

Anorexia nervosa in adolescent males

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1 Anorexia nervosa is a potentially life-threatening eating disorder

Up to 0.3% of males will receive a diagnosis of anorexia nervosa in their lifetime.¹ Affected males have a 6-times higher mortality rate than those in the general population.² Stigma, poor mental health literacy and gendered stereotypes reduce help-seeking behaviours and lead to delayed treatment and worse outcomes. Early identification and prompt treatment are essential.

2 Specific adolescent male populations are at elevated risk

Athletes involved in body- and strength-focused sports (e.g., cycling, running, wrestling); racially and ethnically diverse males; and gay, bisexual, transgender, and queer people are more susceptible to developing anorexia nervosa.³

3 Evaluation of adolescent males with possible anorexia nervosa should include screening for muscle-enhancing goals and behaviours

Muscle-enhancing behaviours are driven by body ideals that emphasize muscularity and leanness, and can include diet changes (intermittent fasting, and bulking and cutting diets), purging (vomiting, excessive exercise), supplement use, and anabolic steroid use.³ The Muscularity Oriented Eating Test is an assessment instrument validated to assess for muscularity-oriented disordered eating behaviours.³

4 Complications can be life threatening

Complications of anorexia nervosa include vital sign instability, bradycardia, abnormal levels of total cholesterol, electrolyte abnormalities, hematologic abnormalities, elevated liver enzymes, impaired gastric emptying, vitamin D deficiency, superior mesenteric artery syndrome, and low bone mineral density.³ A careful evaluation — including a history (exploring symptoms and behaviours), physical examination, and bloodwork — are the first steps in identifying serious medical complications and guiding subsequent treatment.

5 Clinical guidelines recommend family-based treatment as the first-line outpatient treatment^{4,5}

Most adolescent males with anorexia nervosa can be treated as outpatients with family-based treatment and ongoing medical monitoring.^{4,5} However, some adolescents may require treatment in hospital.

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