Your Words Can Be the Difference Between Stigma and Support

When describing a study sample, find alternatives to the following words: **struggling with an eating disorder** and **sufferers**

**WHY?**
Referring to individuals in this way can be perceived as pejorative

**INSTEAD TRY:**
Treatment-seeking, enrolled in a treatment program, or exhibiting an eating disorder or related symptoms

Use person-first language such as **individuals**, **patients**, or **participants** with **anorexia nervosa**, **bulimia nervosa**, or **binge-eating disorder**, respectively

**WHY?**
Labels, such as **anorexic**, **bulimic**, and **binge-eater**, can feel limiting and imply that the person is defined by the diagnosis or symptoms that they experience

When describing an assessment tool or treatment, describe either as **extensively validated** or **demonstrably superior**—Avoid using **gold standard** whenever possible

**WHY?**
Even well-validated instruments are imperfect

In scholarly communications, use **anorexia nervosa** and **bulimia nervosa** rather than abbreviated names, such as anorexia or bulimia

**WHY?**
Abbreviated terms may have different medical meanings (i.e., anorexia means loss of appetite in general, and can be a symptom of many different illnesses)

When referring to the behavior of binge eating, avoid using **bulimic episode**

**WHY?**
**Binge-eating episode** is more accurate

Based on suggested language use guidance in the following article: