

## DID YOU KNOW...

- 28.8 million Americans will experience an eating disorder in their lifetime.
- Eating disorders are not choices, but serious biologically-influenced illnesses with a genetic component.
- It is estimated that between 28-74% of the risk for developing an eating disorder is through genetic heritability.
- Social and environmental factors such as bullying, social media, trauma, or onset of other mental illnesses can impact eating disorder development.
- Eating disorders affect people of all genders, ages, races, ethnicities, body shapes and weights, physical and neurological abilities, sexual orientations, and socioeconomic statuses.
- Less than 6% of people with eating disorders are medically diagnosed as “underweight.”
- Eating disorders carry an increased risk for both suicide and medical complications. Every 52 minutes someone dies as a direct result of an eating disorder.
- Families can be the patients’ and providers’ best allies in treatment.
- Full recovery from an eating disorder is possible. Early detection, intervention, and access to treatment are important.

## FOR MORE INFORMATION

National Alliance for Eating Disorders  
Phone: (866) 662-1235  
[www.allianceforeatingdisorders.com](http://www.allianceforeatingdisorders.com)  
[www.findEDhelp.com](http://www.findEDhelp.com)

## ABOUT THE ALLIANCE

The National Alliance for Eating Disorders (formerly The Alliance for Eating Disorders Awareness) is the leading national non-profit organization providing education, referrals, and support for all individuals (and their loved ones) experiencing eating disorders. Founded in October 2000, The Alliance has worked tirelessly to support eating disorder awareness and education, promote and provide access to care, offer comprehensive services such as support groups and outpatient care, and eliminate the shame and stigma associated with eating disorders.

The Alliance’s services include:

- Referrals through a therapist-staffed helpline and comprehensive referral website/app, [findEDhelp.com](http://findEDhelp.com).
- Free, weekly, therapist-led support groups offered nationwide both virtually and in-person.
- Educational presentations to schools, communities, and agencies.
- Continuing education to healthcare providers and hospitals.
- Low-cost, life-saving, outpatient treatment to adults living in South Florida who are uninsured or underinsured.
- Unique and empowering scale smashing events and SmashTALK panel discussions aimed at college and university students.
- Advocacy for eating disorders and mental health legislation.

The Alliance understands that eating disorders are often impacted by a number of social, economic, and environmental factors. Using a Health at Every Size® framework, The Alliance aims to create an inclusive, culturally competent, and supportive space that acknowledges the multitude of factors that contribute to eating disorders.

**NATIONAL ALLIANCE**  
for Eating Disorders

# WHAT ARE EATING DISORDERS?

Eating disorders involve serious disturbances in eating behaviors, such as extreme and unhealthy reduction of food intake or severe overeating, as well as feelings of extreme concern about body shape or weight.

[www.allianceforeatingdisorders.com](http://www.allianceforeatingdisorders.com)  
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## WHAT ARE EATING DISORDERS?

Eating disorders involve serious disturbances in eating behaviors, such as extreme and unhealthy reduction of food intake or severe overeating, as well as feelings of extreme concern about body shape or weight. Eating disorders do not discriminate between ages, genders, socioeconomic statuses, sexual orientations, abilities, neurodiversities, body shapes/sizes, races, and ethnicities. Eating disorders are complex biopsychosocial illnesses that have serious emotional and physical consequences. It is important to note that there are negative health consequences of equal severity across all eating disorder categories.

## ANOREXIA NERVOSA (AN)

Anorexia Nervosa is characterized by a restriction of energy intake relative to energy requirements, body image disturbances, and an intense fear of food or gaining weight. Individuals with Anorexia Nervosa may restrict calorie intake and/or purge calories through self-induced vomiting, compulsive exercise, or laxative/diuretic abuse. Restriction of energy intake relative to energy requirements may lead to significantly lower body weight and severe medical complications. Anorexia Nervosa has one of the highest mortality rates of all psychiatric conditions, with 1 and 5 deaths from suicide.

## BULIMIA NERVOSA (BN)

Bulimia Nervosa is characterized by episodes of bingeing (consuming a large amount of food in a short period of time) and purging (eliminating calorie consumption) at least once a week for three months. Methods of purging may include self-induced vomiting, compulsive exercise, laxative use, diuretic use, insulin misuse, and/or diet pill use. Behaviors are typically accompanied by negative body image related to size, weight, and shape.

## BINGE EATING DISORDER (BED)

Binge Eating Disorder is rooted in restriction, and characterized by recurrent episodes of rapid overeating when not hungry, and often until extreme fullness. The bingeing episodes are marked by distress and a sense of lack of control, followed by feelings of shame, guilt, and depression. It occurs, on average, at least once a week over three months. While around 8% of American adults will suffer from Binge Eating Disorder in their lifetime, this rate is much higher (30%) among Black women in larger bodies. Furthermore, around 50% of the risk of developing Binge Eating Disorder is genetic.

## OTHER SPECIFIED FEEDING OR EATING DISORDERS (OSFED)

Other Specified Feeding or Eating Disorders (OSFED) are characterized as disturbances in eating behaviors that do not meet full criteria for Anorexia Nervosa, Bulimia Nervosa, or Binge Eating Disorder, but involve maladaptive thoughts and behaviors related to food, eating, and body image.

OSFED may include, but are not limited to:

- “Atypical” Anorexia Nervosa
- Purging Disorder
- Night Eating Syndrome

“Atypical” Anorexia Nervosa is characterized by meeting all the criteria for Anorexia Nervosa except for a medically underweight BMI. Individuals with “Atypical” Anorexia Nervosa experience equally severe medical consequences as those with other eating disorder diagnoses. As such, “Atypical” Anorexia Nervosa demonstrates weight bias within the diagnostic criteria.

## AVOIDANT/RESTRICTIVE FOOD INTAKE DISORDER (ARFID)

Avoidant/Restrictive Food Intake Disorder (ARFID) is a clinically significant eating or feeding disturbance characterized by a failure to meet appropriate nutritional needs. Individuals with ARFID exhibit a general lack of interest in eating or food, food avoidance based on sensory characteristics, or concerns about adverse consequences of eating, unrelated to body image or weight concerns. Symptoms can include nutritional deficiency, weight loss, and interference with psychosocial functioning.

## HOW TO HELP

- Learn about eating disorders.
- Find an appropriate time and place to privately talk. Don't let being scared keep you from having the conversation.
- Use “I” statements when communicating your concerns.
- Don't comment on calorie/food intake, weight, appearance, etc.
- Express your support and emphasize the importance of professional and specialized help.
- Validate your loved one's feelings and struggles.
- Don't play the blame game and take care of your own mental, physical, and emotional health.
- Don't promise to keep it a secret.

## GETTING HELP

If you think you or someone you know may be experiencing an eating disorder, please seek specialized, professional help as soon as possible.

For more information on how to receive help, please visit [findEDhelp.com](http://findEDhelp.com), [allianceforeatingdisorders.com](http://allianceforeatingdisorders.com), or call us at 866-662-1235.