Eating Disorder Data
Ages: infancy – 25, 2018 – 2022

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September 2023

Oregon Health Authority
CHILD AND FAMILY BEHAVIORAL HEALTH
Health Systems Division

Things to know about the data

- Ages: infancy through 25
- Data is generated from
  - Medicaid Management Information System (MMIS)
  - Data Support/Surveillance and Utilization Review System (DSSURS)
- Primary diagnosis codes only
  - Excludes dual diagnosis data
- Calendar year
- Counts less than 10 are suppressed

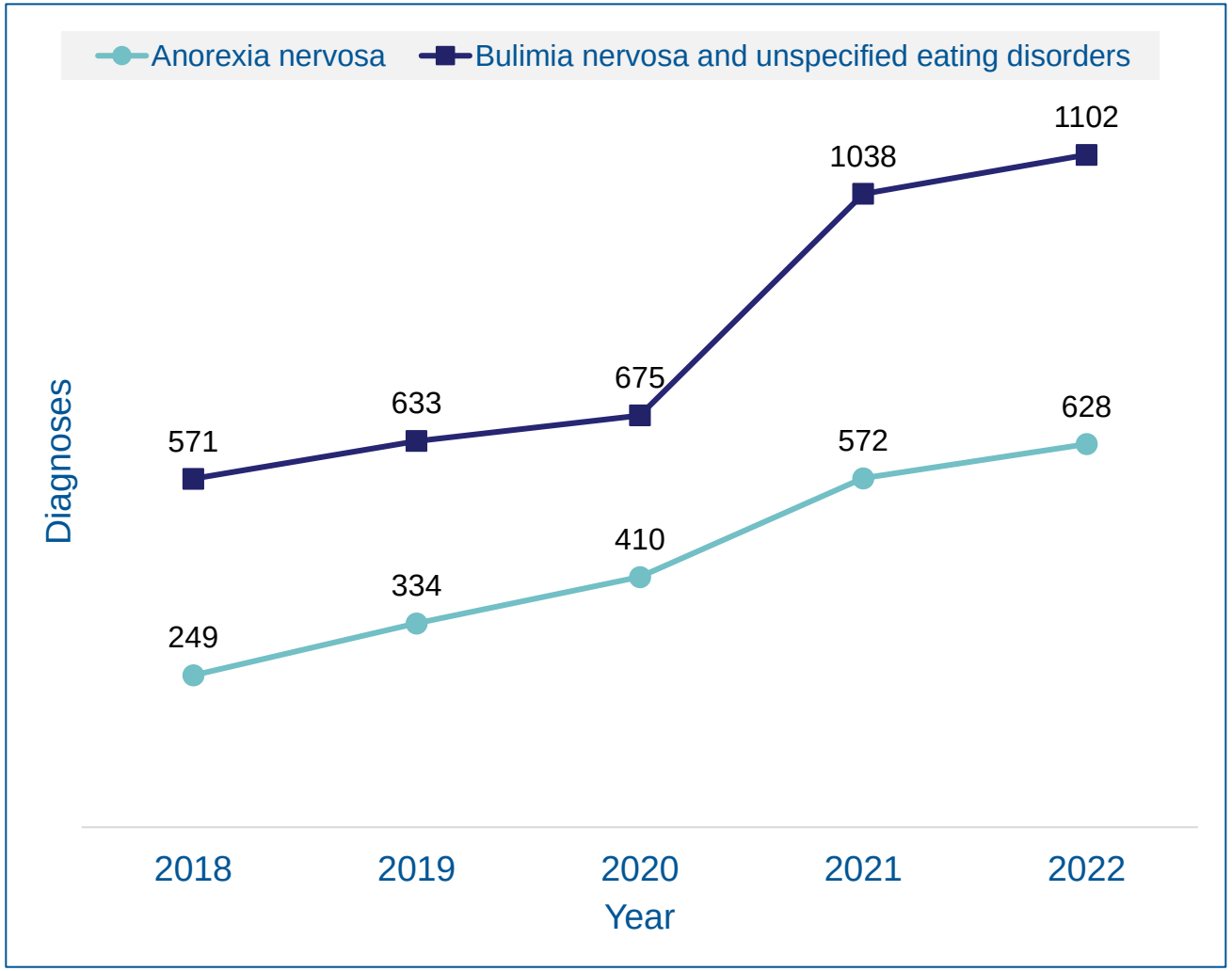
What are eating disorders?

