

# The role of emotions in anorexia nervosa

Published: 23-05-2018

Last updated: 12-04-2024

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<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	Eating disorders and disturbances
<b>Study type</b>	Observational non invasive

## Summary

### ID

NL-OMON55464

### Source

ToetsingOnline

### Brief title

The role of emotions in anorexia nervosa

### Condition

- Eating disorders and disturbances

### Synonym

Anorexia Nervosa, eating disorders

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Accare, kinder- en jeugdpsychiatrie

**Source(s) of monetary or material Support:** Ministerie van OC&W, Accare kinder- en jeugdpsychiatrie

### Intervention

**Keyword:** anorexia nervosa, disgust, eating disorders, emotions

## Outcome measures

### Primary outcome

- Disgust propensity and disgust sensitivity as measured with the Disgust Propensity and Sensitivity Scale revised (DPSS-R)
- Self-disgust as measured with the Self-Disgust Eating Disorder Scale (SDES)
- Disgust-based emotional reasoning as measured with the Scenario Questionnaire for Emotional Reasoning

### Secondary outcome

- Body satisfaction as measured with the Body Image States Scale (BISS)
- Body avoidance behavior as measured with the Body Checking and Avoidance Questionnaire (BCAQ)

## Study description

### Background summary

Previous research has shown that people with an eating disorder have a stronger tendency to experience disgust (disgust propensity) and are bothered more when they are disgusted (disgust sensitivity). In addition, disgust propensity and sensitivity appear to be associated with the severity of eating disorder symptoms (e.g., Davey & Chapman, 2009; Davey, Buckland, Tantow, & Dallos, 1998; Harvey et al., 2002; Mayer, Muris, Bos, & Sijkerbuijk, 2008b). Research has also shown that patients with anorexia nervosa link disgust with food intake and the feeling of being full or saturated, and that feelings of disgust led to food restriction (Espeset et al., 2012). Finally, research has shown that people with eating disorders are more disgusted by themselves and their own bodies (self-disgust) (Ille et al., 2014; Kollei, Brunhoeber, Rauh, Zwaan, & Martin, 2012). Although there are quite some indications that the emotion disgust is related to eating disorders, it is not yet clear exactly how disgust plays a role in eating disorder symptomatology.

### Study objective

The aim of this study is to gain knowledge about how disgust may contribute to the eating disorder Anorexia Nervosa (AN). Part 1 aims to test a theoretical model on the relationship between disgust propensity, disgust sensitivity, self-disgust and eating disorder symptoms. In Part 2 we investigate whether disgust-based emotional reasoning could contribute to the maintenance of anorexia symptoms.

## **Study design**

The study is a correlational study, with one assessment point in which participants fill in a number of online questionnaires for a total duration of approximately 45 minutes.

## **Study burden and risks**

Participation in the study is not associated with any risks. There is only a 45-minute time investment. There are no direct benefits for the participants in the study. Participation in the research may however yield useful results for improving treatment options for a population that is difficult to treat.

## **Contacts**

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## **Trial sites**

### **Listed location countries**

Netherlands

## Eligibility criteria

### Age

Adolescents (12-15 years)  
Adolescents (16-17 years)  
Adults (18-64 years)  
Elderly (65 years and older)

### Inclusion criteria

The patient group:

- Patients who are in treatment or who are referred to the Centre for Eating Disorders of Accare
  - Patients who meet the DSM-5 criteria of anorexia nervosa or atypical anorexia nervosa
  - Patients between the age of 14 - 23
  - The participant is physically and cognitively able to fill in questionnaires for 45 minutes on a computer
- The control group:
- Participants individually matched on age, gender and educational level to the patients
  - The participant is physically and cognitively able to fill in questionnaires for 45 minutes on a computer

### Exclusion criteria

The patient group:

- Patients who do not speak Dutch
- The control group:
- Participants who do not speak Dutch
  - Participants who meet the criteria of an eating disorder (EDE-Q  $\geq 4$ )
  - Participants who are underweight (adjusted BMI  $\leq 18.5$ )
  - Participants who are obese (adjusted BMI  $\geq 30$ )

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## Study design

### Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial

Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Basic science

## Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	08-08-2018
Enrollment:	128
Type:	Actual

## Ethics review

Approved WMO	
Date:	23-05-2018
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	
Date:	19-02-2020
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)
Approved WMO	
Date:	03-02-2021
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Groningen (Groningen)

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
CCMO	NL63447.042.17