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Somatoform Disorder

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Body Dysmorphic Disorder: Mean Girls

For my paper I have chosen to do one of many Somatoform Disorders known as Body Dysmorphic Disorder. A Somatoform Disorder is defined as “a condition in which physical symptoms or concerns about an illness cannot be explained by a medical or psychological disorder (e.g., depression or anxiety)” (Beidel, Bulik, Stanley, 2012, p. 169). People with Body Dysmorphic Disorder (BDD) seem to suffer real symptoms but they cannot be fully explained medically. Body Dysmorphic Disorder is also known as dysmorphophobia. The DSM-IV-TR identifies Body Dysmorphic Disorder as:

1. Preoccupation with an imagined defect in appearance. If a slight physical anomaly is present, the person’s concern is markedly excessive.
2. The preoccupation causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.
3. The preoccupation is not accounted for by another mental disorder (e.g., dissatisfaction with body shape and size in Anorexia Nervosa).

Body Dysmorphic Disorder is developed from an individual’s overwhelming concern that some part of his or her body is deformed or ugly. This concern is usually an exaggeration of a minor flaw such as a scar or large facial feature. Women who are diagnosed with BDD are likely to be obsessive about their skin or weight while men seem to focus on their genitals or muscles, also known as muscle dysmorphia. Individuals possess this state of mind for many different emotional or physical reasons, even if their peers, family, friends or even strangers view them as being normal. The cause for their state of mind may remain unknown unless they seek professional help. Those with BDD may allow their worries to “become so fixed and intense that it approaches the point of a delusion,” putting them at a high risk for suicide. According to a yearlong study “2.6% of people with BDD attempted suicide and 0.3% committed suicide” (Phillips & Menard 2006). Patients with BDD may frequently make visits to primacy care, dermatology, and plastic surgery offices but remain unsatisfied with any results and/or may become obsessive over a different body part. The person is likely to closely monitor changes to the area and irritate it by over grooming, picking with fingers or other objects and may plan a diet and exercise program that could cause more harm than good to the body. Body Dysmorphic Disorder has also led to occupational, social, and academic impairments (Beidel, Bulik, Stanley, 2012, p. 169).

The media I selected for Body Dysmorphic Disorder is the character Regina George from the movie Mean Girls. Regina seems to be very concerned with her body and how it looks. Being the “popular” girl at school, she seems to feel inclined to fit into the beautiful, blonde bombshell society demands. Regina had a nose job in the past and moved on to being concerned with her weight and silly things like how broad her shoulders are. At one point in the film, the three friends are looking in the mirror picking out their individual flaws. Regina thinks her broad shoulders are the worst, stating she has “man shoulders” (Mean Girls). This process of self-critique is a common characteristic of people with BDD. Regina begins to diet and exercise, trying anything and everything to lose the weight while maintaining a healthy lifestyle. Regina works out even while casually hanging out with friends; her obsession with her appearance clearly taking a toll on her overall lifestyle. Regina is soon banned from sitting with her friends because she is wearing sweatpants, which is “un-cool”. Throughout the film, Regina becomes more and more emotionally distraught over her weight, especially as her friends leave her and turn to the new “popular” girl.

This movie is not a good depiction of Body Dysmorphic Disorder but seems to carry some of the aspects/diagnosis’ of the disorder. The film never specifically states that any of the characters are diagnosed with BDD, however, Regina George clearly possesses many of the common symptoms among people with BDD. It seems as though Regina’s first concern with her body was her nose, but getting plastic surgery didn’t fix her problems; Regina quickly moved on to a new obsession with her body: her weight. This behavior is very common among people with BDD, as they never seem to be satisfied with their body. Regina stands in the reflection of the mirror picking out flaws she doesn’t like about herself. She seeks comfort and reassurance from her friends who initially do not think she is fat or needs to lose weight. She closely monitors body changes by counting her calories and working out even when casually hanging out with friends. Regina begins to break down emotionally as her friends start to drift away from her because she obsesses more and more over her body. As mentioned earlier, Regina’s friends eventually ban her from sitting with them at lunch because she is wearing sweatpants, which was socially unacceptable in that group. Regina’s character’s condition shows how harmful a disorder like BDD can be to one’s emotional and physical wellbeing. A disorder like BDD greatly impacts many aspects of one’s life. I believe Regina’s obsession with her appearance led her to social and academic impairments. At the end of the movie, after getting help, she began playing field hockey, established a better sense of community with her peers, led a better, healthier social life and became more academically involved. As shown in my examples Regina George clearly exemplifies a person with potential BDD, however Regina is able to regain control of her life without seeking professional help. Needing to seek outside help to return to a normal lifestyle is a defining factor between someone suffering insecurity issues and someone suffering from BDD. Although this movie was not an entirely accurate film to depict Body Dysmorphic Disorder, I do feel as though it showed the potential of the disorder. Medical specialists would likely classify Regina George as a person with BDD if the film had shown her repeatedly visiting medical consultants, doctors, and weight-loss specialists to address her problems. Also, one may consider Regina as a person with BDD if she would have tried to stop attending school because of fear of what her peers think of her image. These are two things that would stand out as a case for Body Dysmorphic Disorder.

Works Cited:

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