



# Eating Disorders Awareness Week: Binge Eating - recent items and evidence

Mark Bryant

Tel: 01865 902518

E-mail: [Mark.Bryant@oxfordhealth.nhs.uk](mailto:Mark.Bryant@oxfordhealth.nhs.uk)

For Eating Disorders Awareness Week - See below recent articles and other items of interest on Binge Eating

To find out more about the library's evidence updating and literature search services, just respond to this email

## News items, books reports

To see full details of the item just click on the link.



## Eating Disorders Awareness Week, 1-7 March 2021

From 1-7 March join our campaign to create a future where people experiencing binge eating disorder are met with understanding and compassion.

<https://www.beateatingdisorders.org.uk/edaw>

## EDAW Resources

<https://www.beateatingdisorders.org.uk/edaw/edaw-resources>

Videos



Library Services

Effective, Efficient, Innovative



Oxford Health  
NHS Foundation Trust

### EDAW 2021 campaign video

<https://youtu.be/ZDAz6JTowxg>

### Alternate Video

[https://youtu.be/1D\\_95uN-uAs](https://youtu.be/1D_95uN-uAs)

### Short video for social media sharing

<https://youtu.be/Y4orFM2Auxs>

### Leaflets, Posters & Games



### Social Media Graphics



### Raise awareness of eating disorders

Download copies of our literature to print off and place in your local community.





## Journal articles

For the full text of anything below check the Oxford Health Libraries Discovery Service:

**OID Discovery Service** (link -you will need your Athens login)

...or contact your local health or workplace library.

If you can't make that work, just reply to this email and I will source the item for you

### **The feasibility of emotion-focused therapy for binge-eating disorder: a pilot randomised wait-list control trial**

**Author(s):** Glisenti K.; Strodl E.; King R.; Greenberg L.

**Source:** Journal of Eating Disorders; Dec 2021; vol. 9 (no. 1)

**Publication Date:** Dec 2021

**Publication Type(s):** Article

Available at [Journal of Eating Disorders](#) - from BioMed Central

**Abstract:**Background: Research into psychotherapy for binge-eating disorder (BED) has focused mainly on cognitive behavioural therapies, but efficacy, failure to abstain, and dropout rates continue to be problematic. The experience of negative emotions is among the most accurate predictors for the occurrence of binge eating episodes in BED, suggesting benefits to exploring psychological treatments with a more specific focus on the role of emotion. The present study aimed to explore the feasibility of individual emotion-focused therapy (EFT) as a treatment for BED by examining the outcomes of a pilot randomised wait-list controlled trial. Method(s): Twenty-one participants were assessed using a variety of feasibility measures relating to recruitment, credibility and expectancy, therapy retention, objective binge episodes and days, and binge eating psychopathology outcomes. The treatment consisted of 12 weekly one-hour sessions of EFT for maladaptive emotions over 3 months. A mixed model approach was utilised with one between effect (group) using a one-way analysis of variance (ANOVA) to test the hypothesis that participants immediately receiving the EFT treatment would demonstrate a greater degree of improvement on outcomes relating to objective binge episodes and days, and binge eating psychopathology, compared to participants on the EFT wait-list; and one within effect (time) using a repeated-measures ANOVA to test the hypothesis that participation in the EFT intervention would result in significant improvements in outcome measures from pre to post-therapy and then maintained at follow-up. Result(s): Recruitment, credibility and expectancy, therapy retention outcomes indicated EFT is a feasible treatment for BED. Further, participants receiving EFT demonstrated a greater degree of improvement in objective binge episodes and days, and binge eating psychopathology compared to EFT wait-list control group participants. When



participants in the EFT wait-list control group then received treatment and outcomes data were combined with participants who initially received the treatment, EFT demonstrated significant improvement in objective binge episodes and days, and binge eating psychopathology for the entire sample. Conclusion(s): These findings provide further preliminary evidence for the feasibility of individual EFT for BED and support more extensive randomised control trials to assess efficacy. Trial registration: The study was retrospectively registered with the Australian New Zealand Clinical Trials Registry (ACTRN12620000563965) on 14 May 2020. Copyright © 2021, The Author(s).

