

features



Left: Kenzie Fischer (left) with her younger sister Jenna Fischer in 2013.
Right: Kenzie Fischer (left) with her Alpha Phi sorority sister Jordan Vidmar in 2017.



KENZIE FISCHER

94 pounds: A true story of anorexia nervosa

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At 94 pounds and nine years into Kenzie Fischer’s battle with anorexia nervosa, the disease created a physical hardship so severe she was admitted to the hospital.

At the age of 17, Fischer was faced with the harsh reality of her struggle — she would die if she did not make a change.

In spite of this realization, her anger and frustration hit an all time high.

“I can remember thinking that I didn’t belong there at all,” Fischer said. “Certain rules and regulations would send me over the edge.”

Fischer was convinced she did not need the help that was being provided. In the hospital, she became someone that was a stranger to herself and to those who knew her. Her bubbly personality was replaced by a temperamental mood.

Her indignation resulted in yelling at nurses and doctors for the procedures they enforced.

“That wasn’t me. I don’t yell at adults,” Fischer said. “I basically lost my shit.”

In addition to the belief that she did not need to be there, Fischer’s attitude was provoked by her heedless outlook on life, she said.

“I could have cared less about dying,” Fischer said.

She recalls a time driving in a level 5 blizzard with her mom. Despite the dangerous weather, she never had a moment of worry.

“My mom started to cry and freak out and I just sat there, staring out the window just completely nonchalant,” Fischer said.

This way of thinking is part of the reason Fischer was hospitalized.

After being discharged, she was diagnosed with anorexia, depression and anxiety. From this moment forward, her road to recovery began.

Fischer, a senior public relations and health and risk management double major at AU, began to notice the signs of anorexia as early as the age of 8.

“I started noticing that I was not eating much and restricting food,” Fischer said. “I also began to really pay attention to what I was and wasn’t eating.”

Dr. Kate Adkins, a marriage and family therapist and professional counselor, based out of Wooster, specializes in eating disorders.

This gradual change in Fischer’s eating habits are not uncommon in today’s society, Adkins said.

She believes eating disorders are multiply determined, meaning

there is a genetic predisposition and there are also certain triggers that can ignite an eating disorder.

“Obesity lectures in health class, general modeling adherence towards a thin ideal, this fear of fat and the idea that being skinny is better than being healthy can all trigger an eating disorder,” Adkins said.

As a dancer and cheerleader, Fischer felt extra pressure to stay thin and active she said. This pressure intertwined with the unattainable beauty standards that society has set into place, all played a part in her battle with anorexia.

“I would say a lot of it had to do with pictures in magazines,” Fischer said. “That’s what kind of started it, just noticing that I didn’t look like those people in the magazines, movies and on TV.”

Ashland University’s Licensed Professional Counselor Jenny Preston said the focus on perfectionism in the media plays a huge role in the commonality of eating disorders.

“No one posts the bad things about their life on social media, it’s only the great things that are shared,” Preston said. “So there’s this other side that is missing that gives us the illusion that everyone else is doing better than we are.”

Fischer also recognizes the impact the media has.

“I definitely think the media is one of the biggest factors of an eating disorder for our generation,” Fischer said.

During Fischer’s battle with anorexia, she never felt good enough or thin enough she said. The way she decided to combat this struggle was to restrict her food intake.

“I felt a sense of accomplishment when I restricted what I ate,” Fischer said.

Her diet consisted of crackers, rice cakes and salad without dressing. She ate about 500 calories a day, convincing herself that it was normal.

“I got down to 94 pounds but it was never good enough,” Fischer said. “You set the goal but you never really reach it.”

There are studies that show people who have an eating disorder have very different brain structures than people who don’t, Preston said.

“Someone with anorexia no longer has access to their neocortex which is what we use for thinking and rationalizing for things such as classes,” she said.

Deprivation of nourishment can also cause patients to lose hunger cues, which can prevent someone from taking the steps necessary to recover from the disease, Adkins said.

“There is obsessive compulsive disorder and difficulty functioning,” she said. “Patients lose hunger and fullness cues, so making a decision on whether they need to eat more food or not is difficult.”

A malnourished brain also has increased anxiety and depression and begins to follow the standard rules of an eating disorder.

“So, fats bad, carbs bad,” Adkins said. “The least amount of food, the least amount of calories, mixed with the most amount of exercise must lead to the healthiest body.”

This way of thinking was very dangerous to Fischer’s health. Just the thought of being fat was enough to send her over the edge, she said.

“Looking back on it, certain things my parents tell me I did or said and I have no recollection of it,” Fischer said. “It’s kind of hard to remember because a lot of it is blank.”

There are also many physical impacts of eating disorders.

