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Psychiatric Services



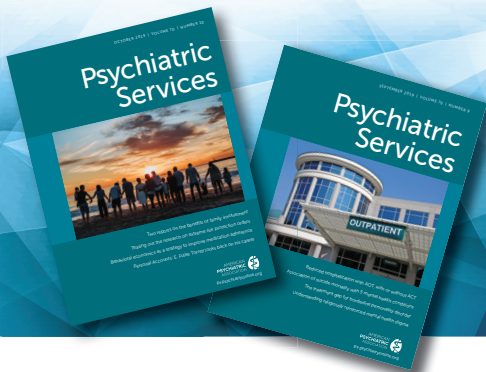
Lisa B. Dixon, M.D., M.P.H.

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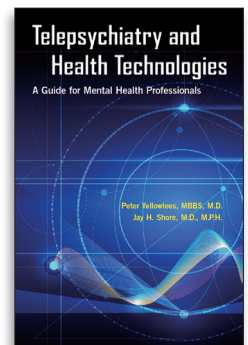
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Peter Yellowlees, MBBS, M.D., and Jay H. Shore, M.D., M.P.H.

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BINGE EATING DISORDER (BED) CONSUMES HER


People with BED may feel trapped by compulsive eating behavior and obsessive thoughts around food¹⁻³

BED is a neuropsychiatric condition that has been shown to significantly impact a patient's life, affecting both work and personal interactions.^{4,5} But deep shame and guilt may cause people with BED to hide their symptoms⁴—even from their psychiatrists. Careful probing about BED symptoms may help patients feel more comfortable, so they don't shut down the conversation.⁶

► Visit [BurdenofBED.com](https://www.burdenofbed.com) to learn more and to download a Conversation Starter

Start the BED conversation

References: 1. Deal LS, Wirth RJ, Gasior M, et al. *Int J Eat Disord.* 2015;48(7):994-1004. 2. McElroy SL, Phillips KA, Keck PE, Jr. *J Clin Psychiatry.* 1994;55(10) suppl:33-51. 3. Beglin SJ, Fairburn CG. *Am J Psychiatry.* 1992;149(1):123-124. 4. American Psychiatric Association. Binge eating disorder. In: *Diagnostic and Statistical Manual of Mental Disorders, 5th ed.* Arlington, VA: American Psychiatric Association; 2013:350-353. 5. Rieger E, Wilfley DE, Stein RI, et al. *Int J Eat Disord.* 2005;37(3):234-240. 6. Kornstein SG, Keck PE Jr, Herman BK, et al. *Postgrad Med.* 2015;127(7):661-670.

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