**Database:** EMCARE

## **Examining associations among weight stigma, weight bias internalization, body dissatisfaction, and eating disorder symptoms: Does weight status matter?**

**Author(s):** Romano K.A.; Heron K.E.; Henson J.M.

**Source:** Body Image; Jun 2021; vol. 37 ; p. 38-49

**Publication Date:** Jun 2021

**Publication Type(s):** Article

**Abstract:** The present study aimed to expand weight stigma theoretical models by accounting for central tenets of prominent eating disorder (ED) theories and increasing the generalizability of existing models for individuals across the weight spectrum. College students (Sample 1: N = 1228; Sample 2: N = 1368) completed online surveys assessing stigma and ED symptoms. In each sample, separately, multi-group path analyses tested whether body mass index (BMI) classification (underweight/average weight, overweight, obese) moderated a model wherein weight stigma experiences were sequentially associated with weight bias internalization, body dissatisfaction, and five ED symptoms: binge eating, purging, restricting, excessive exercise, muscle building behaviors. Results supported the assessed model overall and for individuals in each BMI class, separately. Although patterns of associations differed for individuals with different BMIs, these variations were limited. The present findings suggest that the adverse impact of weight stigma on distinct ED symptoms is not limited to individuals with elevated BMIs and that these associations are generally explained by the same mechanisms. Weight stigma interventions that focus on decreasing weight bias internalization and body dissatisfaction are recommended for individuals across the weight spectrum. Further examination of associations between weight stigma and multiple ED symptoms, beyond disinhibited eating, is supported. Copyright © 2021 Elsevier Ltd

**Database:** EMCARE



## Increased emotional eating during COVID-19 associated with lockdown, psychological and social distress

**Author(s):** Cecchetto C.; Gentili C.; Aiello M.; Ionta S.; Osimo S.A.

**Source:** Appetite; May 2021; vol. 160

**Publication Date:** May 2021

**Publication Type(s):** Article

Available at [Appetite](#) - from Unpaywall

**Abstract:**Due to the spread of COVID 2019, the Italian government imposed a lockdown on the national territory. Initially, citizens were required to stay at home and not to mix with others outside of their household (Phase 1); eventually, some of these restrictions were lifted (Phase 2). To investigate the impact of lockdown on emotional and binge eating, an online survey was conducted to compare measures of self-reported physical (BMI), psychological (Alexithymia), affective (anxiety, stress, and depression) and social (income, workload) state during Phase 1 and Phase 2. Data from 365 Italian residents showed that increased emotional eating was predicted by higher depression, anxiety, quality of personal relationships, and quality of life, while the increase of bingeing was predicted by higher stress. Moreover, we showed that higher alexithymia scores were associated by increased emotional eating and higher BMI scores were associated with both increased emotional eating and binge eating. Finally, we found that from Phase 1 to Phase 2 binge and emotional eating decreased. These data provide evidence of the negative effects of isolation and lockdown on emotional wellbeing, and, relatedly, on eating behaviour. Copyright © 2021 Elsevier Ltd

**Database:** EMCARE

## State versus trait weight, shape, and eating concerns: Disentangling influence on eating behaviors among sexual minority women

**Author(s):** Panza, Emily; Olson, KayLoni; Selby, Edward A.; Wing, Rena R.

**Source:** Body Image; Mar 2021; vol. 36 ; p. 107-116

**Publication Date:** Mar 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**Abstract:**This study examined the relative influence of trait and state weight, shape, and eating concerns on dysregulated eating in the daily lives of sexual minority women with overweight and obesity. This study is a secondary analysis of data from an Ecological Momentary Assessment (EMA) study of 55 sexual minority women with overweight/obesity. Trait shape, weight, and eating concerns were assessed at baseline. For the following five days, participants used a smartphone to report state weight/shape concerns, overeating, and



binge eating five times daily. Women who endorsed higher levels of trait weight, shape, and eating concerns at baseline reported more frequent state weight/shape concerns in daily life. Trait eating concerns were associated with higher odds of binge eating during EMA, but trait weight/shape concerns were unrelated to future dysregulated eating. In daily life, state weight/shape concerns was associated with greater risk for over/binge eating at the concurrent EMA prompt, the subsequent EMA prompt, and over the course of a full day, independent of trait concerns. State weight and shape concerns may play an important role in predicting dysregulated eating in daily life among sexual minority women of higher body weight. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO

## **A narrative review of highly processed food addiction across the lifespan**

**Author(s):** Schiestl, Emma T.; Rios, Julia M.; Parnarouskis, Lindsey; Cummings, Jenna R.; Gearhardt, Ashley N.

**Source:** Progress in Neuro-Psychopharmacology & Biological Psychiatry; Mar 2021; vol. 106

**Publication Date:** Mar 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**PubMedID:** 33127423

**Abstract:**Evidence is growing that highly processed (HP) foods (i.e., foods high in refined carbohydrates and fat) are highly effective in activating reward systems and may even be capable of triggering addictive processes. Unlike traditional drugs of abuse, exposure to HP foods is common very early in development. HP food addiction has been associated with negative outcomes, including higher body mass index (BMI), more frequent binge eating, greater failure in weight loss treatment trials, and poorer mental and physical health. Although most research on HP food addiction has been conducted using adult samples, research on this topic now spans across the life span beginning in utero and extending through older adulthood. HP food addiction and related reward-based changes are associated with negative outcomes at every life stage, which has important implications for developmentally tailored prevention and treatment efforts. Using a developmentally informed approach, the current study comprehensively reviews the existing research on HP food addiction across the lifespan and highlights important areas of future research. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## **Self-compassion explains substantially more variance in eating disorder psychopathology and associated impairment than mindfulness**

