SYMPTOM

Anorexia

Anorexia is a reduced or absent desire to eat, often called loss of appetite.

WHAT IT FEELS LIKE
Little or no desire to eat

WHERE IT IS FELT
Stomach and the body's sense of hunger

MOST COMMON CAUSES
Short-term illness, medication side effects, stress

WHEN IT IS URGENT
Unable to keep fluids down or showing dehydration signs

USUALLY LASTS
Days with short illnesses; longer while the cause continues

SEE A DOCTOR IF
Persistent, recurring, or causing unplanned weight loss

Overview

Anorexia is the medical term for loss of appetite. You may feel less hungry than usual, become full quickly, or have no interest in food.

Anorexia is a symptom, not a diagnosis. It can happen with a short-term infection, digestive upset, emotional stress, medication side effects, or a longer-lasting health condition.

Anorexia is not the same as anorexia nervosa . Anorexia nervosa is an eating disorder involving restricted food intake and other changes in thoughts or behaviour around food, weight, or body shape. A person with anorexia nervosa may still feel hunger.

A brief reduction in appetite is often manageable at home if you can drink enough and your appetite begins to return. Persistent appetite loss deserves medical attention because it can lead to weight loss, weakness, and poor nutrition.

What it may feel or look like

You may notice that you:

Other symptoms can offer clues about the cause. These may include nausea, vomiting, altered

taste, mouth pain, constipation, diarrhoea, fever, low mood, anxiety, pain, or unusual tiredness.

If appetite loss continues, your clothes may become looser or you may feel weaker. Children may stop gaining weight as expected, while older adults may become frail or dehydrated more quickly.

- Rarely feel hungry
- Eat less than you normally would
- Lose interest in foods you usually enjoy
- Feel full after a few bites
- Skip meals without intending to
- Feel put off by the smell or sight of food

Common causes

Short-term illness is a common cause. Colds, influenza, stomach infections, and other infections can temporarily reduce hunger. Fever, congestion, nausea, and changes in taste or smell may also make eating less appealing.

Digestive symptoms such as indigestion, constipation, reflux, nausea, or abdominal discomfort can reduce appetite. Dental problems, mouth ulcers, dry mouth, or difficulty swallowing may make eating uncomfortable.

Stress and emotional changes can affect hunger. Grief, anxiety, depression, loneliness, and major changes in routine may lead to eating less. Appetite loss can occur alongside low mood without meaning that one specific mental health condition is present.

Medicines and treatments can change appetite, taste, digestion, or nausea. Prescription medicines, over-the-counter products, supplements, surgery, chemotherapy, and radiation treatment can all contribute. Do not stop a prescribed medicine without discussing it with a healthcare professional.

Pregnancy, pain, poor sleep, and heavy alcohol use can also reduce interest in food.

Less commonly, ongoing appetite loss may be related to hormone conditions or diseases affecting the heart, lungs, liver, kidneys, nervous system, or immune system. Cancer can cause appetite loss, but it is only one of many possible explanations and is not the usual cause of a brief episode.

Eating disorders may involve food restriction, fear of weight gain, distress about body shape, binge eating, vomiting, or compulsive exercise. These concerns warrant compassionate

medical support even if your weight has not changed.

When to seek medical care

Seek same-day medical advice if you cannot keep fluids down or have signs of dehydration. These include very little or dark urine, a very dry mouth, worsening dizziness, or unusual drowsiness. Children and older adults can become dehydrated more quickly.

Get urgent assessment if appetite loss occurs with severe or worsening abdominal pain, repeated vomiting, difficulty swallowing, a high fever with marked weakness, or rapid unplanned weight loss.

Call emergency services if you have trouble breathing, chest pain, fainting, new confusion, vomit containing blood, or black, tar-like stools. These symptoms need emergency care regardless of your appetite.

Book a routine appointment if the appetite loss:

Seek advice sooner for a baby, child, frail older adult, or anyone with a condition that makes dehydration or poor nutrition more risky.

- Does not improve as a short illness clears
- Keeps returning or is getting worse
- Causes unplanned weight loss or weakness
- Makes it difficult to meet your usual food needs
- Occurs with persistent nausea, bowel changes, pain, or low mood
- Is linked to concerns about eating, weight, or body image

How the cause is found

A healthcare professional will ask when the appetite loss began, whether it is constant, and what else has changed. They may ask about weight, swallowing, digestion, pain, infection symptoms, mood, alcohol use, pregnancy, and your relationship with food.

Bring a list of medicines, vitamins, supplements, and recent treatments. Mention any new medicine or dose change, but do not stop treatment on your own.

An examination may include checking your mouth, abdomen, hydration, weight, temperature, and other vital signs. Blood, urine, stool, or imaging tests are not always needed. They may be arranged when your symptoms or examination suggest a particular cause.

Treatment and self-care

Treatment depends on what is reducing your appetite. This might involve managing nausea or constipation, treating an infection or dental problem, reviewing medicines, or providing support for mood or eating concerns.

While your appetite is low, focus first on fluids. Take regular small sips if a full glass feels difficult. Water, milk, soup, or other drinks you tolerate can help.

Small meals and snacks may feel more manageable than three large meals. Choose foods that provide energy and protein in a modest portion, such as eggs, yoghurt, cheese, nut butter, beans, fish, or fortified cereals. Cold foods may be easier if cooking smells cause nausea.

Try eating at planned times rather than waiting to feel hungry. Gentle activity, fresh air, or eating with someone may help some people. Avoid filling up on large amounts of fluid immediately before meals if that makes eating harder.

Do not use appetite stimulants or high-dose supplements without medical advice. These products are not suitable for every cause and can have side effects.

What to expect

Appetite often returns over several days as a short-term infection or digestive upset improves. Recovery may take longer if nausea, altered taste, emotional distress, pain, or medication effects continue.

If you have been eating very little, increase intake gradually according to medical advice. People who are significantly undernourished may need supervised nutrition because restarting food too quickly can sometimes disturb the body's salt and fluid balance.

Keep track of how much you can eat and drink, related symptoms, and any weight change. This information can help at a follow-up appointment.

Common questions

Is anorexia always an eating disorder?

No. In medicine, anorexia means reduced appetite. Anorexia nervosa is a specific eating disorder and is not simply another name for temporary appetite loss.

Can stress cause loss of appetite?

Yes. Stress can affect digestion and the brain signals involved in hunger. If stress, anxiety, or

low mood is persistent or is interfering with eating, sleep, or daily life, support is available.

Should I make myself eat?

Small, regular portions are usually easier than forcing a large meal. Staying hydrated is especially important. Seek medical advice if eating causes pain, swallowing is difficult, or you cannot maintain your intake.

What if I am losing weight?

Unplanned weight loss should be discussed with a healthcare professional, particularly when it is continuing, rapid, or accompanied by weakness or other symptoms.

Sources

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- Eating Hints: Before, during, and after cancer treatment , U.S. National Cancer Institute
- Practice Guideline for the Treatment of Patients With Eating Disorders, Fourth Edition , American Psychiatric Association, 2023