

22614 | Anthropometry, body composition, nutritional intake and eating behavior of transgender people

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Background & Aim: Transgender individuals do not identify with their assigned sex at birth. Nutritional care for this population remains underexplored, despite evidence of increased risks of overweight, obesity, and eating disorders. Hormone therapy alters fat and lean mass distribution, affecting body composition. This study aimed to assess anthropometric parameters, body composition, nutritional intake, and eating behavior among transgender individuals and compare transmasculine and transfeminine groups. **Methods:** The sample comprised 16 transgender adults (18 to 53 years), 62.5% assigned female at birth (AFAB). Participants answered the Eating Attitudes Test-26 (EAT-26) and a semiquantitative food frequency questionnaire. Weight, height, waist circumference, and body composition (via bioimpedance) were assessed. **Results:** Participants AFAB or assigned male at birth (AMAB) did not differ regarding anthropometry or body composition. In each group, half were overweight/obese. Two participants (12.5%) had high risk of eating disorders. AFAB had a median intake of energy 741 kcal higher ($p=0.129$, $\eta^2=0.144$). Higher BMI was associated with higher carbohydrate intake among AFAB ($r_s=0.709$, $p=0.022$) but not AMAB ($r_s=-0.200$, $p=0.704$), and lipid intake correlated positively with BMI among AMAB ($r_s=0.600$, $p=0.208$) but negatively among AFAB ($r_s=-0.794$, $p=0.006$). The strongest correlation with the risk of eating disorders (EAT-26 total) was found among AMAB, with lower intake of carbohydrate associated with higher risk ($r_s=-0.754$, $p=0.084$), especially for subscales oral control and diet, while for AFAB all correlations were below 0.3. **Conclusions:** Transgender individuals had an overweight prevalence similar to the general population but higher risk of eating disorders. Energy and nutrient intake and eating disorder risk appear to align more with gender identity than assigned sex at birth, underscoring the importance of tailored nutritional approaches for transmasculine and transfeminine individuals.

Keywords: Anthropometry, body composition, eating behaviour, food intake, transgender.

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