**Author(s):** Messer, Mariel; Anderson, Cleo; Linardon, Jake

**Source:** Body Image; Mar 2021; vol. 36 ; p. 27-33

**Publication Date:** Mar 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**Abstract:** This study aimed to (1) examine the unique role of mindfulness and self-compassion on eating disorder (ED) psychopathology and functional impairment, and (2) compare levels of mindfulness and self-compassion between health controls and individuals categorized with bulimia nervosa (BN), and binge-eating disorder (BED). Data were analyzed from 1101 community-based participants, of which 145 met criteria for BN, 150 for BED, and 286 for healthy controls. Results from a series of multiple regressions revealed that self-compassion accounted for substantially more variance in ED psychopathology and functional impairment than mindfulness in the total sample and across the three subgroups, at times explaining 20 times more variance than mindfulness. Results remained unchanged when excluding the mindfulness subscale from the Self-Compassion Scale. When comparing these variables across the three study groups, results showed that self-compassion and mindfulness levels were lowest in the BN group, followed by the BED group, and then the healthy control group. Findings overall suggest that non-judgmental awareness may be less important in explaining levels of ED psychopathology than the nature of one's interaction with emotionally charged, negative experiences. Findings also point to possible priority intervention targets in indicated prevention and treatment programs. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO

## **"Shame on you": The impact of shame in body-focused repetitive behaviors and binge eating**

**Author(s):** Houazene S.; Leclerc J.B.; O'Connor K.; Aardema F.

**Source:** Behaviour Research and Therapy; Mar 2021; vol. 138

**Publication Date:** Mar 2021

**Publication Type(s):** Article

**Abstract:** Body-focused repetitive behaviors (BFRBs), such as hair-pulling, skin-picking, and nail-biting, have been associated with difficulties in emotion regulation. Studies have suggested that aversive emotions are important triggers for impulsive behaviors such as BFRBs and binge eating. In particular, shame has been hypothesized to be a key emotion before and after these behaviors, but no experimental studies yet have investigated its impact





on BFRBs. We aimed to evaluate the role of shame in BFRB and binge eating episodes and the presence of shame following these behaviors. Eighteen women with BFRBs, 18 with binge eating, and 18 community controls participated in the study. Results showed that an experimental shame condition triggered more shame in the binge eating and BFRB groups than in the control group. In addition, the shame induced condition increased the urge to engage in BFRBs, but not in binge eating. Results showed that participants from the BFRB and the binge eating groups reported more shame after engaging in their pathological behaviors compared to following the neutral condition. Future studies should replicate these findings with larger samples and different shame-inducing conditions. Copyright © 2021 Elsevier Ltd

**Database:** EMCARE

## **Metacognitive beliefs across eating disorders and eating behaviours: A systematic review**

**Author(s):** Palmieri, Sara; Mansueto, Giovanni; Ruggiero, Giovanni Maria; Caselli, Gabriele; Sassaroli, Sandra; Spada, Marcantonio M.

**Source:** Clinical Psychology & Psychotherapy; Feb 2021

**Publication Date:** Feb 2021

**Publication Type(s):** Journal Peer Reviewed Journal

**PubMedID:** 33606916

Available at [Clinical psychology & psychotherapy](#) - from Wiley Online Library

**Abstract:** Background Literature has pointed out a probable association between metacognitive beliefs and eating disorders. To date, no study has synthesized all research exploring the differences or similarities in metacognitive beliefs across different eating disorders diagnoses and eating problems. Aims To review the evidence on metacognitive beliefs across the spectrum of eating disorders and eating behaviours. Method A comprehensive search was conducted on PubMed and PsycInfo. The search terms used were: 'eating disorders/anorexia/bulimia/binge eating disorder/binge eating' AND 'metacognitions/metacognitive beliefs'. A manual search of reference lists was also run. Results Eleven studies were identified. Anorexia Nervosa was broadly characterized by higher levels of metacognitive beliefs compared to the general population, particularly negative beliefs about worry and beliefs about the need to control thoughts. Positive beliefs about worry were higher in Anorexia Nervosa compared to Bulimia Nervosa and Eating Disorder Not Otherwise Specified, and in Bulimia Nervosa compared to Eating Disorder Not Otherwise Specified. Negative beliefs about worry were higher in Anorexia Nervosa compared to Bulimia Nervosa. Cognitive self-consciousness was higher in Anorexia Nervosa compared to Bulimia Nervosa and Eating Disorder Not Otherwise Specified. Conclusions





