Gender Identity and Eating Disorders: The Need to Delineate Novel Pathways for Eating Disorder Symptomatology

Few psychiatric disorders are as sexually dimorphic as the eating disorders. Current prevalence estimates illustrate a striking disparity between male and female eating disorders, with many reports noting a ratio of 1:10 [1]. While recent epidemiological data suggest a ratio closer to 1:4 [2], the relative greater preponderance of eating disorders in female populations is well established. Furthermore, alongside these differential prevalence rates, recent evidence also points toward a phenomenological difference in the symptomatic presentation of male versus female eating disorders [3]. Indeed, epidemiological studies have consistently illustrated greater self-reported concerns around muscularity than thinness among males and a greater concern around thinness as opposed to muscularity in females [3]. This distinction is also evident in clinical populations, where males with eating disorders are likely to report greater concern, and concomitant eating disorder psychopathology, around their degree of muscularity, as opposed to thinness per se, whereas females with eating disorders do not typically endorse muscularity-oriented concerns [4].

Alongside the impact of biological sex, the role of gender construction has recently begun to receive empirical attention and may shed further light on the divergence of body image psychopathology toward either muscularity or thinness-oriented concerns [5,6]. To this end, the femininity hypothesis has postulated that feminine gender role endorsement is implicated in the drive for thinness, and thinness-oriented disordered eating psychopathology, whereas the theory of threatened masculinity postulates that extreme masculine gender role endorsement may be linked to muscularity-oriented disordered eating psychopathology [7]. Thus, in the context of the increasingly apparent margin between male versus female eating disorders, and the potentially mediating impact of gender construction, the study of disordered eating behaviors among transgendered populations is an extremely important endeavor. In the present issue of the *Journal of Adolescent Health*, Guss et al. [8] offer important insights into the prevalence of an array of disordered eating behaviors among transgendered youth, illustrating markedly elevated rates of dietary fasting, diet pill and laxative use, and anabolic androgenic steroid use, all of which serve as important risk factors for the development of eating disorders. The clinical implications of these findings are profound, suggesting that transgendered youth may be particularly vulnerable to the development of eating disorders, and therefore warrant particular consideration in prevention and early intervention endeavors. Further still, the authors note that some aspects of disordered eating may be implicated in the broader adherence to the hegemonic body ideals of one’s preferred gender, which may imbue such behaviors with further meaning, thus presenting additional challenges in terms of both symptom recognition and treatment.

In building on the important work of Guss et al. [8], a crucial endeavor in furthering this line of inquiry into possible eating disorder psychopathology in transgendered youth may include indexing both thinness- and muscularity-oriented disordered eating behaviors, which represent the embodiment of opposing hegemonic gender norms [7]. This may include screening for behaviors such as the overregulation of protein consumption and engagement in “cheat meals,” alongside behaviors reflective of thinness-oriented disordered eating pathology, such as dietary fasting and laxative use. Related to this, another important advance may lie in indexing the directionality of the gender transition among transgendered youth, whether it is for instance, from male-to-female, or female-to-male, in indexing potentially different pathways of eating disorder symptom progression. Adopting a one-size-fits-all approach to the study of transgendered populations may conflate a potentially heterogeneous group with disparate body image ideals, which may ultimately dilute effect sizes and stymie the clear delineation of eating disorder symptom pathways in transgendered populations.

Ultimately, our collective understanding of the unique challenges facing transgendered youth is still in its infancy, although clearly, the data reported by Guss et al. [8] illustrate the need for further investigation of potential eating disorder psychopathology in transgendered youth. To date, most eating disorder research has been conducted in exclusively female samples of eating disorders patients [3], and it is unlikely that findings from these samples can be extrapolated seamlessly to transgendered populations. With an increasing diversity of gender identities reported among contemporary youth, it is imperative that we develop novel theoretical paradigms to better...
delineate potential pathways of eating disorder symptomatology within transgendered populations.

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References