The Shackles of The Mirror? - A Case Study on Body Dysmorphic Disorder

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ABSTRACT

Purpose: This case study was done to do a detail study on the recent trends with photographs and how it affects the body dysmorphic disorder [BDD] across all genders and age group. The intention was to understand how is body dysmorphic disorder affect the persons eating habits, social interaction and body image. In this article various research studies and scholarly articles were studied to understand in details about Body dysmorphic disorder. The emphasis was given on age, gender, social media networking site users etc. It was also intended to study how the media influences people towards a certain skin colour and body type. It was found not a single study was done in India though there are articles by Indian authors on body shaming, body image and how media is obsessed with unrealistic beauty standards which indirectly creates body image concerns in people. This case study justifies the need of studies to be done in India to identify Body dysmorphic disorder using various scales like Body image concern inventory, etc.

Objective: This case study was done to understand the studies done on body dysmorphic disorder around the world. To understand the pattern, occurrence ratio between youngsters and elderly and social media users and non-users.

Design/Methodology/Approach: Detailed Review of literature was done on various scholarly articles provided over medical, psychology and journal websites.

Findings/Results: Most of the studies were done in European countries and a very few in Asia. The studies revealed that women are more affected with BDD than men. People active on social networking sites, following celebrities and media were more discontent with their body parts or in general. Studies also show that younger population is more affected with body dysmorphic disorder. It was also noted that there was no direct study done in India for identifying body dysmorphic disorder.

Type of Paper: Research Case Study.

Keywords: Body dysmorphic disorder, Social media, Body dissatisfaction

1. INTRODUCTION:

You look into the mirror and find yourself fat, ugly, loose skin, wobbly belly, wrinkles but others tell you have beautiful facial features, grace, elegance and a modest demeanour which makes you look extremely attractive. But every single time you look at the mirror you despise yourself more and more. This is exactly what happens to people with body dysmorphic disorder. With the increasing trend of selfies people comparing themselves with others on social networking sites have unconsciously increased the body image consciousness and comparisons among people and have made them critically judgemental towards their own bodies. It can be either about one particular part of the body or complete self. A person might despise one body part or look at themselves in mirror and completely hate the way they look which might cause them distress, anxiety also might lead to obsessive- compulsive disorder spectrum [1].

2. OBJECTIVE:

This case study was done as a pilot project to review the research studies done on body dysmorphic disorder in India and around the world. The primary objective of this paper was to understand the
pattern, triggering factors, occurrence ratio, it’s impact between youngsters and elderly and social media
users and non-users and how they deal with it. It also aimed to understand what were the coping
strategies people with body dysmorphic disorder used.

3. METHODOLOGY:
Detailed Review of literature was done on various scholarly articles provided over medical, psychology
and national and international journals websites over the last 10 yrs. The databases of google scholar,
PubMed, Academia, Shodhganga, Research Gate, DSM library, E-books on Diagnostic and statistical
manual of mental disorders were searched. Key words like SNS, Instagram, Body corrective Surgery,
Facebook, Fashion, Body image etc were searched. Various books were searched to understand more
about BDD, its clinical sign and symptoms, treatment modalities etc. Full text articles of the accepted
abstract which included the social media aspects of body image and body dysmorphic disorders were
accepted.

4. DEFINITION:
Body Dysmorphic disorder is a psychological health condition where one is obsessed about the minor
flaws in their looks which may or may not be visible to others. It is also referred as dysmorphophobia.
The person suffering with BDD often perceives themselves as flawed on a whole like ugly, fat or a
certain aspect of them being flawed like crooked nose, lips, teeth etc. this is such a strongly inbuilt
phenomenon that the person wouldn’t want to look at mirror at all or spent hours looking at the mirror
and feel depressive, anxious and self-pity. It also taxes an individual with considerable amount of waste
time and money in trying to rectify these minor flaws that others might nor even notice. It many a
times make a person socially repulsive and want to avoid any kind of social gathering and spent time in
self-loathing.

5. INCIDENCE:
It is said that 0.7% to 2.4 % of the population has BDD [2], and 80 % of them has faced abuse at home
or by their loved ones or were emotionally neglected [3]. It usually starts during adolescents and may
continue till adulthood and affect men and women both, but the various evidence-based studies depict
BDD to be prevalent more among, women, teenagers and people with pre-existing psychiatric
conditions. BDD is also included in somatoform disorder, and in DSM-5 BDD is categorised in the
obsessive–compulsive spectrum.

6. SIGNS AND SYMPTOMS:
Signs and symptoms may start at a very young age but is often unnoticed under the spectrum of growing
up changes and social or peer influence. Recently a lot of obsessions over selfies and filtered
photographs also play a role in concealing the symptoms of BDD. Commonly overserved signs and
symptoms of the identifies cases of BDD are: - [4] [5] [6] [7]
(1) Being extremely judgemental about ones looks
(2) Misperception about one’s physical attributes
(3) Perceiving one-self as thin despite being fit and muscular also known as bigorexia or muscle
dysmorphia.
(4) Social anxiety or isolation
(5) Mirror avoidance
(6) Too much time with mirror or OCD
(7) Depression, negative self-evaluation
(8) Emotional, low self esteem
(9) Overuse of cosmetics to camouflage the self-sensed flaws
(10) Eating disorders
(11) Impaired confidence
(12) Impaired concentration on other works leading to poor professional or academic performance
(13) Repeated outfit changing
(14) Seeks repeated verbal assurances
(15) Seeking cosmetic surgeries to fix the perceived defect or flaw
(16) Delusional of others talking about your flaws
(17) Constantly comparing your appearance with others
(18) Constantly occupied with one’s appearance
Avoiding or over indulging on social networking sites
In extreme case might lead to depressive disorders, diabetes, hypertension and suicidal tendencies.

