojik boyutları

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Introduction

The study of eating-related problems has gained significant attention in psychology, particularly since the formal recognition of eating disorders as distinct diagnostic categories in the first edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) in 1980. Among these disorders, anorexia nervosa and bulimia nervosa have emerged as the most prevalent and extensively studied conditions. However, the historical and theoretical roots of these issues extend well beyond their modern classification. Psychoanalytic theory, in particular, has played a pivotal role in understanding behaviors such as food refusal, self-starvation, and purging (e.g. vomiting), which were explored long before the twentieth century. The development of psychoanalytic thought has significantly shaped the conceptualization of various psychopathologies, including eating disorders.

This paper aims to offer a comprehensive understanding of eating disorders by tracing their historical development alongside the progression of psychoanalytic theory. It examines the historical context of eating disorders and evaluates the contributions of psychoanalytically oriented theorists, from early formulations to contemporary advancements. This approach seeks to illuminate the shifts and refinements in psychoanalytic perspectives on eating-related issues.

Refusal of Eating and Self-Starvation: Anorexia Nervosa

The term anorexia originates from Greek words an (negation) and orexis (appetite), signifying a neurotic loss or absence of appetite (Bell 2002). Although anorexia nervosa was formally recognized in medical literature during int the 19th century, its origins can be traced much further back. Some scholars suggest that self-starvation practices date to the Hellenistic period, where they were employed as a religious rituals aimed at purifying the soul and body from earthly desires. Similarly, in medieval Italy, women engaged in self-starvation as a means of achieving spiritual and personal purification (Davis 2002).

In medical history, one of the earliest documented cases of an eating disorder is Richard Morton's 1686 account of a 20-year-old woman who refused food following a bout of tuberculosis. Morton attributed her behavior to a neurotic weakness caused by her illness (Bell 2002).

However, the term anorexia nervosa gained prominence through Sir William Gull- Queen Victoria's physician-who defined the disorder in his seminal 1873 publication. Gull's descriptions focused on young women aged 16 to 23, reflecting the epidemiological patterns of that era (Bell 2002, Moncrieff-Boyd 2016). Around the same period, Charles Lasegue introduced the term "hysterical anorexia", which later evolved into anorexia mentale in French and Italian medical literature (Oğlağu and Gürdal Küey 2013). Lasegue emphasized the significance of social and familial contexts in the emergence of the disorder.

Theoretical contributions by Jean-Martin Charcot and Pierre Janet further deepened the understanding of anorexia nervosa. Charcot associated the disorder with hysteria, while Janet proposed two possible interpretations: anorexia as a hysterical manifestation or as an obsessive behavior (Bell 2002). These foundational perspectives laid the groundwork for psychoanalytic approaches to eating disorders.

Vomiting as a Purgation Method: Bulimia Nervosa

The term bulimia originates from the Greek words bous (ox), and limos (hunger), metaphorically referring to an insatiable appetite "capable of consume an ox" (Parry Jones and Parry Jones 1991). Historical records indicate that purging practices, including self-induced vomiting, were frequently employed for therapeutic purposes in ancient Egypt, Syria, and Arabia (Oğlağu and Gürdal Küey 2013). These practices persisted across various civilizations and were occasionally associated with binge eating during periods of abundance (Nasser 1993).

Medical interest in bulimia re-emerged in medieval Western Europe. For instance, Parry Jones and Parry Jones (1991) identified twelve documented cases dating from the 15th to the 20th century. In early interpretations, bulimic behaviors were often linked to stomach or other digestive disorders. By the late 17th century, Dutch physician Stephen Blancard defined bulimia as an "abnormal appetite, often

accompanied by depressive moods", highlighting the enduring connection between bulimia and emotional distress (Parry Jones and Parry Jones 1991).

Bulimia nervosa was formally recognized in 1980 when the American Psychiatric Association included diagnostic criteria for the disorder (Walsh and Devlin 1998). A year earlier, British psychiatrist Gerald Russell had introduced the term bulimia nervosa, describing it as an "ominous variant of anorexia nervosa" (Russel 1979). Russell identified key differences between the two disorders, including recurrent binge eating episodes, milder weight loss compared to anorexia, and relatively fewer disruptions in fertility and sexual function. His observations underscored the interconnected yet distinct nature of these conditions.

