



Facts About Eating Disorders: What the Research Shows

Eating disorders affect millions of Americans

- Approximately 11 million Americans suffer from an eating disorder
- Nearly half of all Americans personally know someone with an eating disorder
- Anorexia is the 3rd most common chronic illness among adolescents
- Eating disorders do not discriminate: men and women, all economic classes, young and old are affected

Eating disorders are not the patient's fault

- The risk of developing an eating disorder is 50-80% determined by genetics.
- Dieting, a normalized behavior in our culture, is a risk factor for the development of an eating disorder and can trigger eating disorders in those with a genetic predisposition.
- Even young children in our society are influenced to feel bad about their bodies and encouraged to engage in unhealthy dieting behaviors.
- Our society's emphasis on appearance and idealization of thinness promotes dangerous dieting behaviors and blinds us to people suffering and in need of treatment.
- Genetic predisposition does not spell destiny. Our strongest approach is to focus on modifying the environmental factors that influence risk and perpetuate the disordered eating.
- Due to the cultural misunderstanding of eating disorders and the idealization of thinness, patients are often unable to perceive the gravity of the illness or seek assistance on their own without the assistance of family, friends, or clinicians.

Eating disorders are dangerous

- Eating disorders kill. Eating disorders have the highest mortality rate of any mental illness, upwards of 20%.
- Eating disorders can lead to major medical complications, including cardiac arrhythmia, cognitive impairment, osteoporosis, infertility, and most seriously death.
- The mental anguish of an active eating disorder is tremendous, and persists beyond the medical consequences. Eating disorders cause social isolation and emotional distress comparable to other mental conditions like depression.
- The toll of inadequately treated illness is crippling for the patient, the family, and society.
- Suicide, depression, and severe anxiety are common during the active illness and treatment.

Eating disorders are treatable

- Treatment of an eating disorder in the US ranges from \$500 per day to \$2,000 per day. Outpatient treatment, including therapy and medical monitoring, can cost \$100,000 or more.
- Eating disorders can be successfully and fully treated to complete remission, but only 1 in 10 people with eating disorders receive treatment.
- Eating disorders affect many people before the prime of their life. Proper treatment can ensure that most sufferers will become fully contributing members of society.
- The NIH has allocated only \$1.20 in research funding per affected eating disorder patient, compared to \$159 per affected individual for schizophrenia.

- Treatment can take months to years, but early intervention with evidence-based care is improving the prognosis for a new generation of patients.
- Expert, skilled clinical support is essential to diagnose, treat, and support eating disorder recovery, but eating disorder specialists are not available in many communities and lack coordinated protocols.

Millions of Americans suffer from eating disorders, known as anorexia nervosa, bulimia nervosa, binge eating disorder, and eating disorders not otherwise specified (EDNOS). An estimated 90% + are adolescent and young women, though men and adults suffer from eating disorders as well. Eating disorders have serious mental and physical health consequences including death. In fact anorexia has the highest mortality rate of any mental illness -- up to 20%.

National Household Survey: Results are Unveiled Eating Disorders Often Untreated, Often Impair Lives

WASHINGTON January 29, 2007 - The first nationally representative study of eating disorders in the United States appears in the February 2007 edition of *Biological Psychiatry*. The National Comorbidity Survey Replication (NCS-R) is a nationally representative survey of the U.S. population that was administered face-to-face to a sample of 9,282 English-speaking adults ages 18 and older between February 2001 and December 2003. Among the results:

- Lifetime prevalence of individual eating disorders is 0.6-4.5%.
- Lifetime prevalence of anorexia nervosa is .9% in women, .3% in men.
- Lifetime prevalence of bulimia nervosa is 1.5% in women, .5% in men.
- Lifetime prevalence of binge eating disorder is 3.5% in women, 2.0% in men.
- Eating disorders frequently impair the sufferer's home, work, personal, and social life.
- Binge eating is more common than anorexia or bulimia and is commonly associated with severe obesity.
- Eating disorders display substantial comorbidity with other mental health disorders.
- While eating disorders often coexist with other mental health disorders, eating disorders often go undiagnosed and untreated. A low number of sufferers obtain treatment for the eating disorder.
- Researchers found a surprisingly high rate of anorexia and bulimia among men, representing approximately one fourth of the cases of each disorder.

The EDC points out that survey included people 18 and older, which would exclude children and teens struggling with the disorder. Also, the survey authors note that they may have missed sufferers with severe anorexia, regardless of age. The EDC notes that the actual percentages of people with eating disorders may be higher than the study's findings.

James I. Hudson, Eva Hiripi, Jr., Harrison G. Pope, & Ronald C. Kessler. (2007). "The Prevalence and Correlates of Eating Disorders in the National Comorbidity Survey Replication," *Biological Psychiatry*, 348-358.

Other Facts about Eating Disorders

- Doubled since 1960s
- Increasing in younger age groups, as young as 7 years
- Occurring increasingly in diverse ethnic and sociocultural groups
- 40-60% of high school girls diet
- 13% of high school girls purge
- 30-40% of junior high girls worry about weight

- 40% of 9-year-old girls have dieted
- 5-year-old girls are concerned about diet

Source: *Journal of the American Academy of Child and Adolescent Psychiatry*

Mortality

Anorexia Nervosa has the highest mortality rate of any psychiatric disorder, as high as 20%. Death can occur after severe bingeing in bulimia nervosa as well.

Treatment Can Work

With early detection and intervention

Treatment must be as complex as the illness including attention to the following

- Nutritional
- Medical
- Psychiatric
- Psychotherapy with patient, family

Rates of Recovery

- 1/3 recover after initial episode
- 1/3 fluctuate with recovery and relapse
- 1/3 suffer chronic deterioration

If patients do not receive adequate treatment then multiple re-hospitalizations are common.

Health Consequences

Anorexia Nervosa

- Heart Muscle Shrinkage
- Slow and Irregular Heart Beats
- Heart Failure
- Amenorrhea
- Kidney Stones and Kidney Failure
- Lanugo (Development of Excessive Fine Body Hair on Face, Arms and Legs)
- Muscle Atrophy
- Delayed Gastric Emptying, Bowel Irritation
- Constipation
- Osteoporosis
- Death

Bulimia Nervosa

- Electrolyte imbalance, heart arrhythmia, heart failure
- Teeth erosion and cavities
- Irritation and tears in the throat, esophagus and stomach
- Laxative dependence
- Emetic Toxicity
- Death