- Bulimia nervosa (“Bulimia”)
  - recurrent binge eating (in excess portions during a discrete period of time while feeling a lack of control to stop)
  - recurrent compensatory behavior to avoid weight gain, such as self-induced vomiting, misuse of laxatives, diuretics, or other medications, fasting, or excessive exercise
  - At least once per week for three months
  - Self-evaluation is unduly influenced by body shape and weight
  - Does not occur exclusively during episodes of anorexia nervosa
- Anorexia nervosa (“Anorexia”)
  - restriction of energy intake relative to requirements leading to a significantly low body weight in the context of age, sex, developmental trajectory, and physical health
  - Intense fear of gaining weight or becoming fat, even though underweight
  - Disturbance in the way in which one’s body weight or shape is experiences, undue influence of body weight or shape on self-evaluation, or denial of the seriousness of the current low body weight.

Eating disorder 5-year trends

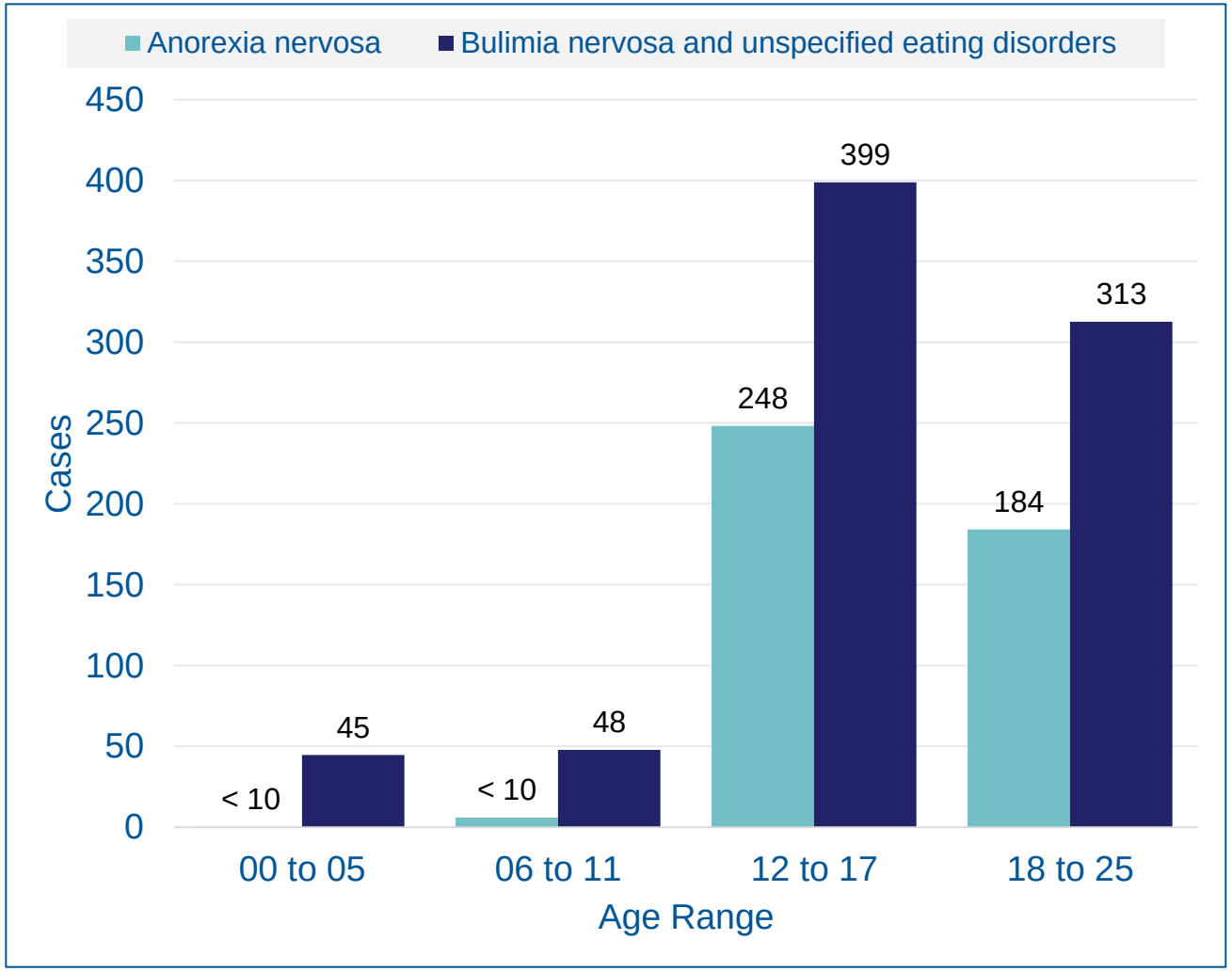
- There are significantly more bulimia diagnoses than anorexia diagnoses
- Anorexia has greater average increases per year compared to bulimia