Metacognitive beliefs appear to be implicated in eating disorders and eating behaviours. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO

## **Hunger games: Associations between core eating disorder symptoms and responses to rejection by peers during competition**

**Author(s):** Schell, Sarah E.; Banica, Iulia; Weinberg, Anna; Racine, Sarah E.

**Source:** International Journal of Eating Disorders; Feb 2021

**Publication Date:** Feb 2021

**Publication Type(s):** Journal Peer Reviewed Journal

**PubMedID:** 33605485

Available at [The International journal of eating disorders](#) - from Wiley Online Library Medicine and Nursing Collection 2021

Available at [The International journal of eating disorders](#) - from Unpaywall

**Abstract:** Objective Individuals with eating disorder (ED) symptoms are sensitive to social threat and report maladaptive interpersonal styles that may contribute to and exacerbate negative evaluation from others. Research in this area has relied primarily on self-report. The current study examined associations between behavioral responses to social threat and core ED symptoms using a behavioral paradigm. Based on previous findings that individuals with binge-eating report being more reactive and confrontational, whereas individuals with dietary restriction tend to be more submissive and avoidant of conflict, we hypothesized that binge eating would be associated with a greater tendency to retaliate against rejection perpetrators, whereas dietary restriction would be associated with a lower tendency to retaliate when rejected. Method Undergraduate women (N = 132) completed a self-report measure of ED symptoms and participated in an online "Survivor"-type game in which they voted to either accept or reject computerized coplayers, while also receiving acceptance or rejection feedback from others. Results Neither ED symptom was associated with how often participants retaliated against coplayers who rejected them. However, dietary restriction was related to more rejection votes overall (i.e., the tendency to reject others regardless of how others voted). Discussion Findings suggest that individuals with dietary restriction may rely on a maladaptive defensive strategy aimed at pre-empting rejection, or alternatively, have difficulty shifting from habitual self-isolating behavior that results from over-involvement with restricting symptoms. Interventions targeting hypersensitivity to social threat or interpersonal flexibility may help reduce interpersonal stress and mitigate its impact on restricting symptoms. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## Understanding the relationship between negative emotional eating and binge eating: The moderating effects of acting with awareness and non-reactive mindfulness

**Author(s):** Barnhart, Wesley R.; Braden, Abby L.; Dial, Lauren A.

**Source:** Journal of Clinical Psychology; Feb 2021

**Publication Date:** Feb 2021

**Publication Type(s):** Journal Peer Reviewed Journal

**PubMedID:** 33561322

**Abstract:** Objectives Negative emotional eating and binge eating are positively related, occur in diverse populations, and may be driven by similar mechanisms. Mindfulness facets such as acting with awareness, describe, non-judgement, non-reactive, and observe may moderate the relationship between these maladaptive eating phenotypes. Method A cross-sectional study assessed emotional eating-depression (Emotional Eating Scale-Revised, depression subscale), trait mindfulness facets (Five Facet Mindfulness Questionnaire-Short Form), and binge eating severity (Binge Eating Scale) in adults (N = 258). Results Emotional eating-depression was less strongly associated with binge eating severity in participants with higher acting with awareness mindfulness. Emotional eating-depression was more strongly associated with binge eating severity in participants with higher non-reactive mindfulness. Conclusions Acting with awareness and non-reactive mindfulness may be important treatment targets in concurrent presentations of emotional eating-depression and binge eating. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO

## Using virtual reality to train inhibitory control and reduce binge eating: A proof-of-concept study

**Author(s):** Manasse S.M.; Lampe E.W.; Juarascio A.S.; Forman E.M.; Zhu J.

**Source:** Appetite; Feb 2021; vol. 157

**Publication Date:** Feb 2021

**Publication Type(s):** Article

**Abstract:** Objective: One reason for limited efficacy of treatments for binge eating disorder (BED) and bulimia nervosa (BN) is a failure to directly target deficits in inhibitory control (i.e., the ability to withhold a pre-potent response). Inhibitory control trainings (ICTs; computerized tasks meant to improve inhibitory control) have shown promise but appear not to be powerful enough to generalize to real-world eating behavior or engaging enough for to sustain long-term compliance. Delivering an ICT through virtual reality (VR) technology should increase



intervention power because 3D imagery and actual real hand/arm movements are lifelike and may improve compliance because the VR environment is highly engaging. Thus, we created the first-ever VR-based ICT to test its initial feasibility, acceptability, and impact on binge eating. Method(s): We recruited participants (N = 14) with once-weekly loss-of-control (LOC) eating to use the VR ICT daily, at home, for two weeks, and measured feasibility, acceptability and change in LOC eating at post-intervention and 2-week follow-up. Result(s): The VR ICT was feasible to construct and deploy, and demonstrated high acceptability and compliance (i.e., 86.8% of daily trainings completed). Users of the VR ICT experienced large decreases in LOC eating at post-intervention and 2-week follow-up. Discussion(s): Results from this initial pilot indicate that delivering ICT through VR is feasible, acceptable, and is associated with reductions in binge eating. Future study is warranted and should examine whether a VR ICT can serve as a useful adjunct to standard treatment for BN and BED. Copyright © 2020 Elsevier Ltd

