

# Information Handout

Professional Version | US English

# Recognizing Bulimia Nervosa



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## Description

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Psychiatric diagnostic frameworks serve multiple purposes. Classification of mental disorders enables clinicians and researchers to speak a common language when describing patterns of experience and behavior, guides appropriate treatment interventions, and acts as a coding system for insurance purposes. The success of these classification frameworks has varied across diagnoses but in the best cases has led to improved understanding and treatment of conditions, and has helped many service users who find such classification helpful (Perkins et al, 2018).

Diagnostic frameworks are not without controversy. They have been criticized on grounds of reliability, validity, and distortions due to commercial interests (Zigler & Phillips, 1961; Frances & Widiger, 2012; Bell, 2017). Perhaps most importantly there are instances where they have had, and continue to have, extremely negative effects upon service users (Perkins et al, 2018). Diagnosis is not the only way of understanding people and their experiences. Many clinicians and their clients find that attending to our personal stories and narratives is a helpful approach, and psychological formulation is one technique for bringing together information about what has happened to an individual and the sense that they have made of it (British Psychological Society, 2018).

Notwithstanding the above caveats, the '*Recognizing...*' series from Psychology Tools is designed to aid clinicians' understanding of the similarities and differences in the way that the two primary psychiatric diagnostic systems classify mental health problems. Their formatting for aid of comparison means that some detail has been purposefully excluded, and clinicians are encouraged to refer to the original source material for formal diagnostic purposes.

Bulimia nervosa is characterized by recurrent episodes of binge eating and compensatory behaviors to prevent weight gain. *Recognizing Bulimia Nervosa* compares the DSM-5 and ICD-10 criteria for bulimia, and the *Bulimia Nervosa Checklist* is an assessment tool for clinicians.

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# Instructions

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The 'Recognizing...' series from Psychology Tools is designed to aid clinicians' understanding of the similarities and differences in the way that the two primary psychiatric diagnostic systems classify mental health problems. Their formatting for aid of comparison means that some detail has been purposefully excluded, and clinicians are encouraged to refer to the original source material for formal diagnostic purposes. In particular it has been assumed that symptoms cause clinically significant distress or impairment unless otherwise stated.

Information for the 'Recognizing ...' series was drawn from:

- The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*.
- The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10)*. The ICD-10 is available in two versions: (1) The Clinical Descriptions and Diagnostic Guidelines (CDDG) or 'blue book' is intended for general clinical, educational and service use; (2) The Diagnostic Criteria for Research (DCR) or 'green book' was designed to facilitate research.

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# References

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# Recognizing Bulimia Nervosa

	DSM-5	ICD-10
<b>Symptoms</b>	<b>4 of:</b>	<b>3 of:</b>
Recurrent episodes of binge eating (overeating) where excessively large amounts of food are consumed in a discrete period of time.	✓	✓
A feeling of lack of self-control over eating during a binge eating episode.	✓	
Recurrent behaviors to counteract weight gain such as self-induced vomiting, purging, fasting, use of drugs, diuretics, or excessive exercise.	✓	✓
Body weight and shape has an undue influence on self-evaluation.	✓	
Self-perception of being too fat and an intrusive dread of fatness.		✓

	2 of:	1 of:
<b>Duration and exclusions</b>		
The recurrent binge eating and behaviors to counteract weight gain have both occurred at least once a week for three months.	✓	
The recurrent episodes of overeating have occurred at least two times per week for three months.		✓
The disturbance does not exclusively occur during episodes of anorexia nervosa.	✓	

# Bulimia Nervosa Checklist

	DSM-5	ICD-10
<b>Symptoms</b>	<b>4 of:</b>	<b>3 of:</b>
Recurrent episodes of binge eating (overeating) where excessively large amounts of food are consumed in a discrete period of time.	<input type="checkbox"/>	<input type="checkbox"/>
A feeling of lack of self-control over eating during a binge eating episode.	<input type="checkbox"/>	
Recurrent behaviors to counteract weight gain such as self-induced vomiting, purging, fasting, use of drugs, diuretics, or excessive exercise.	<input type="checkbox"/>	<input type="checkbox"/>
Body weight and shape has an undue influence on self-evaluation.	<input type="checkbox"/>	
Self-perception of being too fat and an intrusive dread of fatness.		<input type="checkbox"/>

<b>Duration and exclusions</b>	<b>2 of:</b>	<b>1 of:</b>
The recurrent binge eating and behaviors to counteract weight gain have both occurred at least once a week for three months.	<input type="checkbox"/>	
The recurrent episodes of overeating have occurred at least two times per week for three months.		<input type="checkbox"/>
The disturbance does not exclusively occur during episodes of anorexia nervosa.	<input type="checkbox"/>	

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## Resource details

Title: Recognizing Bulimia Nervosa

Type: Information Handout

Language: English (US)

Translated title: Recognizing Bulimia Nervosa

URL: <https://www.psychologytools.com/resource/recognizing-bulimia-nervosa>

Resource format: Professional

Version: 20230721

Last updated by: JP

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