

Body Mass Index (BMI)* Percentiles in Diagnosis & Family-Based Treatment of AN GIRLS (7 - 16 yr)

(calculated from CDC growth charts 2000)

Age	Median BMI for age (used to define Expected Body Weight (EBW)** in FBT)	BMI indicative of AN (≤ 85% mBMI / EBW)	BMI above which FBT is most suitable (≥75% mBMI / EBW)	BMI above which phase II FBT indicated / menses likely to return (≥ 90% mBMI / EBW)
7	15.4	13.1	11.5	13.9
7.5	15.6	13.3	11.7	14.0
8	15.8	13.4	11.8	14.2
8.5	16.0	13.6	12.0	14.4
9	16.3	13.9	12.2	14.7
9.5	16.6	14.1	12.4	14.9
10	16.8	14.3	12.6	15.1
10.5	17.2	14.6	12.9	15.5
11	17.4	14.8	13.0	15.7
11.5	17.8	15.1	13.3	16.0
12	18.0	15.3	13.5	16.2
12.5	18.4	15.6	13.8	16.6
13	18.7	15.9	14.0	16.8
13.5	19.0	16.1	14.2	17.1
14	19.4	16.5	14.6	17.5
14.5	19.6	16.7	14.7	17.6
15	19.9	16.9	14.9	17.9
15.5	20.2	17.2	15.1	18.2
16	20.4	17.3	15.3	18.4
16.5	20.6	17.5	15.4	18.5

(*) $BMI = \text{weight (kg)} \div \text{height (m)}^2$

(**) **BMI at 50th percentile or median BMI (mBMI)** is used in Family-Based Treatment for AN to define a client's 'Expected Body Weight' (EBW), and provides a general guide to expected healthy BMI for age. Healthy BMI for age for very slight or robust framed individuals may range above or below this figure. Delayed height growth (stunting) will require separate assessment by reviewing history of height velocity and expected height for age. Assessment by a Paediatrician will provide a more comprehensive guide to an individual's healthy weight and growth status.

Le Grange D et al. (2012) Calculation of Expected Body Weight in Adolescents with Eating Disorders. *Paediatrics* 129; e438.