Psychoanalytic Theory on Eating Problems

Psychological theories offer various frameworks for understanding psychopathologies, including eating problems. Among these, psychoanalysis provides a distinctive perspective by focusing on unconscious process, early relational dynamics, and the symbolic meanings of behaviors.

Early Psychoanalytic Contributions

Although Sigmund Freud did not specifically focus on eating disorders, his theories laid the groundwork for psychoanalytic conceptualization. Freud's emphasis on unconscious conflicts and early childhood experiences highlighted the role of repressed emotions and trauma in shaping behavior (Roudinesco 2016). In his case study of Frau Emmy Von N., Freud introduced the term "mental anorexia" suggesting that it stemmed from early familial coercion and unresolved childhood conflicts (Freud 1966). He also linked anorexia nervosa to orality, sexuality, and melancholia, framing it as an expression of disrupted psychosexual development.

In another prominent case, Dora, Freud associated psychogenic vomiting with unconscious fantasies of oral pregnancy, interpreting it within the framework of hysteria. Vomiting was seen as both an unconscious compromise formation and a defensive regression in response to Oedipal desires (Farrell 2000).

In seminal works such as Three Essays on the Theory of Sexuality (1953), Theories of Sexuality in Children (1959), and The History of Infantile Neurosis (1955), Freud proposed that anorexia during puberty might represent a form of resistance to emerging sexuality. He conceptualized eating disorders as hysterical symptoms linked to Oedipal conflicts and unconscious compulsions (Caparrotta and Ghaffari 2006).

Psychoanalytic Advances in Eating Disorders

Building on Freud's ideas, early psychoanalytically oriented scholars examined the symbolic dimensions of eating behaviors. Karl Abraham associated food refusal with unconscious fears of oral impregnation, interpreting it as resistance to imagined pregnancy through oral means (Abraham 1924).

In 1940, Waller, Kaufman, and Deutsch proposed that anorexia nervosa represented fantasies of oral pregnancy. They linked food refusal to guilt over obsessive eating and viewed the cessation of menstruation as a symbolic denial of sexuality. These scholars also emphasized the role of familial dynamics, particularly mother-daughter relationships, in the development of eating disorders (Waller et al. 1940).

Over time, psychoanalytic perspectives evolved from focusing solely on Oedipal conflicts to also addressing pre-Oedipal dynamics. Researchers such as Nemiah (1950) highlighted the significance of overprotective maternal relationships, while Meyer and Weinroth (1957) conceptualized anorexia as an unconscious attempt to recreate a nurturing maternal bond. This shift marked an important evaluation in recognizing the influence of early relational patterns in the development of eating disorders.

Object Relations Theory and Eating Disorders

Object relations theory emphasizes the importance of early caregiver-child relationships in shaping

internal structures and behavioral patterns (Becker et al. 1987, Clinton 2006). Melanie Klein's work on early mother-child interactions suggested that feeding dynamics reflect ambivalent fantasies toward the maternal body. These ambivalences, often expressed through envy or aggression, may contribute to the development of disordered eating behaviors (Farrell 2000).

Donald Winnicott further developed this perspective by highlighting the role of maternal responsiveness in supporting emotional growth. He argued that emotional neglect, rather than physical neglect alone, underpins the emergence of anorexia nervosa (Winnicott 1965). Contemporary psychoanalysts such as Mara Selvini Palazzoli and Hilde Bruch expanded upon these ideas by focusing on struggles for autonomy in the mother-daughter relationship and the use of food control as a mechanism to assert independence (Bruch 1971). Selvini Palazzoli linked anorexia to an internalized negative maternal figure shaped by overprotectiveness and an failure to recognize the child as a separate individual. She proposed that self-starvation functions as a form of resistance to this dynamic, enabling the child to assert autonomy while confronting the maternal image (Selvini Palazzoli 1974, Caparrotta and Ghaffari 2006).

Eating Disorders in Attachment Theory

John Bowlby's Attachment Theory emphasizes the critical role of early emotional bonds-particularly between children and their primary caregivers-in shaping emotional and development. These attachment relationships form a foundational framework for future interpersonal dynamics (Bowlby 1979, 1988). Analyzing eating disorders through this theoretical lens provides valuable insights into their etiology.

