

Socialising difficulty in anorexia to guide treatment

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Anorexia nervosa patients had more difficulty with socialising and assertiveness than bulimia nervosa patients. Credit: Adrian

In their investigation of eating disorders and interpersonal problems, researchers have found anorexia nervosa patients have significantly greater difficulties with socialising and assertiveness than those with bulimia nervosa, enabling the creation of more targeted treatment for these patients.

Until now, there has been little research on interpersonal difficulties in clinical [patients](#) with diagnosed eating disorders but based on a recent review of available evidence, researchers predicted there would be differences between anorexia and [bulimia nervosa](#) patients.

Senior clinical psychologist Peter McEvoy from the Centre for Clinical Interventions (CCI)—a specialist public outpatient service in Perth for the treatment of eating disorders—says they were unsure whether eating disorder symptoms or diagnosis would still be related to interpersonal difficulties after controlling for the influence of depression and anxiety.

"Most studies to date have focussed on non-

clinical samples and those studies that have focussed on clinical samples have failed to control for comorbid depression and anxiety symptoms," says Dr McEvoy.

"This is a major problem with the research to date as we know that interpersonal problems are strongly related to depression."

Four hundred and six participants in the study—led by CCI clinical psychologist Dr Bronwyn Raykos—were referred to the CCI by general practitioner or psychiatrist.

After completing an assessment, participants were diagnosed with an eating disorder and completed questionnaires relating to depression, socialisation and assertiveness.

Anorexia nervosa patients are characterised by maintaining a significantly low body weight for developmental stage and either a fear of weight gain and/or persistent behaviour that interferes with weight gain.

Bulimia nervosa patients are characterised by recurrent episodes of binge eating and compensatory behaviours such as self-induced vomiting and restriction.

The study included another group of patients that didn't meet full criteria for anorexia or bulimia nervosa, referred to as Eating Disorder Not Otherwise Specified (EDNOS).

Socialising could guide eating disorder treatment

Analysis revealed anorexia nervosa patients had more significant difficulty with socialising and assertiveness than bulimia nervosa patients, and overall, patients with the most severe eating disorder symptoms reported the most difficulty socialising.

Dr McEvoy says understanding these social difficulties and their impact on [eating disorders](#) will enable targeted treatment programs.

"For example, assertiveness training is easily administered and cost-effective so we can test whether its inclusion in treatment programs for [anorexia](#) nervosa improves the efficacy of existing treatments," says Dr McEvoy.

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