Year	Percentage Increase	
	Bulimia	Anorexia
2018-2019	10.9%	34.14%
2019-2020	6.64%	22.75%
2020-2021	**53.78%**	**39.5%**
2021-2022	6.17%	9.8%
2018-2022	93%	152.2%



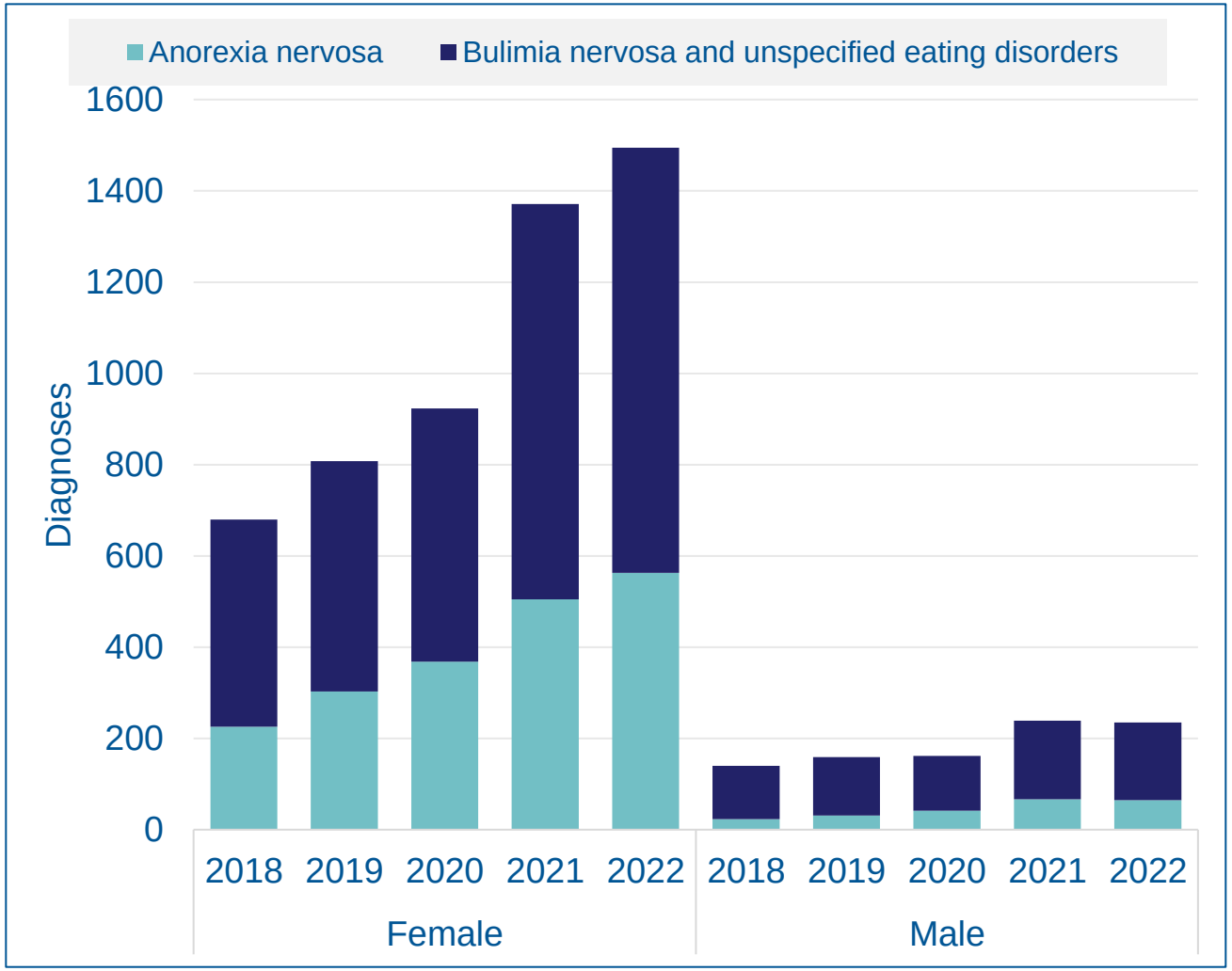
Average diagnosis count per age group, 2018-2022

