

# CHAPTER 1

## What Are Eating Disorders and Obesity?

### Chapter Review

1. What are the diagnostic criteria for Anorexia Nervosa?

#### DSM Diagnostic Criteria for Anorexia Nervosa

- A. Refusal to maintain body weight at or above a minimally normal weight for age and height
- B. Intense fear of gaining weight or becoming fat, even though underweight
- C. Disturbance in the way in which one's body weight or shape is experienced, undue influence of body weight or shape on self-evaluation, or denial of the seriousness of the current low body weight
- D. In postmenarcheal females, amenorrhea (i.e., the absence of at least three consecutive menstrual cycles)

#### SPECIFY TYPE:

- Binge-Eating/Purging Type: During the current episode of Anorexia Nervosa, the person has regularly engaged in binge-eating or purging behavior.
- Restricting Type: During the current episode of Anorexia Nervosa, the person has not regularly engaged in binge-eating or purging behavior.

2. What are the diagnostic criteria for Bulimia Nervosa?

#### DSM Diagnostic Criteria for Bulimia Nervosa

- A. Recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:
  - (1) Eating, in a discrete period (e.g., within any two-hour period), an amount of food that is definitely larger than most people would eat during a similar period of time and under similar circumstances

*(continued)*

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- (2) A sense of lack of control over eating during the episode (e.g., a feeling that one cannot stop eating or control what or how much one is eating)
- B. Recurrent inappropriate compensatory behavior in order to prevent weight gain, such as self-induced vomiting; misuse of laxatives, diuretics, enemas, or other medications; fasting; or excessive exercise.
- C. The binge eating and inappropriate compensatory behaviors both occur, on average, at least twice a week for three months.
- D. Self-evaluation is unduly influenced by body shape and weight.
- E. The disturbance does not occur exclusively during episodes of Anorexia Nervosa.

### SPECIFY TYPE:

- Purging Type: During the current episode of Bulimia Nervosa, the person has regularly engaged in self-induced vomiting or the misuse of laxatives, diuretics, or enemas
- Nonpurging Type: During the current episode of Bulimia Nervosa, the person has used other inappropriate compensatory behaviors, such as fasting or excessive exercise, but has not regularly engaged in self-induced vomiting or the misuse of laxatives, diuretics, or enemas.

### 3. What are proposed diagnostic criteria for Binge-Eating Disorder?

#### **Proposed Diagnostic Criteria for Binge-Eating Disorder (BED)**

- A. Recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:
- (1) Eating, in a discrete period (for example, within any two-hour period), an amount of food that is definitely larger than most people would eat in a similar period of time under similar circumstances
  - (2) A sense of lack of control over eating during the episode (for example, a feeling that one cannot stop eating or control what or how much one is eating)
- B. The binge-eating episodes are associated with three (or more) of the following:
- (1) Eating much more rapidly than normal
  - (2) Eating until feeling uncomfortably full
  - (3) Eating large amounts of food when not feeling physically hungry
  - (4) Eating alone because of feeling embarrassed by how much one is eating
  - (5) Feeling disgusted with oneself, depressed, or very guilty afterward
- C. Marked distress regarding binge eating is present.
- D. The binge eating occurs, on average, at least once a week for three months.

**NOTE:**

- In BED, there are no compensatory behaviors.
- Most people with BED are overweight.
- Often multiple attempts at dieting are made.

Criteria available at: <http://www.dsm5.org>

**4. How is obesity defined medically?****Diagnostic Criteria for Obesity**

An excess of body weight, relative to height, that is attributed to an abnormally high proportion of body fat. Excess defined by BMI:

- Body Mass Index (BMI) Formula: weight in kilograms/height in meters<sup>2</sup> or (weight in lbs./height in inches<sup>2</sup>) x 703
- A BMI of 30 or more is considered obese. For children, a BMI-for-age meeting or exceeding the 95th percentile is considered obese.

**Key Points**

- Eating disorders are characterized by clinically significant disturbances in eating behavior.
- The essential feature of AN is a refusal to maintain a minimally normal body weight.
- BN is characterized by repeated episodes of binge eating, as well as problematic compensatory behaviors aimed at preventing weight gain.
- Binging is defined as the uncontrolled consumption of abnormally large amounts of food in a discrete period.
- Examples of compensatory behaviors aimed at preventing weight gain include purging the body of food through self-induced vomiting or misuse of laxatives, diuretics, enemas, or other medications. Fasting and excessive exercise are examples of nonpurging compensatory behaviors.
- BED is characterized by frequent episodes of binge eating, but unlike BN, BED is not associated with the compensatory behaviors aimed at preventing weight gain.
- Obesity is not an eating disorder per se, but rather a medical condition. It is, however, strongly influenced by psychological and behavioral factors and has been shown to be responsive to psychological treatment. Obesity is defined as an excess of body weight, relative to height, that is attributed to an abnormally high proportion of body fat.

## Chapter Review Test Questions

1. Which of the following best differentiates bulimia nervosa (BN) from binge-eating disorder (BED)?
  - A. BED is not associated with the compensatory behaviors aimed at preventing weight gain characteristic of BN.
  - B. BN is not associated with the binge eating characteristic of BED.
  - C. In BED, body weight is significantly lower than normal relative to BN.
  - D. There are more attempts to diet in BN than in BED.

Answer: A

2. True or False? Binge eating is characteristic of bulimia nervosa and binge-eating disorder, but is not seen in anorexia nervosa (AN).

Answer: False

### Talking Point

Patients with anorexia nervosa find support for their practices in society's emphasis on thinness as a measure of attractiveness and beauty. Consider facilitating a discussion of the various sources and pervasiveness of this message, including popular media, parents, and peers. You may also consider facilitating a discussion of what the healthy messages are regarding the relationship among health, eating, exercise, appearance, and self-worth.

## References

- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text rev.). Washington, DC: American Psychiatric Association.
- American Psychiatric Association. DSM-5 Development. At [www.dsm5.org](http://www.dsm5.org)