**Database:** EMCARE

## **Implicit and explicit motivational responses to high- and low-calorie food in women with disordered eating**

**Author(s):** Racine, Sarah E.; Suissa-Rochelleau, Léah; Martin, Shelby J.; Benning, Stephen D.

**Source:** International Journal of Psychophysiology; Jan 2021; vol. 159 ; p. 37-46

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**Abstract:** Eating disorders and their symptoms are thought to be associated with altered motivational responding to food. Binge eating may relate to increased reward reactivity, restrictive eating may be associated with increased threat and/or decreased reward reactivity, and the combination of these symptoms within an individual may be linked to motivational conflict to food. Using both implicit (i.e., physiological) and explicit (i.e., self-reported) measures, we tested these hypotheses in 88 women with binge eating only, restrictive eating only, both binge eating and restrictive eating, or no eating pathology. Participants viewed and rated high-calorie food, low-calorie food, and emotional images while startle eye blink and postauricular reflexes were measured. Arousal and craving, but not valence, ratings were significantly greater for high- than low-calorie food. Startle blink reflexes during all food images were significantly lower than during neutral images, whereas only high-calorie foods related to greater postauricular reactivity than neutral images. Eating pathology group did not predict implicit and explicit motivational reactions to food. Exploratory dimensional analyses revealed that rating low-calorie foods as lower on craving predicted endorsement of restrictive eating, while rating low-calorie foods as lower on valence and arousal, and experiencing lower postauricular reactivity to high-calorie foods minus neutral images, predicted greater



frequency of restrictive eating episodes. Decreased implicit and explicit appetitive motivation to high- and low-calorie food may relate to the presence and frequency of restrictive eating. Future longitudinal research should investigate whether decreased appetitive responding to food is a risk factor for, versus consequence of, restrictive eating. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO

## **Binge eating and problem gambling are prospectively associated with common and distinct deficits in emotion regulation among community women**

**Author(s):** Farstad, Sarah M.; von Ranson, Kristin M.

**Source:** Canadian Journal of Behavioural Science / Revue canadienne des sciences du comportement; Jan 2021; vol. 53 (no. 1); p. 36-47

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

Available at [Canadian Journal of Behavioural Science / Revue canadienne des sciences du comportement](#) - from ProQuest PsycARTICLES - NHS

**Abstract:** To elucidate similarities and differences between binge eating and a behavioural addiction, this prospective study compared facets of emotion regulation that were associated with problem gambling, the only formally recognised behavioural addiction, and binge eating. Community-based women (N = 202) who engaged in at-risk binge eating (n = 79), at-risk gambling (n = 36), or both (n = 87) completed four online assessments over 6 months. Baseline and 6-month surveys assessed self-reported emotion dysregulation (using the Difficulties in Emotion Regulation Scale [DERS] and UPPS-P), binge eating (using the Eating Disorder Examination—Questionnaire), and gambling (using the Problem Gambling Severity Index); abbreviated 2- and 4-month surveys assessed only binge eating and gambling. Binge eating and problem gambling were both associated with emotion dysregulation, and greater positive urgency was correlated with more severe problem gambling but less frequent binge eating. Negative urgency explained no unique variance in binge eating or problem gambling changes over time once other facets of emotion dysregulation (i.e., positive urgency and facets assessed by the DERS) were included. Thus, previous cross-sectional research may have overestimated the association of negative urgency with both binge eating and problem gambling. Overall, these findings suggest that binge eating and problem gambling are associated with common as well as distinct emotion regulation deficits. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Significance Statement—**It is unclear whether binge eating should be considered a behavioural addiction like problem gambling. As both problems tend to involve difficulties with emotion regulation, this study examined similarities and differences in emotion regulation



problems experienced by women with binge eating, gambling, or both problems over 6 months. The pattern of results showed that binge eating and problem gambling shared some but not all emotion regulation difficulties, suggesting that binge eating may not be an addiction. (PsycInfo Database Record (c) 2021 APA, all rights reserved)

**Database:** PsycINFO

## **Effectiveness of a brief form of group dialectical behavior therapy for binge-eating disorder: Case series in a routine clinical setting**

**Author(s):** Adams, Gillian; Turner, Hannah; Hoskins, Jessica; Robinson, Alice; Waller, Glenn

**Source:** International Journal of Eating Disorders; Jan 2021

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal

Available at [International Journal of Eating Disorders](#) - from Wiley Online Library Medicine and Nursing Collection 2021