- Children ages 0-11 are rarely diagnosed with anorexia but may be diagnosed with bulimia.
- Youth ages 12-17 receive the most diagnoses of any age group.
- Children and young people ages 12-25 are more likely to receive a diagnosis of anorexia or bulimia.
- A bulimia diagnosis is more prevalent over an anorexia diagnosis for all youth diagnosed with eating disorders

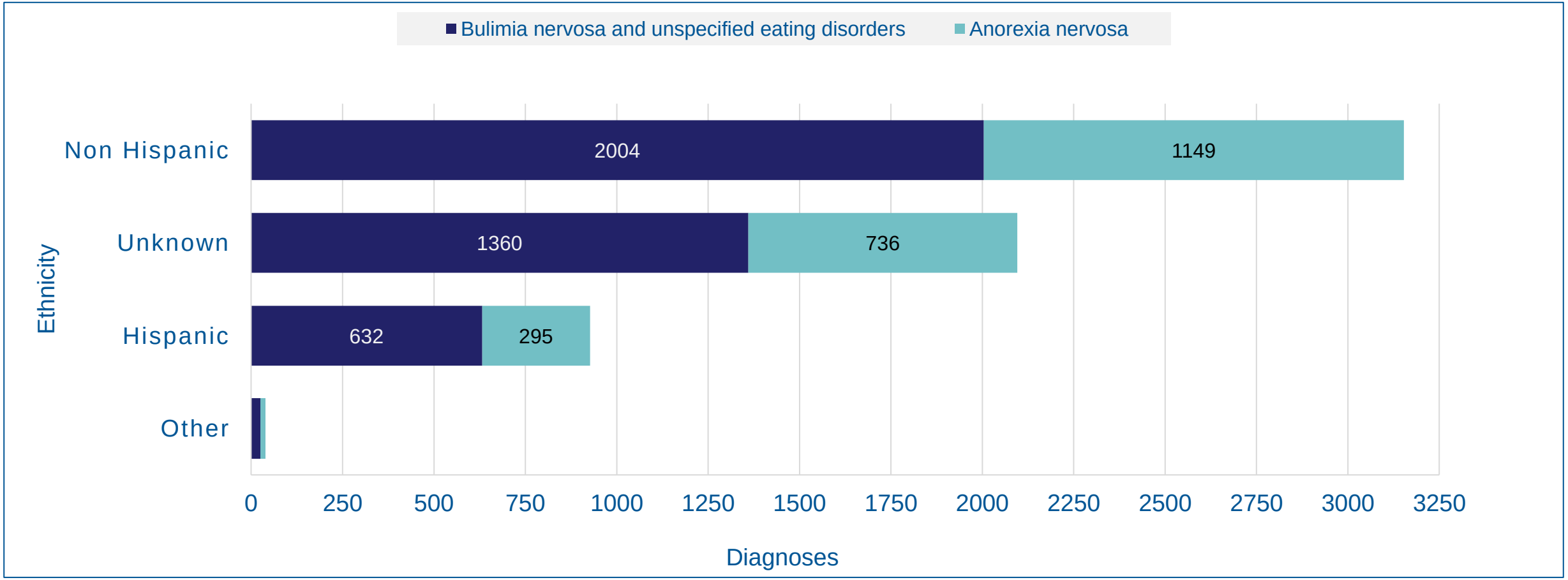


Eating disorder diagnoses by sex

- Despite upward trends, males are diagnosed less frequently than females
- Bulimia: nearly 1000 females at peak to less than 200 males diagnosed in any year
- Anorexia: nearly 600 females at peak to less than 70 males diagnosed in any year

