

EATING DISORDERS

Includes Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and Eating Disorders Not Otherwise Specified.

Background

This case definition was developed by the Armed Forces Health Surveillance Division (AFHSD) for the purpose of epidemiological surveillance of a condition important to military-associated populations.

Clinical Description

Eating disorders are characterized by significant disturbances in eating behavior and weight regulation. The conditions include anorexia nervosa, bulimia nervosa, binge eating disorder, and eating disorders not otherwise specified. Anorexia nervosa is characterized by a refusal to maintain normal body weight, fear of gaining weight or becoming fat, and a disturbed perception of one's body weight. Bulimia nervosa is characterized by recurrent episodes of binge eating, inappropriate compensatory behavior to prevent weight gain such as self-induced vomiting, laxative and diuretic use, fasting and excessive exercise. Binge eating disorder is characterized by recurrent episodes of eating large quantities food, often to the point of discomfort, and associated with feelings of loss of control, distress and guilt. All of the disorders are more common among adolescents and young adult women in industrialized societies. They often coexist with other disorders such as depression, anxiety, and substance abuse. To restore normal eating behavior and nutrition, treatment is often necessary; treatment includes psychotherapy, medical care, nutrition counseling, and medication.^{1,2}

Case Definition and Incidence Rules

For surveillance purposes, a case of an eating disorder is defined as:

- *One hospitalization* with a case defining diagnosis of an eating disorder (see ICD9 and ICD10 code lists below) in the *first or second* diagnostic position.
- *One outpatient or Theater Medical Data Store (TMDS) medical encounter* with a case defining diagnosis of an eating disorder (see ICD9 and ICD10 code lists below) in the *first* diagnostic position.

Incidence rules:

For individuals who meet the case definition:

- The incidence date is considered the date of the first hospitalization or outpatient medical encounter that includes a case defining diagnosis of an eating disorder.

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¹ Armed Forces Health Surveillance Center. Diagnosis of Eating Disorders Among Active Component Service Members, U.S. Armed Forces, 2013-2017. *Medical Surveillance Monthly Report (MSMR)*, 2018 June; 25 (6): 18-25.

² Eating Disorders: About More than Food. National Institutes of Mental Health. See <https://www.nimh.nih.gov/health/publications/eating-disorders/index.shtml>; accessed March 2022.



Case Definition and Incidence Rules *(continued)*

- Individuals with more than one eating disorder recorded are considered an incidence case only once, the first recorded diagnosis of either anorexia nervosa or bulimia nervosa is given priority, and both are prioritized over binge eating disorder and eating disorders not otherwise specified.
- An individual is considered an incident case *once per lifetime*.

Exclusions:

- Individuals with a case defining diagnosis prior to the surveillance period.

Codes

The following ICD9 and ICD10 codes are included in the case definition:

Condition	ICD-10-CM Codes	ICD-9-CM Codes
Anorexia nervosa	<i>F50 (eating disorders)</i>	
	F50.0 (anorexia nervosa...)	307.1 (anorexia nervosa)
	- F50.00 (unspecified)	
	- F50.01 (restricting type)	
	- F50.02 (binge eating/purging type)	
Bulimia nervosa	F50.2 (bulimia nervosa)	307.51 (bulimia nervosa)
Other eating disorders	F50.8 (other eating disorders)	307.59 (other disorders of eating)
	- F50.81 (binge eating disorder)	
	- F50.82 (avoidant/restrictive food intake disorder), <i>new 2018</i>	
	- F50.89 (other specified eating disorder)	
	F50.9 (eating disorder, unspecified)	307.50 (eating disorder, unspecified)

Development and Revisions

- In July of 2017 the case definition was updated to include ICD10 codes.
- This case definition was developed in September of 2014 by the *Medical Surveillance Monthly Report (MSMR)* staff for an article on eating disorders.¹ The case definition was developed based on reviews of the ICD9 and ICD10 codes, the scientific literature, and previous Armed Forces Health Surveillance Center (AFHSC) analyses.



Case Definition and Incidence Rule Rationale

- This case definition requires only *one* outpatient medical encounter in the *first* diagnostic position to define a case. Given eating disorders are often chronic or comorbid conditions, investigators may want to explore a case definition that requires *two outpatient* visits in the *first* diagnostic position or *one outpatient* visit in *any* diagnostic position to increase sensitivity.

Code Set Determination and Rationale

- In March 2022, ICD10 code F50.82 (avoidant/restrictive food intake disorder) was added to the code set.
- Binge eating disorder was added as an official diagnosis to the *Diagnostic and Statistical Manual of Mental Disorders, 5th Edition* and also incorporated into the ICD10 coding system.
- For a more specific case definition investigators may want to consider using code V65.3 (dietary surveillance and counseling).

Reports

The AFHSD reports on eating disorders in the following reports:

- Periodic *MSMR* articles

Review

Mar 2022	Case definition reviewed and updated by the AFHSD Surveillance Methods and Standards (SMS) working group
July 2017	Case definition reviewed and adopted by the Armed Forces Health Surveillance Branch (AFHSB) SMS working group.
Sept 2014	Case definition developed by AFHSC <i>MSMR</i> staff.

Comments

None