Armstrong and Roth (1989) argue that psychologically healthy separation can only occur after the establishment of secure attachment. They suggest that the anxiety and depression commonly observed in individuals with eating disorders during times of separation may originate from early attachment disturbances. Such difficulties often foster unhealthy detachment rather than supporting true independence. As a result, these relational patterns significantly influence experiences and attachment styles in later life.

Chassler (1997) establishes a direct link between anorexia nervosa and early attachment difficulties, noting that individuals with this condition often describe their caregivers–especially mothers–as emotionally unresponsive and unsupportive of individuation. These relational dynamics can present significant challenges in therapeutic settings, making it more difficult to establish the constructive therapeutic alliance necessary for recovery.

Self Psychology and Eating Disorders

Self psychology, developed by Heinz Kohut, emphasizes the subjective experience of the self as a core psychological structure. Kohut's theory underscores the caregiver's empathic attunement and responsiveness as critical elements for fostering an infant's emerging sense of self and developing essential capacities such as emotional regulation and self-soothing. When these capacities are inadequately developed, individuals may experience fragmentation, anxiety, or psychological disorganization (Kohut 1977, 1984)

Kohut identified two primary self-object needs essential in early development: mirroring, involving the caregiver's affirmation and validation of the child's emotions and experiences; and idealization, reflecting the child's need to connect with and admire strong, reliable figures. When these self-object needs remain unmet, individuals may resort to maladaptive behaviors—including disordere eating—as compensatory mechanisms to regulate emotions and preserve self-cohesion.

Groot and Rodin (1994) suggest that the intense preoccupation with body image observed in individuals with eating disorders represents both developmental stagnation and an adaptive attempt to maintain psychological equilibrium. Similarly, Geist (1989) emphasizes that empathy—a central concept within self psychology—is crucial for fostering vitality and a coherent sense of self. A lack of empathic connection can lead to experiences of emptiness, diminished creativity, and fragmented identity.

From this perspective, eating disorders function as defensive mechanisms aimed at preserve self-cohesion. Food and eating behaviors act as symbolic self-objects, providing individuals with a sense of control and stability in the face of perceived psychological threats.

Lacanian Psychoanalytic Theory and Eating Disorders

Jacques Lacan, a pivotal figure in mid-20th century psychoanalysis, emphasized the central role of language in shaping human perceptions, relationships, and self-understanding. His assertion that "the unconscious is structured like a language" marked a significant departure from post-Freudian theories that focused primarily on early mother-child dynamics. Instead, Lacan highlighted the father's role in introducing the symbolic order, which disrupts the mother-child dyad and enables the child's transition from the imaginary to the symbolic realm. This transition, mediated by the Oedipus complex, is foundational to subject formation and the emergence of desire, which Lacan conceptualized as originating from lack (Dor 2004, Evans 2006).

Lacanian theory conceptualized anorexia nervosa not simply as an act of "not eating", but symbolically as "eating nothing," reprecenting a desire for absence. This act is interpreted as an attempt to assert individuality and break free from maternal dominance. Scholars view this refusal as a plea for recognition and love from the Other, with the silence of anorexia embodying unarticulated anguish.

Özbek Şimşek (2019) interprets this dynamic as an effort to resist the overpowering influence of the mother, while Recalcati (2014) associates it with maternal jouissance, suggesting that the daughter's act of refusal serves as a means of safeguarding her individuality. Lacan (1958) argued that anorexia manifests as a rejection of the Other's demands, with the subject striving for acknowledgment of their desire beyond the realm of biological need.

This defiance is further analyzed by Gherovici (2011), who suggests that anorexia reflects an effort to separate from the Other and to recognize the lack that exists within both the subject and the Other. This dynamic results in a desire to create absence in the Other, symbolizing liberation from maternal dominance. Recalcati (2014) argues that this engagement with "nothing" serves as a symbolic demand for autonomy.

Verhaeghe (2008) emphasizes that eating disorders often emerge when the subject's individuality is suppressed by the demands of the other, resulting in deep psychological conflict. In this context, Lacan's insights, when combined with object relations theory, provide a rich framework for understanding the origins of eating disorders and the complex interplay between relationships, subjectivity, and desire.

