### LEARNING OBJECTIVES

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<th>LEARNING OBJECTIVES</th>
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| 1. Describe the current research related to assessment, diagnosis, and treatment of Orthorexia Nervosa | I. INTRODUCTION - What is Orthorexia Nervosa?  
A. Definition - Orthorexia nervosa involves an obsessive focus and eating behaviors per dietary theory.  
1. Functional Impairment - Orthorexia Nervosa (ON) is an obsession with healthy eating and dieting lifestyles that occupies the person's time, energy and mental resources, frequently impairing their ability to socialize, lead normal life and function properly within a society.  
2. Gaps in the Literature - ON, although observed for an extended period of time is still under researched, mainly in areas of diagnosis and treatment. i. Is ON is a separate condition ii. Is ON a subset of other obsessive-compulsive and eating disorders that share similar symptoms.  
B. Progression and Treatment delays  
1. Physical risks are very few  
2. Most risks and complications are social and emotional  
3. Loneliness  
4. Spending too much time buying and planning out meals  
5. Eating alone, isolation  
6. Poor relationships  
C. Prevelance  
1. Rates vary a. Existing estimates of orthorexia range from 6.9% to 57.6% in the general population, with rates as high as 81.8% in specific populations. b. Furthermore, it is unclear whether orthorexia is more prevalent among women or men.  
D. Certain groups are at higher risk of orthorexia nervosa than others  
1. Underlying conditions  
2. Desire for Complete Control  
3. Covert Conformity  
4. Searching for Spiritualty through food  
5. Food Puritanism  
6. Using food to create an Identity  
7. Fear of Other People |
| 2. Discuss original research which studies the symptom overlap with Obsessive Compulsive Behaviors among American university students | II. Assessment, Diagnosis, Treatment of Orthorexia A. Characteristics:  
1. An obsession with healthy eating to achieve control over their lives through control of food intake - Voluntary control over dieting is lost  
2. Avoiding foods perceived to be unhealthy ii. Become fixated on food quality and purity iii. People are compelled to engage in obsessive compulsive behaviors related to the preparation and consumption of foods.  
3. Spending more than 3 hours a day thinking about diet  
4. Feeling self-righteousness B. Diagnosis  
1. Proposed Diagnostic Criteria a. Criterion A: Obsessive focus |
on “healthy” eating as defined by a dietary theory or set of beliefs whose specific details may vary; marked by exaggerated emotional distress in relationship to food choices perceived as unhealthy; weight loss may ensue as a result of dietary choices, but not the primary goal. As evidenced by the following: i. Compulsive behavior and/or mental preoccupation regarding affirmative and restrictive dietary practices believed by the individual to promote optimum health. ii. Violation of self-imposed dietary rules causes exaggerated fear of disease, sense of personal impurity and/or negative physical sensations, accompanied by anxiety and shame. iii. Dietary restrictions escalate over time, ad may come to include elimination of entire food groups and involve progressively more frequent and/or severe “cleanses” (partial fasts) regarded as purifying or detoxifying. This escalation commonly leads to weight loss, but the desire to lose weight is absent, hidden or subordinated to ideation about healthy eating b. Criterion B: The compulsive behavior and mental preoccupation becomes clinically impairing by any of the following: i. Malnutrition, severe weight loss or other medical complications from restricted diet. ii. Intrapersonal distress or impairment of social, academic or vocational functioning secondary to beliefs or behaviors about healthy diet. iii. Positive body image, self-worth, identity and/or satisfaction excessively dependent on compliance with self-defined “healthy” eating behaviors C. Original research on the relationship between orthorexia features and obsessive-compulsive pathology 1. Relationship between scores on the ORTO-15, a 15 item questionnaire assessing orthorexia eating behaviors, and the OCI-R, a rating scale designed which identifies obsessive compulsive symptoms severity 2. Differences between male and female scores on these instruments. 3. Integrate information related to orthorexia nervosa into clinical practice for early detection D. Treatment 1. Not a yet a DSM-5 diagnosable condition 2. Education about proper nutrition is a must 3. Counseling is highly recommended a. It will help increase self-esteem and set more realistic expectations. b. Must admit there is a problem c. Identify what caused the obsession. d. Become more flexible and less strict with their eating habits III. CONCLUSION A. Participants with less orthorexia nervosa related symptoms have fewer tendencies to show obsessive behavior disorder behaviors related to checking, hoarding, neutralizing, obsessive behaviors, and ordering. B. More women were found to have orthorexia behaviors and there was no gender difference with those who also reported obsessive compulsive behaviors. C. Further tool psychometric studies on
ORTO-15 scale are needed to evaluate its validity, reliability, and scoring criteria in different populations. IV. Summary of the Main Points:
A. Participants with less orthorexia nervosa related symptoms have fewer tendencies to show obsessive behavior disorder behaviors. B. Further tool psychometric studies on ORTO-15 scale are needed to evaluate its validity, reliability, and scoring criteria in different population. 1. The high level of Orthorexia Nervosa score in this study might be attributed to that the original cut off points were developed based on Italian society 2. There is a need to build appropriate cut off points of orthorexia scale for individuals in the United States. V. Closing A. Health care providers should aware the occurrence of orthorexia nervosa among individuals presenting with disordered eating patterns and the influence of obsessive compulsive behaviors on people’s orthorexia eating behaviors. B. Thank the audience for their attention/Questions