

# CORRELATION BETWEEN SEVERITY OF DEPRESSION, ANXIETY AND LOW SELF ESTEEM SYMPTOMS AND THE GRADE OF BINGE EATING DISORDER.

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## Introduction

Binge eating disorder is defined as eating an amount of food in a discrete period of time (e.g., two hours) that is definitely larger than most people would eat in a similar period under similar circumstances. These episodes occur, on average, at least once a week for three months. Episodes of binge eating are associated with a lack of control and with distress over the eating. BED often present alongside other psychiatric conditions. A study of disordered eating behaviors among adolescents found that disordered eating behaviors and depressive symptoms developed concurrently. Anxiety has been noted as a risk factor for disordered eating patterns, including binge eating, due to its frequent onset prior to maladaptive eating behaviors. Early models of EDs have argued that low self-esteem is involved in the etiology of eating pathologies. In a recent study, binge-eating symptomatology was found to be associated with a lower level of self-esteem.

## Aim of the work

The aim of the work is to screen for depressive symptoms, anxiety symptoms and low self-esteem in patients with BED and to measure the correlation between severity of depressive, anxiety and low self-esteem symptoms and severity of binge eating disorder.

## Patients

This study included 70 patients with a confirmed diagnosis of BED according to DSM-5 criteria.

## Methods

Methods : A cross-sectional design was used on a random sample of all participants who fulfilled the inclusion criteria. The following tools and techniques were used: History taking to collect sociodemographic data, medical, psychiatric and drug history and detailed history was taken from all the studied sample about any comorbid medical condition excluding them from the study. Full psychiatric interview using Structured Clinical Interview for DSM-5 (Research Version) SCID-5-RV. Psychometric studies: Beck Anxiety Inventory (BAI) using the Arabic version , Beck depression Inventory (BDI) using the Arabic version , Binge Eating Scale (BES) using the Arabic version and Rosenberg Self-Esteem scale using the Arabic version.

## Results

Table (1):Correlation between BES with different scores (n = 70)

BES vs.	r	p
RSS	-0.440*	<0.001*
BDI	0.469*	<0.001*
BAI	0.377*	0.001*

r: Pearson coefficient

\*: Statistically significant at  $p \leq 0.05$

BES: binge eating scale , RSS: Rosenberg self-esteem scale , BDI: Beck depression inventory , BAI: Beck anxiety inventory .

Table (2 : Relation between Comorbidity with levels of BES (n = 70)

	Comorbidity					
	Non-MDD (n = 47)		MDD (n = 23)		$\chi^2$	p
	No.	%	No.	%		
BES						
Mild/ Moderate	33	70.2	9	39.1	6.216*	0.013*
Severe	14	29.8	14	60.9		

$\chi^2$ : Chi square test

p: p value for Relation between Comorbidity with levels of BES

\*: Statistically significant at  $p \leq 0.05$

BES: binge eating scale , MDD : major depression disorder .

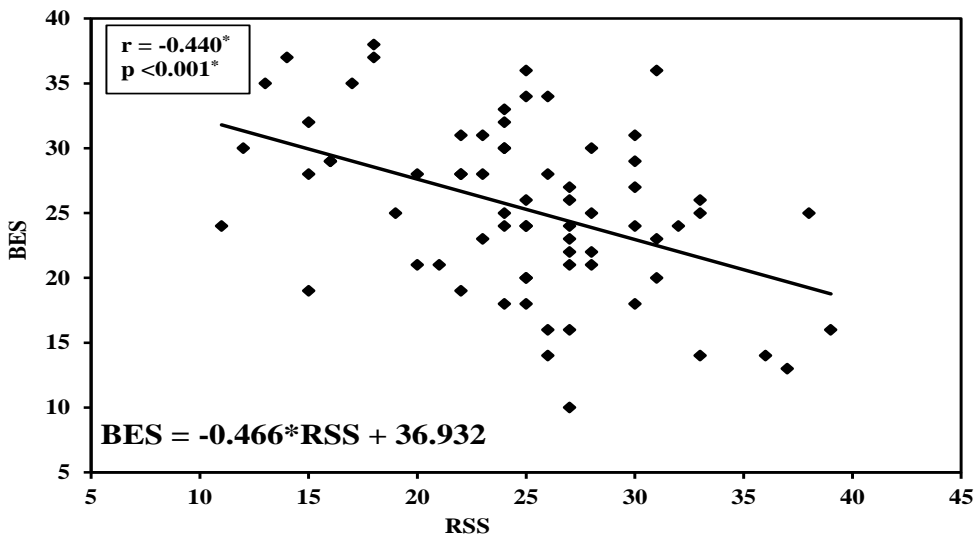


Figure (1): Correlation between BES with RSS scores (n = 70)

