

Letter to the Editor

Psychosocial effects and mental health issues associated with body dysmorphic disorder in women

Sir,

A recent study emphasized that about 1-2% of the general population is inflicted with body dysmorphic disorder (BDD), with a greater prevalence in women.¹ Women demonstrate more distress associated with BDD, accompanied by repetitive behaviors related to their appearance, such as checking, camouflaging, or attempting to 'improve' the appearance of the perceived flaw by resorting to excessive grooming, cosmetic surgery, using makeup, wearing a costume mask, and often concealing the body part they find unappealing. Therefore, BDD is a mental health problem characterized by intrusive and persistent preoccupation with an imagined defect in physical appearance that significantly impairs their ability to function and interferes with their life.² It is often associated with severe distress or impairment in social, occupational, or other key aspects of functioning brought on by the concern with a perceived appearance flaw. This discrepancy is associated with women being more concerned about their appearance.

The prevalence of BDD is highly influenced by social media usage and patients become self-conscious about their looks, which might even lead to other mental health issues like depression, obsessive-compulsive disorder (OCD), anxiety and eating disorders.³ In addition to anxiety and despair, the lifestyle of such patients is also affected by BDD because they are constantly concerned about minor or completely non-existent flaws in their bodies. Furthermore, such patients have a very high suicidal ideation rate with 80% of them have suicidal thoughts and up to 25% of the patients committing suicide.⁴ There is also a lack of awareness about body dysmorphia and many patients stay undiagnosed for their whole lives as this mental health disorder is underreported in the psychiatric world. Body dysmorphia can occur in both genders but many research papers have shown that it's more common in women than men. Women suffering from BDD might opt for various ways to satisfy unrealistic ideas about their bodies, which may include undergoing cosmetic procedures. Another cross-sectional study revealed that almost 25% of female patients seeking cosmetic procedures were positive for BDD, although cosmetic surgery perhaps can be a short-term solution for patients with BDD but it's contraindicated in such cases because they might still remain dissatisfied with the outcomes.⁵ Some patients think of aesthetic treatments as a solution but it's

temporary because there is always a chance of recurrence unless the underlying cause of BDD is diagnosed and properly treated. An extensive study showed that symptoms of body dysmorphia may get even worse after a cosmetic procedure and around 9-14% of the patients visiting the general dermatology clinics have BDD.⁶ The exact risk factors of BDD are still unknown but the recent trends on social network sites have been reported to contribute to the prevalence of this disorder. The COVID-19 pandemic affected mental health in various ways and one of them is the excessive usage of social network sites that lead to low self-esteem and body dissatisfaction in young women moreover they had a high drive for thinness to achieve their physical appearance goals.⁷

Hence, it is evident that body dysmorphia exerts a significant impact on the mental well-being of women. The relentless pursuit of an idealized body image, which is exacerbated by societal pressure and social media norms, greatly contributes to the development of mental health issues including anxiety, depression, and eating disorders. There is a need to adapt a comprehensive strategy to address body dysmorphia and the effects it has on mental health. A combination of psychoeducation, cognitive-behavioral therapy, mindfulness-based practices, and support groups should be included in prevention and intervention programs.³ It is crucial to establish a welcoming environment that questions erroneous beauty standards, encourages body positivity, and encourages women to love themselves. This persuasive issue of body dysmorphia requires a collaborative effort from healthcare professionals, social influencers, policymakers, and society at large.⁸ We aspire for a future where women's mental well-being is cultivated and safeguarded from the damaging impacts of unrealistic physical ideals by fostering a culture of self-compassion and accepting many meanings of beauty.

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