

inappropriate compensatory behaviors, such as self-induced vomiting; misuse of laxatives, diuretics, or other medications; fasting; or excessive exercise ([American Psychiatric Association, 2013](#)). The binge behavior consists of secretive, frenzied consumption of large amounts of high-calorie (or “forbidden”) foods during a brief time (usually ≈ 2 hours). The binge is counteracted by a variety of weight control methods (**purging**). These binge–purge cycles are followed by self-deprecating thoughts, a depressed mood, and an awareness that the eating pattern is abnormal.

Eating disorder not otherwise specified (EDNOS) is an additional diagnosis for eating disorders. These disorders have components of both AN and BN that are not characteristics of the established diagnostic criteria for AN and BN. Binge eating disorder (BED) is a type of EDNOS. Binge eating disorder (BED) is a distinct diagnostic category that is very similar to BN, with the exception that purging is not involved. Eating disorder not otherwise specified (EDNOS) is an additional diagnosis for eating disorders in the DSM. EDNOS includes subthresholds of the aforementioned disorders, as well as purging disorder, night eating syndrome, and a residual category for clinically significant problems meeting the definition of a feeding or eating disorder but not satisfying the criteria for any other disorder or condition ([American Psychiatric Association, 2013](#)).

The incidence of AN in adolescent females in the United States has been estimated at 0.5%, and between 1% and 5% meet the criteria for BN, with up to 10% cases attributable to males ([Rosen, 2010](#)). These prevalences will likely climb as practitioners begin to use the new DSM criteria. A nationally representative study found no differences in the prevalence of AN between adolescent boys and girls, but did find higher prevalences of BN among girls compared to boys ([Swanson, Crow, Le Grange, et al, 2011](#)). BED is more common among males ([Smink, van Hoeken, and Hoek, 2012](#)). Young people under the age of 12 years old are the fastest growing group of youth who report eating disorder tendencies ([Funari, 2013](#)).

Etiology and Pathophysiology

The etiology of these disorders remains unclear. A combination of