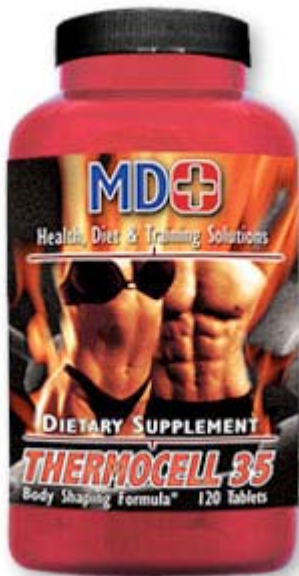


Muscle Dysmorphia Disorder (MDD or Vigorexy)

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The Muscle Dysmorphia Disorder (also referred to as MDD) has emerged from a society increasingly competitive, wherein the cult of the image is, basically, essential. The vigorexia and eating disorders generally are results of the socio-cultural influences in the incidence of some emotional disorders. Therefore, it is noted that the prevalence of mental disorders is linked absolutely to a certain time and certain cultural values. As being one of the newest emotional pathologies stimulated by culture, MDD has not been listed as a specific disease by the manual of classification: DSM IV (Diagnostic and Statistical Manual of Mental Disorders).

The dysmorphia disorder is more common among men, and is characterized by a continuous and excessive concern in obtaining muscle hypertrophy (although some men are content with 'size for size's sake' even if some of that size is fat). One of the psychological observations of these patients is that they are ashamed of their bodies, and because of that they resort to excessive exercise and other resources (e.g., excessive protein intake or anabolic steroids) to accelerate hypertrophy, even if illegal and harmful to health.

The American psychiatrist Harrison G. Pope, from the Medicine college of Harvard, Massachusetts, referred to the term vigorexia or *Adonis Syndrome*. Pope's studies were published in the *Medicine Magazine*, with the observation that about one million of North Americans among the nine million fans of weightlifters/weight trainees may suffer such disease. Pope considered anorexia and vigorexia as diseases linked to the loss of Narcissism's control of pulses. Despite all the clinical features of vigorexia, many authors do not consider it as a new disease, but as a clinical manifestation of a disturbance widely described as the disorder dismorphism corporal.

Muscle Dysmorphia Disorder or Anorexia Syndrome

The term Dymorphism Corporal was proposed in 1886 by the Italian Morselli. Although there are a large number of people concerned about their appearances, to be diagnosed dymorphism it is necessary to experience suffering and obsession toward some part or all of the body that prevents a normal life. When suffering and obsession are affiliated with the issue of muscular development with an excessive search for a perfect silhouette, the disorder is called vigorexia or MDD (Muscle Dysmorphia Disorder).

Now, the obsession for a perfect body has been treated as pathology. Both diseases advancing the distortion of the image that patients have of themselves: the anorexic never thinks he or she is thin enough and vigorexics never think they are too muscular or muscular enough. Some authors say that the Vigorexia has emerged from people's lifestyles.

Symptoms of vigorexia can be noted because of the obsession. The vigorexics look at the mirror and imagine themselves far from their ideals. This means that they, usually, spend hours at gyms trying to increase muscular size. Some vigorexics can eat more than 4,500 calories daily, accompanied by numerous hormone (testo, gh, etc.), protein and vitamin supplements – all with the aim of increasing muscle mass, even having been warned about the side-effects of this lifestyle.

The vigorexia should be considered a disorder of obsessive-compulsive lineage, both because of the obsession on exercise and increasing the muscles, but also the distortion of the body scheme. However, the Vigorexia still is not included in traditional classifications of mental disorders.

The Muscle Dysmorphia Disorder's Personality

Among the bearers of vigorexia we have people who seek only the perfect figure, influenced by cultural models and also sportsmen who want to be the best, obsessively, requiring much from his body. Usually the vigorexics are people of introverted personality, whose social timidity helps toward a search for the perfect body as compensation for feelings of inferiority. These people tend to have low self-esteem and great difficulty to integrate socially. They may accept or reject body image with pain. Bodybuilding is a sport/activity most linked to this disorder, but that does not mean all bodybuilders have vigorexia.

Outside bodybuilding, vigorexics practice sports without caring about physical conditions or, for example, weather conditions, reaching to feel guilty when they cannot perform these tasks. Moreover, the criterions for diagnosis of vigorexia are not clearly established yet, because it is a recent disturbance.

The MDD's Consequences

One of vigorexia's consequences is a concern for overtraining and bodily reactions that warns that something is wrong. These include: sleeplessness, irritability, sexual disinterestedness, weakness, lack of appetite, constant tiredness, difficulty on concentrating, etc. Typically these warning signs are ignored in the pursuit of supposed greatness and the idea that "it does not pertain to me."

Besides the obsession with the perfect body, vigorexia also produces a major change in the patient's habits and attitudes, especially in the food issue. The vigorexics will worry about the minimum calorie intake, because their beauty body depends on achieving enough nutrients to sustain and build muscle; an attitude that will occur throughout the year and not just in some seasons when the athlete achieves some desired goal in the body, which is healthy and not harmful. The vigorexic's life has, as the principal characteristic, the care of the body. Their diets are carefully regulated, being paranoid of consuming too much fat while consuming too much protein. This imbalance of macronutrients is harmful to the liver that must perform extra work.

The vigorexia habits cause physical and aesthetic problems, such as disproportionate displastic¹, also between body and head, and bone problems due to excessive weight and diet. The situation is aggravated with use of anabolic steroids used to achieve 'better results.' The consumption of these substances increases the risk of cardiovascular disease, liver injury, sexual dysfunction, decreased size of the testicles and an increase for prostate cancer.

Emotionally, according to Pope's studies, the vigorexia's consequences may be the symptoms of obsessive-compulsive disorder, thus making patients feel like failures as they abandon social activities, including work, with the aim to train and exercise without resting.

Symptoms and Pathology

The main symptom includes central distortion in the perception of the body, whereas other symptoms stem from this – for example, the obsession for exercises and special diets. This type of basic symptom also is the main symptom of other disturbances.

Mangweth and Cols compared 27 men diagnosed with eating disorders (being 17 with anorexia nervosa and 10 with bulimia nervosa), 21 male athletes and 21 male non-athletes, using a test of the body's image called 'matrix somatomorphic.' When asked to select the ideal body they would like to have, men with eating disorders selected an image of minimal body fat with the next category up chosen by men athletes and the control group.

However, there was a great difference between these groups in the perception of body image. Men with eating disorders saw themselves fatter than actually were, and the people of the control group did not show any distortion. These results were very similar to the studies of women suffering with anorexia and bulimia.

Vigorexia represents society where the picture is more important than words. Generally, vigorexia begins in adolescence, a period wherein people tend to be dissatisfied with their bodies. The importance of early identification of Vigorexia is to prevent young people from using drugs to achieve the desired results, as opposed to teaching them about physical culture and a healthy lifestyle by way of an appropriate amount of exercise, recovery and sound nutrition, and how all this should be viewed in the context of reasonable changes and goals.

Common Characteristics of MDD

- 1) Exaggerated concern with one's own body
- 2) Distortion of body image
- 3) Introverted personality
- 4) Socio-cultural factors common
- 5) Tend to self-medicate

¹ This refers to physical and aesthetic problems of proportion, as well as bone problems due to excessive weight and diet. The situation worsens with the use of anabolic steroids, besides increasing the risk for cardiovascular disease, liver injury, sexual dysfunction, decreased testicular size and prostate cancer. Emotionally, vigorexia consequences may be the symptoms of disorder obsessive-compulsive, thus making patients feel failed and abandon their social activities, including work, with the aim to train and exercise without resting.