

Eating Disorders in Boys and Young Men: The Importance of Muscularity  
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It is widely believed that eating disorders primarily affect young women. Most research in eating disorders is conducted with female participants and most interventions are developed with women in mind. Even most professionals who specialize in the treatment of eating disorders are women. Women are far more likely to be diagnosed with anorexia nervosa or bulimia nervosa than men. Could this focus on women lead to an under diagnosis of eating disorders in men?

Traditional definitions of eating disorders have focused on desire of thinness. While body image dissatisfaction for women is typically centered on weight loss and desire for thinness, men tend to be more focused on muscularity than thinness. In "Prospective associations of concerns about physique and the development of obesity binge drinking, and drug use among adolescent boys and young adult men," Field et al (2014) assess a range of concerns with physique and eating disorders amongst males. They included questions about muscularity (ie. wanting bigger, more toned, or more defined muscles) and use of supplements (including creatine, growth hormone derivatives, anabolic steroids, and a variety of other substances) to improve appearance, gain muscle, or gain strength. The researchers used data from the Growing Up Today Study (GUTS) to prospectively assess 5500 males who were between the ages of 12-18 in 1999 and followed the participants until 2011. In addition to body image and eating disorders, they also assessed body mass index, binge drinking, drug use, and depressive symptoms.

By adulthood, nearly 18% of the sample reported extreme concern with their weight and physique and at least 7.6% were also engaging in potentially unhealthy behaviors in an attempt to attain their ideal physique. Only 2.5% of the sample reported high concerns with thinness alone, less than 3% met full or partial criteria for binge eating disorder, and less than 1% met full or partial criteria for bulimia nervosa or purging disorder. However, 31% reported some eating disorder symptoms including infrequent binge eating, purging, or overeating without loss of control. Results indicated that concerns with muscularity increased with age, but concerns with thinness did not.

High concern with muscularity and use of supplements was associated with increased risk of frequent binge drinking and drug use. High concern with both muscularity and thinness was also associated with increased risk of drug use. High concerns with thinness but not muscularity, infrequent bulimic behaviors, and overeating without loss of control were all associated with increased depressive symptomology.

The authors conclude that traditional measures underestimate the prevalence of eating disorders in men because they focus on desire for thinness and do not assess for concerns with muscularity. Focusing on the cognitive aspects of eating disorders (for example, undue influence of weight and shape in self-evaluation) may help detect eating disorders that do not fall into the traditional categories, as is the case for many men. In addition, the different subtypes of eating

disorders in men reported in this study indicate that each subtype may be represent different risk factors for substance abuse and depression.

*Reference:* Field AE, Sonneville KR, Crosby, RD, et al. Prospective Associations of Concerns About Physique and the Development of Obesity, Binge Drinking, and Drug Use Among Adolescent Boys and Young Adult Men. *JAMA Pediatrics*, 2014, 168 (1): 34-39.