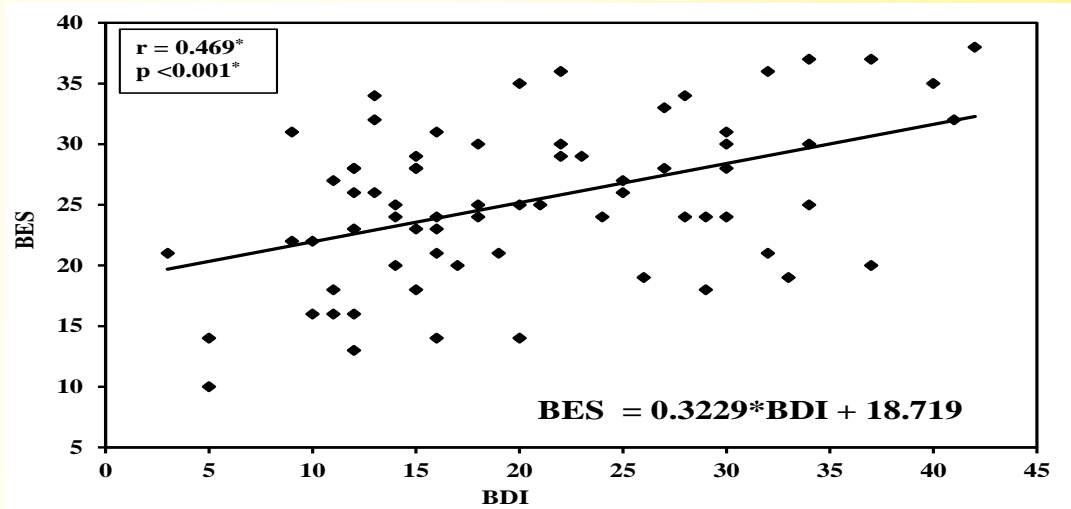


Figure (2):Correlation between BES with BDI scores (n = 70)

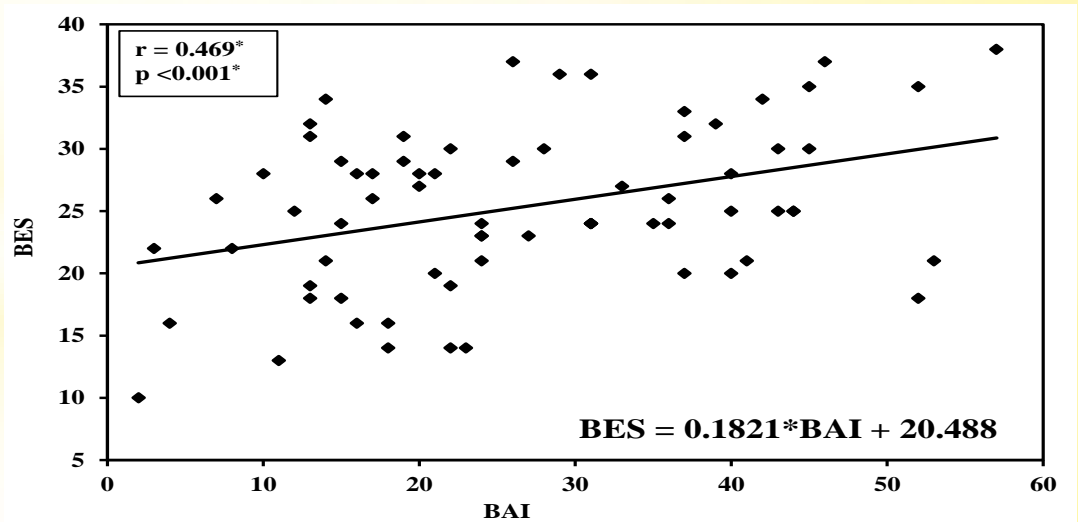


Figure (3) Correlation between BES with BAI scores (n = 70)

## Conclusion

Depression, anxiety and low self-esteem were significant factors that contributed to severity of binge eating disorder. Low self-esteem being an independent construct to severity of binge eating disorder suggests the need for further attention to this patient population.