Eating Problems in Contemporary Psychoanalytic Studies

Contemporary psychoanalytic studies suggest that eating disorders often symbolize resistance to growth, maturity, and the acceptance of adult femininity or sexual identity. For instance, some scholars propose that anorexia nervosa and similar conditions reflect a rejection of sexuality and adult female roles. Adolescent girls' fear of weight gain and developing a mature body may represent apprehension toward embracing their sexual identity. The fixation on slimness thus acts as a protective mechanism against these uncertainties (Wilson Hogan and Mintz 1985, Beattie 1988).

Scott (1987) interprets anorexia as a rejection of sexual maturity, while Crisp (1997) views it as an avoidance of adult responsibilities, highlighting struggles with autonomy during adolescence. Similarly, Schupak-Neuberg and Nemeroff (1993) argue that bulimia represents an attempt to concretize an underdeveloped self-identity by using physical appearance as an outward reflection of internal structure. This dynamic positions the body as a symbolic site for identity construction.

Parman (2021) suggests that anorexia involves a dissociation from erogenous zones and bodily sensations, leading to rejection of physical transformations. Ritvo (1984) describes anorexia as an effort to control rapid pubertal changes, reflecting a desire to reverse or halt sexual development. Likewise, Gürdal Küey

(2008) proposes that hunger becomes a means to assert control over the body, sever connections with the maternal figure, and reject imposed sexual identities.

Beattie (1988) emphasizes the challenges daughters face in separating and individuating from the pre-Oedipal mother. Bergman (1982) and Bernstein (1983) argue that mothers often perceive daughters as extensions of themselves, projecting their own desires and anxieties onto them. This dynamic intensifies during adolescence, complicating daughters' attempts to establish autonomy.

Kaganski and Remy (1989) explore the intergenerational dimensions of these dynamics, highlighting how mothers transfer unresolved relational issues to their daughters. Therapeutic approaches, therefore, must address these familial patterns to facilitate recovery (Kaganski and Remy 1989, Gürdal Küey 2013). Birksted-Breen (1989) and Winston (2009) further examine the symbolic meanings of food, linking it to maternal ambivalence. Individuals struggling with anorexia oscillate between desires for fusion with and separation from the maternal figure, resulting in disturbed self-representation.

Jessica Benjamin's (1990, 2004) work on intersubjectivity underscores the importance of mutual recognition in self-development. She proposes that eating disorders can emerge when child-caregiver relationships lack mutual understanding and validation. Sands (2003) expands on this, suggesting that eating disorders represent attempts to eliminate dependency on unresponsive caregivers, with food functioning as a symbolic substitute for unmet self-object needs.

In conclusion, contemporary psychoanalytic perspectives reveal the complex relational dynamics underlying eating disorders, particularly resistance to growth, struggles for autonomy, and difficulties navigating maternal relationships. These insights emphasize the importance of addressing relational patterns in therapeutic interventions to promote recovery.

Conclusion

The psychoanalytic exploration of eating disorders has undergone significant evolution, beginning with Freud's foundational theories on unconscious conflicts and extending to contemporary relational and symbolic approaches. Freud's early work emphasized the psychosexual and unconscious dimensions of behaviors such as food refusal, offering a preliminary framework for understanding the deep-rooted conflicts underlying eating disorders. Later developments with object relations theory highlighted the crucial role of early mother-child dynamics, shifting attention toward relational interactions in the formation of self-identity and emotional regulation.

The contributions of later psychoanalytic perspectives, including Lacanian theory, self-psychology, and attachment theory, have further deepened the understanding of eating disorders. These frameworks demonstrate how disordered eating behaviors may symbolize struggles for autonomy, identity, and onnection, particularly in the context of familial and societal expectations. Contemporary approaches also emphasize the importance of intergenerational patterns, symbolic representations, and the individual's efforts to assert control and independence.

Integrating these historical and contemporary psychoanalytic insights is essential for achieving a comprehensive understanding of eating disorders. Therapeutic approaches informed by these perspectives can more effectively address the relational, emotional, and symbolic dimensions of disordered eating. This synthesis reinforces the enduring relevance of psychoanalysis in explaining complex human behavior and contributes meaningfully to the advancement of treatment methodologies.

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