What Are Eating Disorders?

- Real, life-threatening mental and physical illnesses with potentially fatal consequences.\(^1\)

- Involve emotions, attitudes and behaviors surrounding weight, food, and size that severely impair functioning in major areas of life.\(^2\)

- No single cause, but rather a combination of biological, psychological, and sociocultural factors that converge and set off an individual’s predisposed genetic vulnerability.\(^3\)
Who Do Eating Disorders Affect?

- **Everyone.** People of all genders, ages, races, religions, ethnicities, sexual orientations, body shapes, and weights can be affected.⁴

- It is estimated that **9% of the U.S. population, or 28.8 million Americans**, will have an eating disorder in their lifetime.³
An eating disorder is a biopsychosocial disorder -- a mental illness caused or influenced by genetic, biological, environmental, and social elements.

**Biological Factors**
- Family history of eating disorders or other mental health conditions.\(^3,^5\)
- History of dieting\(^6\)
- Type one diabetes\(^7\)
- Genetic predisposition\(^3\)

**Psychological Factors**
- Perfectionism\(^8,^9\)
- Body image\(^10\) dissatisfaction
- History of mental health conditions\(^11\)
- Being inflexible or difficulty going back and forth between tasks\(^14\)

**Social Factors**
- Weight stigma\(^15\)
- Bullying/teasing\(^16\)
- Cultural norms that overvalue appearance\(^17\)
- Drive for perceived ideal body type\(^17\)
- Historical trauma\(^10,^18\)
9 Truths About Eating Disorders

1. Many people with eating disorders look healthy, yet may be extremely ill.²

2. Families are not to blame, and can be the patients’ and providers’ best allies in treatment.¹⁹,²⁰,²¹

3. An eating disorder diagnosis is a health crisis that disrupts personal and family functioning.⁴
4. Eating disorders are not choices, but serious biologically influenced illnesses.\(^4,22\)

5. Eating disorders affect people of all genders, ages, races, ethnicities, body shapes and weights, sexual orientations, and socioeconomic statuses.\(^3,4,23,24,25,26,27,28\)

6. Eating disorders carry an increased risk for both suicide and medical complications.\(^29,30,31\)
9 Truths About Eating Disorders

7. Genes and environment play important roles in the development of eating disorders.\textsuperscript{3,4,10,32}

8. Genes alone do not predict who will develop eating disorders.\textsuperscript{33}

9. Full recovery from an eating disorder is possible. Early detection and intervention are important.\textsuperscript{4,20,33,34}
An Overview of Eating Disorders

WARNING SIGNS, SYMPTOMS & HEALTH CONSEQUENCES
Common Warning Signs

**EMOTIONAL/BEHAVIORAL**
- Preoccupied with weight, shape and appearance
- Weight loss, dieting, and control of food are primary concerns
- Food rituals
- Social withdrawal
- Frequent dieting, body checking
- Extreme mood swings

**PHYSICAL**
- Noticeable weight fluctuations, both up and down
- Gastrointestinal complaints
- Dizziness upon standing
- Difficulty concentrating, sleeping
- Issues with dental, skin, hair, and nail health
DSM-5 TR Diagnoses

- Anorexia Nervosa (AN)²
- Bulimia Nervosa (BN)²
- Binge Eating Disorder (BED)²
- Avoidant-Restrictive Food Intake Disorder (ARFID)²
- Other Specified Feeding or Eating Disorder (OSFED)²
- Unspecified feeding or eating disorder (UFED)²

Eating disorders are complex and some eating issues will not meet diagnostic criteria. All must be taken seriously.³⁶,³⁷
Co-Occurring Disorders

● High prevalence rates\textsuperscript{38,39,40}

● Most common comorbidities are:\textsuperscript{2}
  – Mood disorders
  – Anxiety disorders
  – Substance use

● Can intensify eating disorders symptoms and impact treatment (recovery, level of care, drop-out)\textsuperscript{41,42}

● Treatment should address co-existing conditions and eating disorders\textsuperscript{20}
Health Consequences

- Cardiovascular (muscle loss, low or irregular heartbeat)\textsuperscript{29}
- Gastrointestinal (bloating, nausea, constipation)\textsuperscript{29}
- Neurological (difficulty concentrating, sleep apnea)\textsuperscript{29}
- Endocrine (hormonal changes – estrogen, testosterone, thyroid)\textsuperscript{29}
- Premature death\textsuperscript{41,43}
Resources

● To find an eating disorder treatment provider near you go to NEDA’s treatment search map here: https://map.nationaleatingdisorders.org/

● To find free and low cost support options including support groups go to: https://www.nationaleatingdisorders.org/free-low-cost-support
Eating Disorder Screening Tool

- It is a tool that can help determine if it’s time to seek professional help.

- Participants who screen as “at risk” will be directed to resources for support.

How much more or less do you feel you worry about your weight and body shape than other people your age?

- I worry a lot less than other people
- I worry a little less than other people
- I worry about the same as other people
- I worry a little more than other people
- I worry a lot more than other people
NEDA Toolkits

https://www.nationaleatingdisorders.org/toolkits
How to Help: What to Do

- **Learn** as much as you can about eating disorders.
- **Be honest** and vocal about your concerns.
- **Be caring and firm.**
- **Be a good role model**, practice what you preach
- **Suggest seeking help** from a physician and/or therapist.

Reviewed by Amy Baker Dennis, PhD, FAED, NEDA Clinical Advisory Council Member
How to Help: What Not to Do

- Place shame, blame, or guilt.
- Make rules or promises that you cannot or will not uphold.
- Give simple solutions.
- Invalidate their experience or try to convince.
- Give advice about weight, exercise, or appearance.
- Ignore or avoid the situation until it is severe or life threatening.

Reviewed by Amy Baker Dennis, PhD, FAED, NEDA Clinical Advisory Council Member
Talking about Eating Disorders

**KEEP IN MIND**

- Be prepared for negative reactions
- Taking the first step towards recovery is scary and challenging
- Make sure they get a medical check-up
- Join with the part of them that wants to get well
- Remind the person of why they want to get well

Reviewed by Amy Baker Dennis, PhD, FAED, NEDA Clinical Advisory Council Member
Get Involved With NEDA!

NEDA Walks, Campus Warriors, Volunteer Opportunities and more!

Learn More
www.nationaleatingdisorders.org
212-575-6200
References


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Thank You