**Abstract:**Objective While there is evidence to support the use of group dialectical behavior therapy (DBT) in the treatment of binge-eating disorder (BED), treatment is relatively long compared with other evidence-based treatments. This study explored the effectiveness of brief DBT groups for BED, delivered in a routine community setting. Method Eighty-four adults with BED entered 10-week DBT group treatment in a community eating disorders service. In total, 12 groups were conducted. Patients completed measures of eating disorder pathology, anxiety, depression, and emotional eating at the start and end of treatment, and at 1-month follow-up. Frequency of weekly binges was recorded. Results Outcomes were similar to those of longer versions of DBT, with an attrition rate of 26%, and significant reductions in eating disorder psychopathology and emotional eating by the end of treatment and at follow-up. Over 50% of patients were abstinent from binge eating by Session 4. Discussion Group DBT delivered in a 10-session format is clinically equivalent to longer versions of the same treatment. Future research is required to explore patterns of change and to demonstrate replicability under controlled conditions, but these findings are promising for the efficient delivery of effective treatment and reducing waiting times. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## Understanding relationships between posttraumatic stress disorder symptoms, binge-eating symptoms, and obesity-related quality of life: The role of experiential avoidance

**Author(s):** Wooldridge, Jennalee S.; Herbert, Matthew S.; Dochat, Cara; Afari, Niloofar

**Source:** Eating Disorders: The Journal of Treatment & Prevention; Jan 2021

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal

**PubMedID:** 33459212

**Abstract:** ABSTRACT Obesity, binge-eating symptoms, and PTSD symptoms commonly co-occur. Avoidance, a key feature of PTSD and proposed mechanism of binge-eating, is one potential mechanism for explaining this clinical overlap. The purpose of the current study was to: 1) examine the associations between PTSD symptoms (PTSD Checklist-Civilian; PCL-C) and measures of binge-eating symptoms (Binge Eating Scale; BES) and obesity-related quality of life (Obesity Related Well-Being Questionnaire-97; ORWELL-97) in a sample of veterans with overweight or obesity (N = 89), and 2) determine whether experiential avoidance (The Acceptance and Action Questionnaire-II; AAQ-II) explains the relationship between PTSD symptoms and binge-eating symptoms, and PTSD symptoms and obesity-related quality of life, respectively. Scores on the PCL-C, BES, ORWELL-97, and AAQ-II were all significantly correlated. Linear regression analyses indicated that higher PCL-C scores were related to higher scores on the BES and ORWELL-97 after controlling for potentially confounding factors (BMI and race). Effect sizes were in the medium-large range. Further, AAQ-II mediated the relationship between PCL-C and ORWELL-97, but did not mediate the relationship between PCL-C and BES. These findings suggest that experiential avoidance should be considered in interventions addressing co-occurring PTSD, binge-eating, and poor obesity-related well-being. Longitudinal research is needed to better understand directionality of these relationships and changes over time. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## Reevaluating cue exposure and response prevention in a pilot study: An updated treatment for binge eating disorder

**Author(s):** Norberg, Melissa M.; Handford, Charlotte M.; Magson, Natasha R.; Basten, Christopher

**Source:** Behavior Therapy; Jan 2021; vol. 52 (no. 1); p. 195-207

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**PubMedID:** 33483117

Available at [Behavior therapy](#) - from ScienceDirect

Available at [Behavior therapy](#) - from ClinicalKey - Psychiatry

**Abstract:** Approximately half of individuals with binge eating disorder (BED) fail to improve when treated with cognitive behavioral therapy; thus, better treatments are needed. Cue exposure and response prevention (CERP) may be one option, but its full potential for reducing binge eating remains unknown because prior applications for binge eating have not utilized the broad range of strategies believed to optimize exposure therapy. The current single-subject AB design investigated the acceptability and effectiveness of a comprehensive CERP treatment among 8 women who met DSM-5 criteria for binge eating disorder. Changes in the number of binges were measured from baseline to the end of treatment, and desire to eat, salivation, and idiographic expectancies of aversive outcomes to food-cue exposure (idiographic CS-US expectancies), including expectancies about ability to tolerate distress when exposed to food cues were measured across the course of treatment. Statistical analysis revealed a significant reduction in the number of binges from baseline to the end of treatment. Across the course of treatment, desire to eat and idiographic CS-US expectancies reduced, and distress tolerance expectancies increased. No participants dropped out and all reported being maximally satisfied with the treatment. Based on these findings, future randomized-control trials with larger samples should examine the efficacy of CERP and mechanisms underlying change with the aim of establishing a more effective treatment for binge eating disorder. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO





## Appearance discrimination and binge eating among sexual minority men

**Author(s):** Grunewald, William; Convertino, Alexandra D.; Safren, Steven A.; Mimiaga, Matthew J.; O'Cleirigh, Conall; Mayer, Kenneth H.; Blashill, Aaron J.

