

*Editorial*

## The Silent Epidemic: Confronting Kazakhstan's Unseen Eating Disorder Crisis

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**Abstract:**

Despite a significant rise of reported eating disorders all over the world, data from Kazakhstan is obscured by lack of recognition of these conditions as serious health issue that have severe lifelong consequences. The attention to these conditions is long overdue and requires concentrated efforts from public, academia, and public health.

**Keywords:** Eating Disorder; Feeding and Eating Disorders; Mental Health; Health Data

## Editorial

In the landscape of epidemiologic research, some crises are visible, their impacts starkly evident in health statistics and public discourse. Others, however, remain Obscured by silence from those affected, social stigma, and systemic neglect from academia and medical establishment. In this editorial, we posit that eating disorders (EDs) represent one of the most understudied and overlooked challenges to the well-being of Kazakhstani youth – an unknown problem of unknown proportions.

EDs are a group of conditions, including anorexia nervosa (AN), bulimia nervosa (BN), binge eating disorder, and avoidant/restrictive food intake disorder, that can have significant lifelong detrimental effect on both mental and physical health. Critically, unlike many chronic diseases, EDs typically onset in early adolescence and young adulthood—a pivotal period for neurobiological and psychosocial development. Consequently, without diagnosis and treatment, they can disrupt this development and lead to severe, lifelong health problems (1). Onset of EDs is facilitated by many factors, such as sociocultural, familial influence, media use, over- or undercontrol of eating, body image disturbances, and extreme behaviors to control weight or shape (2). They frequently co-develop with other mental health conditions: 50-70% of individuals with an ED will experience a major depressive or anxiety disorder (3,4). Moreover, EDs often result in neurological, musculoskeletal, gastrointestinal, cardiovascular, hepatic, endocrine, pulmonary, and dermatological complications in patients who have been reducing their food intake (5).

A widespread public notion that EDs are a lifestyle choice, or a phase of adolescence is a dangerous misconception leading to significant loss in both mental and physical health. Many established public health institutions, including the World Health Organization, and research have consistently highlighted that EDs, particularly AN are associated with five to six times higher mortality rate compared to the general

population, making them among the deadliest of all mental health conditions (6-9). Their worldwide burden is significant; for example, only AN and BN are accounted for about 2.9 million Disability-Adjusted Life Years (DALYs) globally in 2019 (95% UI: 1.8–4.3 million). (10).

However, let's look at the official ED statistics in Kazakhstan. The official data presents a stark contrast between estimation and reported data. Given the level of economic development, population, and participation in the global trends, the Global Burden of Disease Study (2021) estimates number of cases of ED among 15-39 ages in Kazakhstan to be around 32,000 people (11). However, only 48 individuals were officially registered with an ED diagnosis in a nation of over 19 million. We suggest that official numbers are not a sign of an absence of EDs in the country, but a glaring red flag signaling a massive gap between available data and the real situation.

So, knowing that official numbers are a vast underestimation and establishing the significance of EDs for public health, why do we know so little about EDs in Kazakhstan? We posit that a multitude of factors, including (1) deeply rooted cultural stigma, (2) a lack of healthcare professionals specifically trained in diagnosis and treatment of EDs, (3) low public and professional awareness, and (4) fear of social and economic ostracization resulting from mental health diagnosis, obscure this issue from medical professionals and wider public (9,12).

Thus, in this editorial we argue for the importance of unknown and underrecognized challenge of EDs with unknown public health impact and true numbers of affected. There is a critical need to study EDs in Kazakhstan to elucidate the true scale of this problem and if policies and public health interventions are needed to stem the tide of health consequences of undiagnosed and underreported EDs.

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