

Three studies reveal noteworthy trends regarding eating disorders in the U.S.

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A School of Public Health professor has been extensively researching eating disorders in the United States and has found trends that warrant increased screening for the disorders, she explains.

In 2018, Tomoko Udo, assistant professor of Health Policy, Management and Behavior, conducted the first large-scale study on the prevalence of eating disorders in the U.S. since changes were made to [diagnostic criteria](#), using the 2012-2013 National Epidemiologic Survey on Alcohol and Related Conditions Third Wave (NESARC-III). She has since expanded that research with three major studies, finding that only half of people with eating disorders seek help, that certain demographics are less likely than others to seek help, and that persons with eating disorders have a five- to six-fold higher risk of [suicide](#) attempts.

Low rates of help-seeking

Eating disorders are associated with numerous medical complications and psychosocial impairment and as a result, it is crucial that people with these disorders receive treatment, explains Udo.

Working with colleagues at Yale University and published in *Mayo Clinic Proceedings*, Udo looked at a nationally-representative sample of 36,309 adults through NESARC-III and found that only half of people with eating disorders reported seeking help.

Estimates for seeking help for three different disorders—anorexia nervosa, bulimia nervosa, and [binge-eating disorder](#)—were 34.5 percent, 62.6 percent and 49 percent, respectively. Overall, fewer than 30 percent of those with eating disorders reported seeking help from a counselor or psychologist.

Men and ethnic/racial minorities in particular were much less likely to seek help than women or whites for binge-eating disorder, characterized by overeating in a discrete time-period with a loss of control at least once per week for three months. Hispanics were also less likely to seek help for anorexia nervosa.

"These sex differences may be due to the expectation that eating disorders primarily affect young white women, which may lead to heightened stigma surrounding eating disorders for men or ethnic/[racial minorities](#) and discourage seeking treatment," said Udo.

Elevated risk of suicide attempt

Although rates of suicide are increasing in the U.S., until now little epidemiological research has examined how eating disorders may be related to suicide attempts. Udo and Master of Public Health student Sarah Bitley, published in *BMC Medicine*, found that adults with eating disorders have a heightened risk of suicide attempts.

They again studied the nationally-representative sample of 36,309 adults through NESARC-III, which included information on eating disorders and medical history such as suicide attempts. Information was gathered from participants via in-person semi-structured diagnostic interviews.

Results showed that those with eating disorders had a five-to-six-fold higher risk of suicide attempts compared to those without eating disorders and those who had anorexia nervosa—binge/purge subtype had an especially high risk of suicide attempt. Respondents with binge-eating disorder and bulimia nervosa who had a history of a suicide attempt reported an earlier eating disorder onset and most of those with binge-eating disorder reported having the disorder before their first suicide attempt.

Placing too much value on weight or shape may increase severity

Binge-eating disorder was added to the diagnostic and statistical manual for mental [disorders](#) in 2013 (DSM-5), Udo notes. Placing too much

value on [body shape](#) or weight, or overvaluation of weight/shape, is part of the diagnostic criteria for bulimia nervosa—but not binge-eating disorder. Studies with a patient sample showed that this overvaluation could impact the severity of a person's binge-eating disorder. Udo and her team investigated whether similar differences may exist in individuals with binge-eating disorder in the general population.

The study included 207 respondents from the NESARC-III who met criteria for binge-eating disorder or bulimia nervosa in the past 12 months. Published in *Obesity*, roughly half of those with binge-eating disorder reported placing a higher value on their weight or body shape. This overvaluation was associated with greater severity of the disorder, as those participants reported more impairment in normal activities and problems getting along with others. In addition, those who had overvaluation were more likely to report having serious problems in their every day lives.

"Our findings suggest that overvaluation could signal more severe cases of binge-eating disorder, and thus is important to assess," said Udo.

"Those with binge-eating disorder who report overvaluation of shape/weight may require more intensive treatment and may benefit from treatment that specifically addresses their body image over other factors."

More information: Jaime A. Coffino et al. Rates of Help-Seeking in US Adults With Lifetime DSM-5 Eating Disorders: Prevalence Across Diagnoses and Differences by Sex and Ethnicity/Race, *Mayo Clinic Proceedings* (2019). [DOI: 10.1016/j.mayocp.2019.02.030](https://doi.org/10.1016/j.mayocp.2019.02.030)

Tomoko Udo et al. Suicide attempts in US adults with lifetime DSM-5 eating disorders, *BMC Medicine* (2019). [DOI: 10.1186/s12916-019-1352-3](https://doi.org/10.1186/s12916-019-1352-3)

Jaime A. Coffino et al. The Significance of Overvaluation of Shape or Weight in Binge-Eating Disorder: Results from a National Sample of U.S. Adults, *Obesity* (2019). [DOI: 10.1002/oby.22539](https://doi.org/10.1002/oby.22539)

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