Anorexia nervosa has a six-fold increase in risk for mortality and 50-70% will recover with treatment. Anorexia develops from an intense fear of obesity and is a debilitating illness with one of the highest mortality rates of any psychiatric disorder. Therefore, information on risk factors and prevention is crucial.

Bulimia nervosa and binge-eating disorder tend to run in families. This suggests either genetic transmission or shared psychological factors affecting family members. Anorexia alone is 56% determined by genetics.

Body dissatisfaction is a key risk factor for eating disorders.

About half of all women are unhappy with their body.

Eating disorders also affect the male population but with a lower prevalence.

Cognitive-behavioral therapy has been found more effective than other treatments, including pill placebo, stress management, and antidepressant treatment, in reducing binge eating and purging. CBT typically eliminates binge eating and purging in 30 to 50% of all cases.

The media, society, family, and psychological factors are believed to affect weight concerns and promote disordered eating behaviors. A preliminary aspect of treatment may involve addressing motivation, engagement, and "readiness to change."

There is no one known cause of eating disorders.

Binge eating is the most common disorder and affects 1-2 million Americans.

When considering the context of any given binge, there are three clusters of triggering factors: External factors including place and time, social factors including the presence or absence of others, and internal factors including thoughts and feelings.

About 8% of eating disorder sufferers get the treatment they need.

Less than 50% of eating disorder sufferers get the treatment they need.

There is no one known cause of eating disorders.

Learn more at oxfordclinicalpsych.com