**Source:** Appetite; Jan 2021; vol. 156

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**PubMedID:** 32853713

**Abstract:** Sexual minority men (SMM) face substantial disparities in rates of binge eating compared to heterosexual individuals, underscoring the need to study risk factors for the development of binge eating amongst SMM. One potential explanation for this disparity in binge eating is minority stress theory, which posits that minority groups face stressors, such as discrimination, due to their stigmatized position in society. Additionally, specific domains of discrimination may confer different levels of risk for binge eating. Therefore, the current study examined the association of various forms of discrimination, including appearance-based discrimination, and binge eating in a sample of SMM. A sample of 200 SMM (analytic sample of  $N = 187$ ) from the greater Boston area completed self-report questionnaires assessing frequency of different forms of perceived discrimination (appearance, sexual orientation, race, etc.) and binge eating. A hierarchical binary logistic regression model was used to examine the association of different forms of discrimination with binge eating. 9% of the sample reported binge eating. Appearance-based discrimination was the most common form of discrimination (47%), and was significantly associated with binge eating, over and above all other forms of discrimination and sociodemographic variables,  $OR = 1.71$ , 95%  $CI = [1.24, 2.35]$ , Wald  $\chi^2(1) = 10.65$ ,  $p = .001$ . Findings suggest that appearance-based discrimination may be related to binge eating in SMM. Clinicians may consider assessing appearance-based discrimination among SMM patients. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## Prevalence of alcohol use disorder among individuals who binge eat: A systematic review and meta-analysis

**Author(s):** Bogusz, Krzysztof; Kopera, Maciej; Jakubczyk, Andrzej; Trucco, Elisa M.; Kucharska, Katarzyna; Walenda, Anna; Wojnar, Marcin

**Source:** Addiction; Jan 2021; vol. 116 (no. 1); p. 18-31

**Publication Date:** Jan 2021

**Publication Type(s):** Journal Peer Reviewed Journal Journal Article

**PubMedID:** 32533728

Available at [Addiction \(Abingdon, England\)](#) - from Wiley Online Library Medicine and Nursing Collection 2021

**Abstract:**Background and Aims: Binge eating disorder (BED) is correlated with substance use. This study aimed to estimate the life-time prevalence of alcohol use disorder (AUD) among individuals with non-compensatory binge eating and determine whether their life-time prevalence of AUD is higher than in non-bingeing controls. Design: A systematic search of databases (PubMed, Embase and Web of Science) for studies of adults diagnosed with BED or a related behavior that also reported the life-time prevalence of AUD was conducted. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol was followed. The protocol was registered on the International Prospective Register of Systematic Reviews (PROSPERO). Setting: Studies originating in Canada, Sweden, the United Kingdom and the United States. Participants: Eighteen studies meeting the inclusion criteria were found, representing 69 233 individuals. Measurements: Life-time prevalence of AUD among individuals with binge eating disorder and their life-time relative risk of AUD compared with individuals without this disorder. Results: The pooled life-time prevalence of AUD in individuals with binge eating disorder was 19.9% [95% confidence interval (CI) = 13.7–27.9]. The risk of life-time AUD incidence among individuals with binge eating disorder was more than 1.5 times higher than controls (relative risk = 1.59, 95% CI = 1.41–1.79). Life-time AUD prevalence was higher in community samples than in clinical samples (27.45 versus 14.45%,  $P = 0.041$ ) and in studies with a lower proportion of women ( $\beta = -2.2773$ ,  $P = 0.044$ ). Conclusions: Life-time alcohol use disorder appears to be more prevalent with binge eating disorder than among those without. (PsycInfo Database Record (c) 2021 APA, all rights reserved) (Source: journal abstract)

**Database:** PsycINFO



## Examining self-weighing behaviors and associated features and treatment outcomes in patients with binge-eating disorder and obesity with and without food addiction