7. CAUSES AND RISK FACTOR:
There can be multiple reasons for body dysmorphic disorders. It can be multidimensional varying from childhood experiences to genetics to the impact of social media with the ongoing selfie trend, commonly termed as biopsychosocial. As per the sociocultural theory of self-esteem the information given by the media and friends about how important appearance is are internalized by many who accept others’ predefined ideals of beauty as their own [8]. The recent trend in social media networking sites that pass the message only via photographs like snapchat and Instagram the users are specifically careful to use proper filters so as to make each photograph look perfect [9]. The photos posted by the celebrity handles are often presented with a lot of photo editing done by the professionals which are often unattainable by common men and unrealistic in nature and this can certainly be the casual triggering factor of BDD [10]. The common risk factors are [11].
(1) Genetics
(2) Childhood experiences with body shaming, bullying and abuse
(3) Personality traits like perfectionist, introvert, extremely sensitive, etc.
(4) Pressure of societal set standards of beauty
(5) Having other psychiatric conditions like OCD, Various eating disorders, depression, etc.
(6) Social anxiety often precedes BDD
(7) Social media.

8. TREATMENT AND PREVENTION:
(1) Medications: - Selective serotonin reuptake inhibitors like antidepressants. [12]
(2) Psychotherapy: - cognitive behaviour therapy [13]
(3) Family counselling [14]
(4) Diversional therapy [15]

9. PREVENTION:
As most of the time the symptoms start during the teenage years it’s important for the family to play a pivotal role
(1) Never body shame a child
(2) Watch the early symptoms carefully
(3) Make sure the child is not over indulging on social media without supervision
(4) A healthy family relationship at home
(5) Open communication at home
(6) Never support the bullying of the child outside home, always stand for your child.

Not only does BDD usually goes unnoticed under the cover of ‘recent trends’ but also BDD is usually untreated or inadequately treated thinking the perception will change with age. A study done by Buhlann on 172 samples with BDD that only 21.4% took the help of psychotherapy or psychopharmacology medications. [16]

10. ANALYSIS:
Systemic and detailed review of literature was done with studies all across the globe which depicted similar pattern of onset, symptoms and treatment. A few studies do depict the females and the teenagers being more susceptible to BDD and the increase influence by the mass media and the social networking sites. A lot of studies showed how this leads the people to plastic surgeons for corrective surgery of nose, chin, lips, breast, hips etc. It was found in various different researches the majority of the clients undergoing reconstructive surgery were females. Also, a co-relation was found between the nativity of the people and the particular body part they were discontent with for e.g., Study done in China depicted the college goer being more concerned about their eyes and eye lashes, Indians being more discontent with body weight and colour, etc [17].
The prevention aspect plays a pivotal role than the treatment as by the time the client or the near ones identify the need of the treatment the symptoms might have settle such deep that it becomes difficult to identify and segregate them from reality. A major observation that strikes was though BDD is said to affect at least 1 in 50 cases not a single study was found done in India. Various supported studies were
found which spoke about how Indian students and females are specifically influenced by aiming thinness and fair complexion due to the influence of advertisements, media and social media. Studies in India also depicted the eating disorders in teenagers to achieve the thinness and also that most of the students with normal frame considered themselves to not be of the normal frame [18].

A good amount of work is also required to be done by those in limelight like the people from media and glamour industry. These are the people who occupy the news and visual media most of the time. These are the people the younger generation idealizes. These are the people who look attractive and set the current beauty and fashion norms. But what is not shown is behind the screen these people have an army of dedicated staff who work diligently to make sure these celebrities look a certain way to the world. Right from colour correction and make up of each and every body part that’s visible, to hiding the normal curves, to amagamating the muscles with the VVX effects, to plan the diet, cook for them with measures and in every few hours, to help them eat on time and in a certain manner, to the money that goes into the best, organic, high end meals and supplements, to not only planning their workout but making them do it with all the medical help as needed and still have the cosmetic surgeons at hand for corrective surgeries as and when needed to eventually still have the photoshops and screen correctors to make sure the audience see only the best. Glorifying a certain body frame, skin colour, hair texture is just another way of inculcating the set beliefs of general population who go gaga over their favourite celebrities. Its high time media talks more about sportsmen and women, talk about fitness, talk about importance of natural diets, talk about being true to what one is, talk about how genetics define our physical attributes, talk more about going under the knife for cosmetic reasons is just an abuse to the body, talk more on accepting oneself the way we are and using realistic and natural methods to make ourselves the best version of oneself.

11. CONCLUSION:

The body is that part of a human personality that is visible to the outside world, and hence everyone wants to have it the most perfect way one perceives to be. BDD is often unrecognized, un diagnosed hence untreated for the simple reason that most of the times the parents shun it off in the growing children thinking its due to hormonal changes of teenage. By the time it has taken an irreplaceable place in the life of an adult its mostly become the reality to the individual. The person would never believe that no one else can see the flaws in him or her and might feel that people are just being 'kind' by not pointing it out to them. Even if one realises that there is a disconnect with their perception and reality or the parents are vigilant enough to realise BDD setting in kids the whole lot of stigma and apprehension to seek help from a mental health expert itself can be a big obstruction to disclose their anxieties and seek treatment. A study done by Philips et al. compared the treated and untreated samples with BDD and found that those undertaking treatment had had a better lifestyle without the co-morbidities of OCD, eating and mood disorders [19]. In 2019 systematic review using databases from various websites were used to identify the pattern of It was found that appearance based social media use was found to be associated with body image dissatisfaction to a large extent. It highlighted the comparisons between body image dissatisfaction to be related to BDD symptomatolgy. They concluded that excess social media use may lead to the onset of BDD [20].

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