“Common symptoms that someone would experience are feeling lightheaded and dizzy for not having enough intake and energy,” Adkins said.

Other physical hardships that may ensue are slowed heart rate, low blood pressure, hair loss, skin changes and abdominal discomfort.

“Eating disorders have the highest fatality of any mental health disorder,” Adkins said.

The National Eating Disorders Association states that people between the ages of 15 and 24 with anorexia have 10 times the risk of dying compared to their same aged peers.

The possible fatality brought on by eating disorders is the reason Fischer was hospitalized for a week her senior year of high school.

“That’s when I realized I needed to get help,” Fischer said.

Nonetheless, Fischer’s fight for recovery was a tough and long journey.

“I still struggle with it everyday, putting something in my mouth, even if it’s one cracker,” Fischer said. “I have to stop myself and think about all I’ve overcome and what it was like living and hating myself everyday.”

At the root of an eating disorder is the sense of control.

“Anxiety increases beyond tolerable levels if they don’t follow the rules,” Adkins said.

Those with anorexia feel powerless if they do not restrict food, she said.

“The hardest thing for patients to do is to let go of the control, but that’s the only way to get better,” Preston said.

In addition, overcoming an eating disorder can be difficult due to the stigmas that surround the illness.

“Many people think that someone with an eating disorder is just doing it for attention,” Preston said. “That no one would ever really want to starve themselves.”

This lack of understanding tends to overlook how serious an eating disorder can be.

For this reason, Fischer was weary of telling her family about the anorexia that imprisoned her life.

“I was afraid that they would think of me differently and maybe as a charity case,” Fischer said. “I didn’t want any pity because that just makes it worse.”

However, with the help from her family and others, Kenzie was able to fully recover by the end of her freshman year at Ashland University.

After her hospitalization, Fischer was going to counseling two times a week — individual and group therapy.

When it came to one-on-one counseling, she was bitter to go at first.

“You have to find the right person that fits for you and at first, I didn’t want to go so I didn’t really try,” Fischer said. “But once I found one that worked for me, I think it helped immensely.”

Group therapy was also hard at times, she said.

“There was one girl from Egypt who was 10 and her and her mom would come to all the meetings,” Fischer remembers. “It was really hard to see that because she was around my age when I started restricting food.”

For the most part, group counseling was helpful on her road to recovery. It was led by one person and there were about 10 people, she said.

“We would just talk about any issues we had,” Fischer said. “It was kind of nice because we would get multiple people’s opinions on it.”

Preston believes counseling is beneficial because you have someone that will hold you accountable to the goals you set.

“It’s about getting people back on track behaviorally with intake and getting the nutrients and calories they need,” she said.

Adkins stressed the importance of working with someone who specializes in eating disorders.

“A lot of the things I have shared about the physical and neurobiological symptoms of an eating disorder came from my specialized training,” she said. “I didn’t know about them otherwise.”

It is easy for professionals across the board to inadvertently rein-

force eating disorders if they are not trained in the area, she said.

The trained professionals that Fischer worked with have helped her overcome her anorexia. She also leans on her family, boyfriend and sorority sisters if ever she is struggling.

“I have a big support system, so it definitely helps,” she said.

Although Fischer is at a healthy weight, she still wrestles with body dysphoria.

“I don’t know what I look like,” she said. “I have to base it off what other people tell me I look like.”

This impairment is distinctive of those with eating disorders, said Adkins.

“People with eating disorders have a perceptual disorder where they perceive their body as much larger than it really is.”

This frustrating feat is something Fischer has dealt with since high school.

“Some things are still harder than others,” she said. “I’ve also had to re-learn how to eat some things as weird as that sounds.”

These days, eating is different for Fischer — she no longer cuts up her sandwiches into bite-sized pieces.

Her journey has surely been full of ups and downs, just like anyone else who has struggled with a mental health disorder. But Fischer wants to remind people that it does get better and to reach out for help if you feel you have a problem.

“I know it’s the hardest thing to do and there’s a stigma that it’s a sign of weakness, but it’s not,” Fischer said.

Eating disorders are potentially life threatening and just taking one step at a time by telling a friend could ultimately save your life, she said. Adkins advises not self-diagnosing an eating disorder but rather getting an evaluation from a mental health professional.

“We must challenge the stigma of eating disorders because so often they are completely misunderstood,” she said.

If someone discloses that they have an eating disorder to you, ask what it is like for them instead of assuming you know how to help, Adkins said.

“We are fortunate that we have really good local resources,” Preston said.

AU offers free counseling services on the second floor of the student center (Monday-Friday, 8 a.m. to 5 p.m.) and the toll-free hotline offered by the National Eating Disorder Association can be reached at 1-800-931-2237.

“Reach out for help, get some information, you are not alone,” Adkins said.