Georgetown University Medical Center; Diet Managment and Eating Disorders Program. Compulsvie eating, depression, and failure to complete a behavioral group weight loss program. 4th Internatinal Congress on Obesity, New York City; 1983 (abstr).



COMPULSIVE EATING, DEPRESSION, AND FAILURE TO COMPLETE A BEHAVIORAL GROUP WEIGHT LOSS PROGRAM*

C. M. Hoage and M. E. Fediuk

Georgetown University Medical Center

Diet Management and Eating Disorders Program

ABSTRACT

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THE RELATIONSHIP BETWEEN COMPULSIVE EATING (BINGFING). DEPRESSION, AND SUCCESS IN A BEHAVIORAL GROUP WEIGHT LOSS PROGRAM WAS ASSESSED. FORTY-EIGHT OVERWEIGHT WOMEN, AGED 19 AND OVER. WERE ASSIGNED TO FOUR 9-WEEK WEIGHT LOSS GROUPS. EATING, AS MEASURED BY THE BINGE EATING SCALE (GORMALLY, BLACK, DASTON & RARDIN, ADD, BEH., 7:47-55, 1982) AND DEPRESSION, AS MEASURED BY THE BECK DEPRESSION INVENTORY (BECK, CENTER FOR COGNITIVE THERAPY, PHILA., 1978) WERE ASSESSED PRIOR TO TREATMENT, AT FOUR WEEKS, AND AT THE END OF TREATMENT. IT WAS FOUND THAT INITIAL HIGH COMPULSIVE EATING SCORES (> 25) AND/OR RELATIVELY HIGH DEPRESSION SCORES (> 17) WERE PREDICTIVE OF POOR ATTENDANCE AND LOWER WEIGHT LOSS, WITH COMPULSIVE EATING SCORES AND DEPRESSION SCORES BEING POSITIVELY CORRELATED (r= .67). SIXTY-SIX PERCENT OF DEPRESSED SUBJECTS AND 75% OF SEVERE COMPULSIVE EATERS FAILED TO ATTEND MORE THAN SIX (6) OF NINE (9) WEEKLY SESSIONS, AS COMPARED TO ONLY 17% OF OTHER SUBJECTS (χ^2 (1)= 32.68, P < .001). IN ADDITION, MEAN WEIGHT LOSS WAS LOWER IN DEPRESSED AND/OR SEVERE COMPULSIVE EATER SUBJECTS (6.6 LBs.) AS COMPARED TO OTHER SUBJECTS (10.5 LBs., ± (44) = 1.68, p < .05).

THE DATA SUGGEST THAT THE PRESENCE OF EITHER SIGNIFICANT DEPRESSION OR SEVERE COMPULSIVE EATING ARE COUNTERINDICATIONS FOR TREATMENT BY TRADITIONAL GROUP BEHAVIORAL WEIGHT LOSS TECHNIQUES.

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