

# DIAGNOSTIC CRITERIA FROM DSM-IV-TR

## 307.1 Anorexia Nervosa

- A. Refusal to maintain body weight at or above a minimally normal weight for age and height (e.g., weight loss leading to maintenance of body weight less than 85% of that expected; or failure to make expected weight gain during period of growth, leading to body weight less than 85% of that expected.)
- 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. (A woman is considered to have amenorrhea if her periods occur only following hormone, e.g., estrogen, administration.)

Specify type:

**Restricting Type:** during the current episode of Anorexia Nervosa, the person has not regularly engaged in binge-eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics, or enemas)

**Binge-Eating/Purging Type:** during the current episode of Anorexia Nervosa, the person has regularly engaged in binge-eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics, or enemas)

## 307.51 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 of time (e.g., within any 2-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
  - (2) a sense of lack of control over eating during the episode (e.g., a feeling that one cannot stop eating or control 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 3 months.
- D. Self-evaluation is unduly influenced by body shape and weight.
- E. The eating disorder 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

## 307.50 Eating Disorder Not Otherwise Specified\*

The Eating Disorder Not Otherwise Specified category is for disorders of eating that do not meet the criteria for any specific Eating Disorder. Examples include:

- 1. For females, all of the criteria for Anorexia Nervosa are met except that the individual has regular menses.
- 2. All of the criteria for Anorexia Nervosa are met except that, despite significant weight loss, the individual's current weight is the normal range.
- 3. All of the criteria for Bulimia Nervosa are met except that the binge eating and inappropriate compensatory mechanisms occur at a frequency of less than twice a week or for a duration of less than 3 months.
- 4. The regular use of inappropriate compensatory behavior by an individual of normal body weight after eating small amounts of food (e.g., self-induced vomiting after the consumption of two cookies).
- 5. Repeatedly chewing and spitting out, but not swallowing, large amounts of food.
- 6. Binge-eating disorder: recurrent episodes of binge eating in absence of the regular use of inappropriate compensatory behaviors characteristic of Bulimia Nervosa (see appendix B in a copy of the DSM-IV-TR for suggested research criteria.)

\* EDNOS might change based on other changes in ED diagnostic criteria in the upcoming DSM-V-TR. It is recommended that Binge Eating Disorder, described in this section of DSM-IV, be recognized as an independent disorder in DSM-5. Recommended changes in the criteria for Anorexia Nervosa, Bulimia Nervosa, and for eating and feeding disorders usually beginning in childhood should also reduce the need for Eating Disorder Not Otherwise Specified.

The work group is considering whether it may be useful and appropriate to describe other eating problems (such as purging disorder--recurrent purging in the absence of binge eating, and night eating syndrome) as conditions that may be the focus of clinical attention. Measures of severity would be required, and these conditions might be listed in an Appendix of DSM-5.

## The SCOFF Eating Disorders Assessment Questionnaire:

Assign one point for every "yes"; a score greater than two (>2 indicates a possible case of Anorexia Nervosa or Bulimia Nervosa.

1. Do you make yourself sick because you feel uncomfortably full?
2. Do you worry you have lost control over how much you eat?
3. Have you recently lost more than 15 lbs. in a 3 month period?
4. Do you believe yourself to be fat when others say you are too thin?
5. Would you say that food dominates your life?

*\*The SCOFF questionnaire utilizes an acronym in a simple five question test devised to assess the possible presence of an eating disorder. (Sick, Control, One Stone, Fat, Food)*

