

## Case study: **Meredith**

### **A young woman struggling with depression and bulimia**



*Meredith* is a 26 year old social worker with a history of depression. She presents to her GP requesting a medical certificate because of a recurrence of her depressive symptoms over the last month. She works in a very confronting environment with abused children and does not feel supported by her colleagues.

Further questioning reveals that Meredith has sleep and appetite disturbance along with her low mood and low energy and that her eating habits have been quite disordered for some time.

3 years ago, while on a trip to India, Meredith developed severe traveller's diarrhoea. She was overweight and was delighted with the weight loss that occurred because of the illness. She continued dieting after her recovery and successfully lost 20kg over the next 6 months bringing her weight into the normal weight range. Afraid of regaining the weight she had lost she found it difficult to resume eating normally. She refrained from eating at the beginning of the day and tried to eat just one meal at night. Unfortunately this led quickly to hunger induced binging and subsequent purging.

By the time of presentation she was binging and purging several times a day and very little food consumption occurred without purging. Meredith also admitted to taking up to 20 laxative tablets a night. Her BMI was 22 but she had had no menstrual periods for 4 months.

Meredith has had a number of depressive episodes in the past and several incidents of self harm requiring medical attention in her teens. She lives alone and is estranged from her family.