**Author(s):** Wiedemann A.A.; Ivezaj V.; Potenza M.N.; Grilo C.M.; Gueorguieva R.

**Source:** Nutrients; Jan 2021; vol. 13 (no. 1); p. 1-11

**Publication Date:** Jan 2021

**Publication Type(s):** Article

Available at [Nutrients](#) - from Europe PubMed Central - Open Access

**Abstract:**Food addiction (FA) has been linked to clinical features in binge-eating disorder (BED) and obesity. A feature of behavioral weight loss (BWL) treatment involves frequent weighing. However, little is known regarding how frequency of self-weighing and related perceptions are associated with BWL outcomes among individuals with BED and obesity stratified by FA status. Participants (n = 186) were assessed with the Eating Disorder Examination before and after BWL treatment. Mixed effects models examined FA (presence/absence) before and after (post-treatment and 6-and 12-month follow-up) treatment and associations with frequency of weighing and related perceptions (reactions to weighing, sensitivity to weight gain and shape/weight acceptance). Participants with FA reported more negative reactions to weighing and less acceptance of shape/weight throughout treatment and follow-ups, and both variables were associated with greater disordered eating at follow-ups among participants with FA. Sensitivity to weight gain decreased over time independent of FA status. Frequency of weighing was associated with a greater likelihood of achieving 5% weight loss only among those without FA. Reactions to weighing and sensitivity to weight gain are associated with FA and poorer treatment outcomes in individuals with BED and obesity. Targeting these features may improve BWL outcomes among individuals with BED, obesity and FA. Copyright © 2020 by the authors. Licensee MDPI, Basel, Switzerland.

**Database:** EMCARE

## Emotional eating in adolescence: effects of emotion regulation, weight status and negative body image

**Author(s):** Shriver L.H.; Dollar J.M.; Calkins S.D.; Keane S.P.; Shanahan L.; Wideman L.

**Source:** Nutrients; Jan 2021; vol. 13 (no. 1); p. 1-12

**Publication Date:** Jan 2021

**Publication Type(s):** Article

Available at [Nutrients](#) - from Europe PubMed Central - Open Access

**Abstract:**Emotional eating is associated with an increased risk of binge eating, eating in the absence of hunger and obesity risk. While previous studies with children and adolescents



suggest that emotion regulation may be a key predictor of this dysregulated eating behavior, little is known about what other factors may be influencing the link between emotional regulation and emotional eating in adolescence. This multi-method longitudinal study ( $n = 138$ ) utilized linear regression models to examine associations between childhood emotion regulation, adolescent weight status and negative body image, and emotional eating at age 17. Emotion regulation predicted adolescent emotional eating and this link was moderated by weight status ( $\beta = 1.19$ ,  $p < 0.01$ ) and negative body image ( $\beta = -0.34$ ,  $p < 0.01$ ). Higher engagement in emotional eating was predicted by lower emotional regulation scores among normal-weight teens ( $\beta = -0.46$ ,  $p < 0.001$ ) but not among overweight/obese teens ( $\beta = 0.32$ ,  $p > 0.10$ ). Higher scores on emotion regulation were significantly associated with lower emotional eating at high ( $\beta = -1.59$ ,  $p < 0.001$ ) and low ( $\beta = -1.00$ ,  $p < 0.01$ ) levels of negative body image. Engagement in emotional eating was predicted by higher negative body image among overweight/obese teens only ( $\beta = 0.70$ ,  $p < 0.001$ ). Our findings show that while better childhood emotion regulation skills are associated with lower emotional eating, weight status and negative body image influence this link and should be considered as important foci in future interventions that aim to reduce emotional eating in adolescence. Copyright © 2020 by the authors. Licensee MDPI, Basel, Switzerland.

**Database:** EMCARE

## **There is no such thing as a mindful binge: How mindfulness disrupts the pathway between anxiety and impulsivity on maladaptive eating behaviours**

**Author(s):** Wilson D.R.; Loxton N.J.; Joynt T.; O'Donovan A.

**Source:** Personality and Individual Differences; Jan 2021; vol. 168

**Publication Date:** Jan 2021

**Publication Type(s):** Article

**Abstract:** Research using the Revised Reinforcement Sensitivity Theory (RST) to investigate the individual differences in overconsumption of food has consistently found those who overconsume to be higher in conflict sensitivity (i.e., Behavioural Inhibition System (BIS)) and impulsivity than those who do not overconsume. However, the exact mechanisms through which these individual differences operate, and the identification of potential protective factors that may disrupt such pathways are not clear. The current study tested the moderating role of impulsivity and trait mindfulness in the pathway between BIS and two types of overconsumption; binge eating and grazing. Undergraduate students ( $n = 245$ ,  $M = 22.48$  years of age,  $SD = 8.95$ , 77% female) completed self-report measures of RST, trait mindfulness, binge eating symptoms, and grazing symptoms. Results showed that impulsivity moderated the pathway between BIS and both binge eating and grazing. With mindfulness included in the model, a two-way interaction was found for binge eating, and a three-way



Library Services

Effective, Efficient, Innovative



Oxford Health  
NHS Foundation Trust

interaction was found for grazing. Results suggest the effect of trait mindfulness on the BIS/impulsivity pathway is unique for differing severities of overconsumption, and that RST systems, trait mindfulness and target behaviours may be worthy of consideration when selecting intervention modalities. Copyright © 2020

**Database:** EMCARE