**Introduction**

- The current Clinical Impairment Assessment (Bohn & Fairburn, 2008) questionnaire evaluates overall psychosocial impairment resulting from various eating disorder symptoms.
- Recent research (Mitchison, Mond, Siewa-Younan, & Hay, 2013) suggests that eating disorder symptoms affect health-related quality of life and mental impairment differently across genders.
- However, there is minimal research evaluating the effect of individual eating disorder symptoms on overall impairment within individuals.
- The current study determined the unique contribution of different eating disorder symptoms to overall eating disorder-related impairment.

**Method**

**Participants:**
- 109 men ($n=19$) and women ($n=90$) recruited from community.
- Age range from 18 to 62 years ($M=32.49, SD=12.11$).
- Minimum body mass index was 14.70 and the maximum was 78.37 ($M=26.34, SD=9.46$).
- 78 participants identified as Caucasian, 10 as Asian, 9 as African American, 8 as Hispanic, and 4 as either other or missing.
- Varying eating disorders were represented by this sample including anorexia nervosa, restrictive type ($n=7$) and binge eating-purging ($n=10$) type, binge eating disorder ($n=30$), bulimia nervosa, purging type ($n=52$), and purging disorder ($n=10$).
- Participants reported their average binge eating episodes ($M=15.19, SD=17.03$), and purging episodes ($M=13.79, SD=21.41$), which included vomiting and use of laxatives, over the past 28 days.

**Results**

- A multiple linear regression analysis indicated that 44.5% ($F(4, 104)=22.692, p<.001$) of the variance in the CIA was accounted for by:
  - BMI ($\beta=.205, t=2.617, p<.010$)
  - Weight/Shape Concerns ($\beta=.539, t=6.872, p<.001$)
  - Purging ($\beta=.025, t=0.303, p=.762$)
  - Binge eating ($\beta=.279, t=3.390, p<.001$)

- These findings indicate that binge eating, weight and shape concerns, and body mass index uniquely account for eating disorder-related impairment.
- However, purging does not contribute uniquely to eating disorder-related impairment.

**Discussion**

- The results indicate that a number of individual eating disorder symptoms uniquely contribute to overall psychosocial impairment.
- Weight and shape concerns contribute the most to overall impairment while purging symptoms do not significantly contribute.

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- Weight and shape concerns contribute the most to overall impairment while purging symptoms do not significantly contribute. Perhaps this is because purging is a behavior that is consistent with many individuals' weight and shape goals, while other symptoms are more closely associated with distress.

- These results imply that the majority of impairment could be a result of cognitive symptoms rather than weight or overt behaviors.

- Future research should further evaluate the effects of individual eating disorder symptoms on impairment in an attempt to better understand the specific way in which eating disorder symptoms impair individuals' functioning. This research could help develop therapeutic techniques that effectively alleviate impairment.