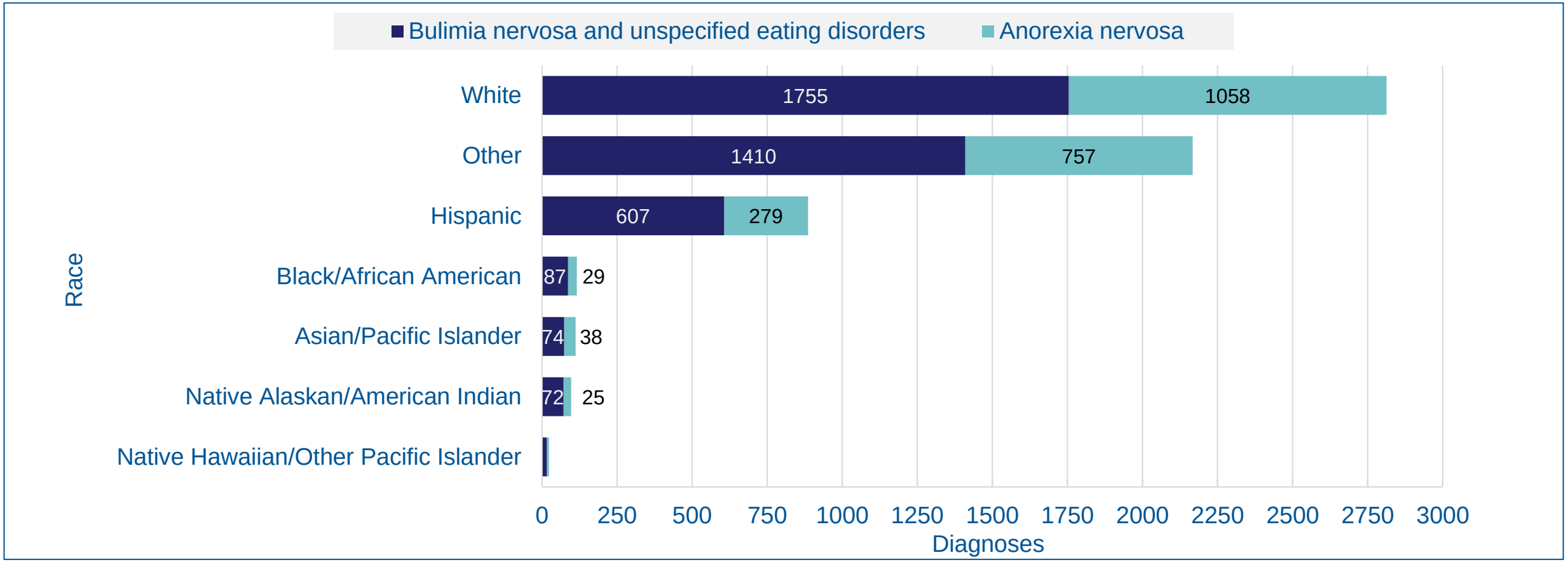


Eating disorder diagnoses by ethnicity



May be statistically unreliable due to small numbers; interpret with caution.

Eating disorder diagnoses by race



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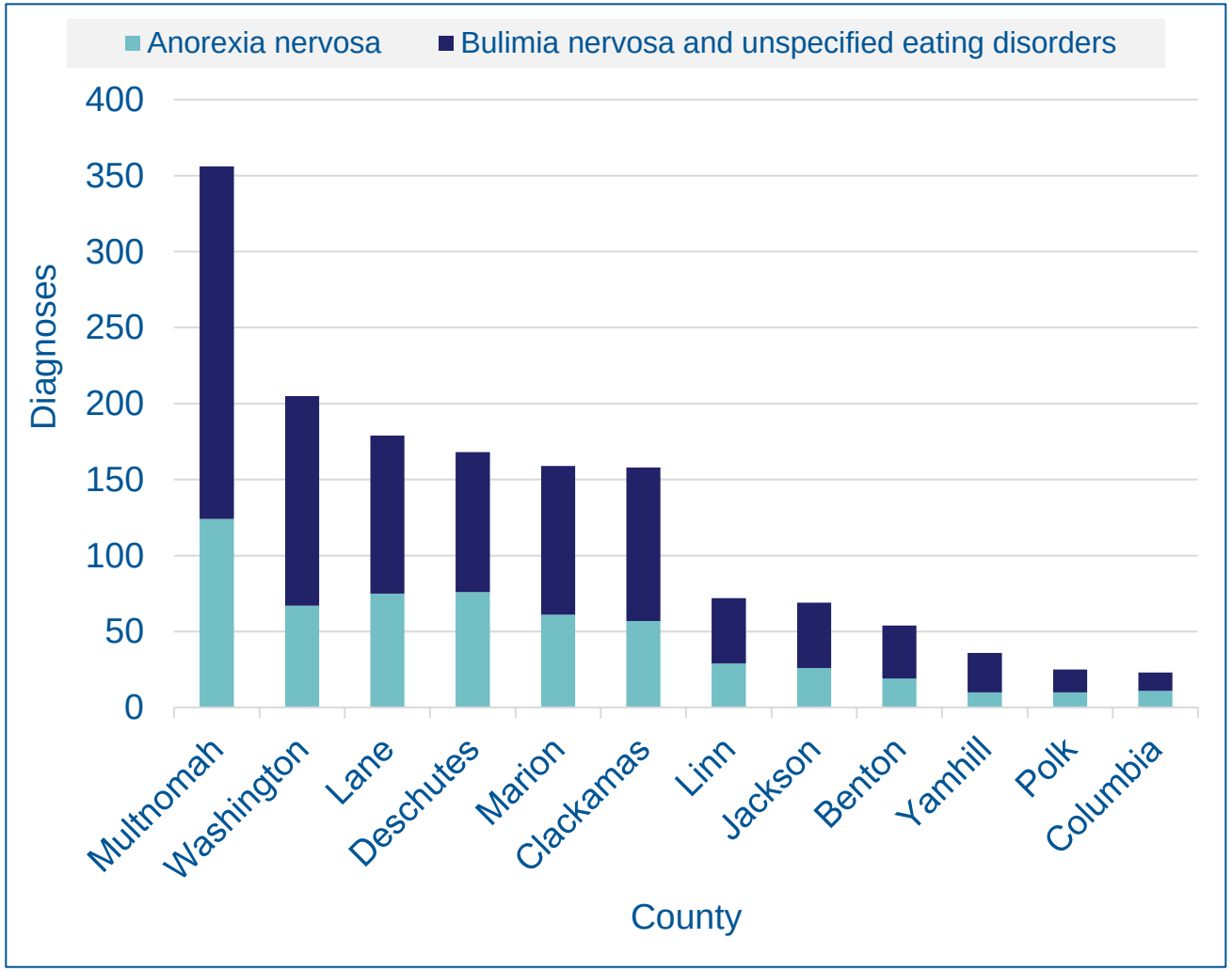
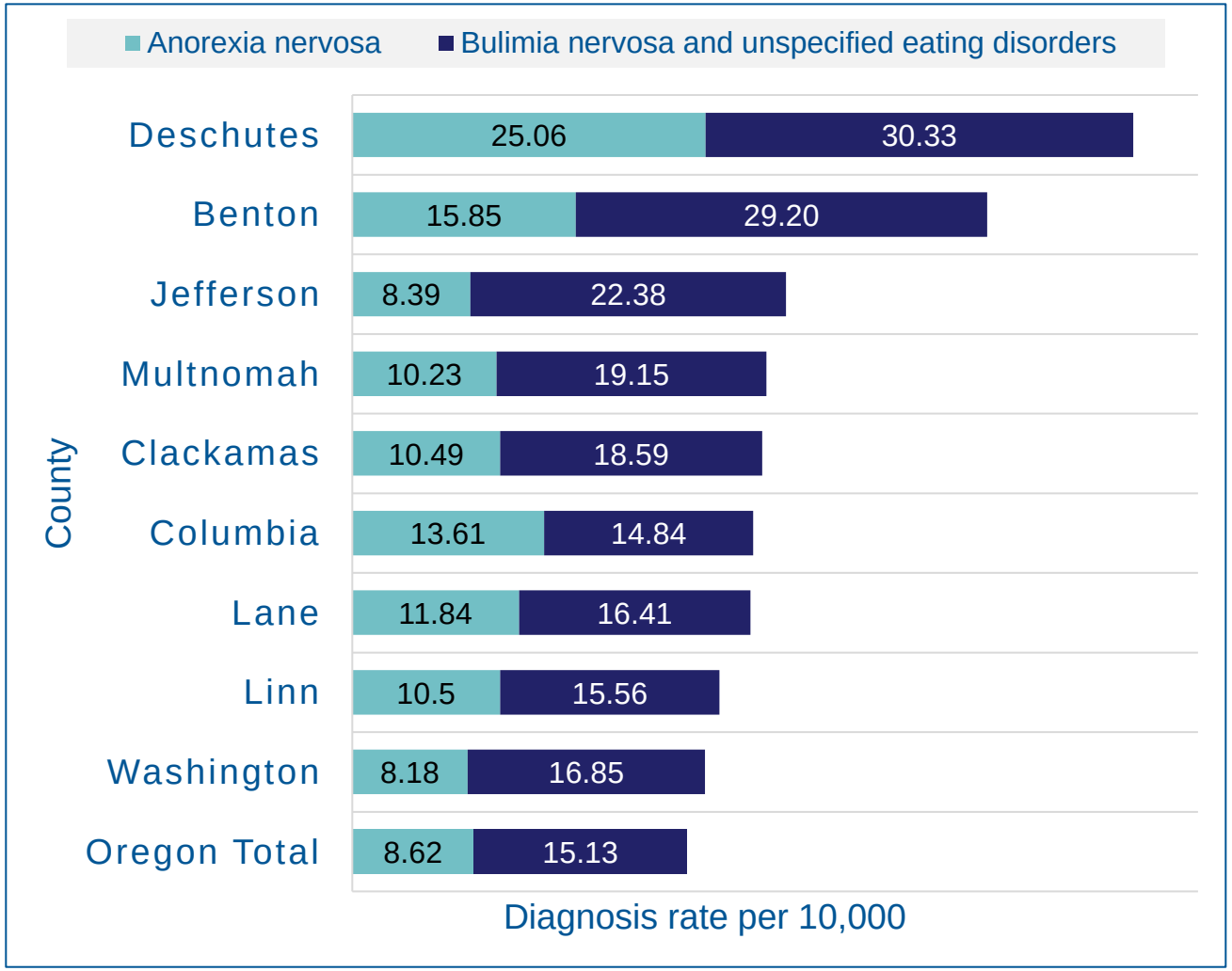
Top 12 counties, 2022

- Top counties in order of total diagnoses
- General trend stands: more diagnoses for bulimia than anorexia



Top 9 - county diagnosis rate per 10,000 OHP members, 2022

- 9 counties above the statewide average diagnosis rate
- Deschutes and Benton have high diagnosis rates for both anorexia and bulimia
  - Deschutes is over double the size of Benton in county population
- Columbia and Jefferson are the smallest counties in this list
  - Rate of diagnoses exceeding much larger counties



Eating Disorder Resources

- 2022 Training series open to all:
- https://www.oregon.gov/oha/hsd/bh-child-family/pages/training.aspx

- Regional help and resources:
- https://www.oregon.gov/oha/HSD/BH-Child-Family/Documents/Regional%20Help%20and%20Resources.pdf

Questions and comments

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- Sign up for our *Holding Hope* newsletter for information and future events
- Email our team: kids.team@dhsoha.state.or.us
- Child and Family Behavioral Health website