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Emotional Eating Disorder and Obesity

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Abstract

Eating is one of the basic need for human beings to survive, however to survive is not the only reason pushes us to eat. Even the times when we do not feel physically hungry, we might find ourselves eating a huge box of chocolate, lots of junk food or eating more than the amount we need after a stressful day or the times you feel sad. Emotions and eating behavior are in a two-way relationship that affects each other. Such kind of behavior is called "Emotional Eating Disorder". In modern times, emotional eating disorder, which can be defined as "the propensity to eat in response to positive and negative emotions" (Turton, Chami & Treasure, 2017) [1] became widespread all around the world. If the individual starts to see foods as a way of expressing their emotions, emotional eating disorder might become a cause for obesity. The purpose of the study is demonstrating the positive correlation between obesity and emotional eating disorder which might path the way for more healthy future without obesity and eating disorders. Because clarifying the emotional causes behind the behavior will help resolve the problem

Introduction

Emotional eating is a disorder in which individuals try to cope with their emotions such as fear, anxiety, anger, sadness by eating although they are not hungry physically. Emotional eating can becomes a recurring habit when combined with the temporary pleasure effect of food and the difficulty of experiencing negative emotion. Due to the pleasure coming from consuming food, individuals may feel temporary feeling of relief while overeating. However, numerous negative effects from different aspects may occur within the individuals after this problematic behavior. One of them is "obesity". World Health Organization [2] defined obesity as "abnormal or excessive fat accumulation that presents a risk to health. A body mass index (BMI) over 30 is obese." It is tremendously important to prevent and treat emotional eating disorder because it is positively correlated with obesity which is an illness causes a massive number of death than the deaths caused by traffic accidents, Alzheimer's or other deadly issues that get a lot of airtime, like terrorism, combined (The New England Journal of Medicine, 2015) [3]. In our modern societies; work anxiety, traffic, mobbing and other negative emotions have increased drastically which might built a base for emotional eating disorder and as result of obesity. This paper might help in terms of understanding the issue and making people take precautions beforehand the illnesses hit them.

Literature Review

After the increment of obesity ranks all around the world, researchers started to focus more on the area and they tried to find possible reasons of it. Several studies showed that one of the major reason for obesity is emotional eating disorder. The basic theory of emotional eating is Psychoanalytic Theory for Obesity, which suggests that food is used as an emotional defense in distressing situations and thus leads to obesity (Kaplan & Kaplan, 1957) [4]. Also Braet and his friends were one of these researchers that were interested in emotional eating disorder and obesity. In order to see the correlation between them they made an experiment. 68 students from the University of London participated in an experiment on this subject. Half of the respondents were told that they would have to prepare a four-minute speech on any topic after lunch and that these talks would be filmed and evaluated. The other half was told that they would have to listen to a conference after lunch. At the end of the study, they saw that the group, who should make a presentation, chose fast-food style products rich in fat, carbohydrates and sugar for lunch. It is known that carbohydrates and sugary foods release a mood-regulating amino acid to the brain. For this reason, the researchers think that young people who are stressed to make presentations tend instinctively to this type of food (Braet et al., 2007) [5]. This experiment shows that people tend to eat sugary, full of carbon-hydrated and rich in fat food in order to cope with their undesired emotions such as fear, anxiety and sadness. Because of the relation between these ingredients and obesity we can say that there is a positive correlation between emotional eating disorder and obesity. However, external factors should also be taken into consideration. In addition, according to Mayo Clinic [6], emotional eating causes obesity and as it progresses, it creates more serious both metabolic and psychological problems. Moreover, emotional eating can lead to further eating addiction or binge eating disorder. It is a fact that many morbid obesity patients have emotional eating habits. The importance of providing behavioral changes in the treatment of obesity is understood here. For this reason, it is not only the regulation of nutrition and diet programs in the treatment of obesity; It will be beneficial to investigate how, why, what the patient eats, to measure and evaluate the nutritional behavior and to make changes accordingly. To have a healthy lifestyle in preventing obesity; which are techniques that prevent emotional eating; Nutrition, exercise and balanced-adequate nutrition programs can be very useful for real and permanent change (Ünal, 2018) [7].

According to the psychosomatic theory explaining emotional eating disorder, it shows that eating emotional plays an active role in the etiology of obesity. Individuals diagnosed with obese tend to suppress or reduce hunger by using nutrients to reduce the emotional stress that occurs in them. It was found to be high. In another study, it was observed that emotional eating behavior was observed to be higher in obese individuals and in negative emotional states, obese individuals were found to consume more nutrients than other groups, while mildly obese individuals ate more in the face of positive emotions (Seven, 2013) [8]. In recent years, bariatric surgery, which is used in the treatment of obesity, especially in patients with morbid obesity, is used as a treatment method that helps to lose weight significantly and heal comorbid diseases associated with obesity. However, after bariatric surgery, approximately 20% of patients failed to maintain their lost body weight after 1-1.5 years, and an increase in body weight was observed. Moreover, in another study by Cornelis and his friends [9] emotional eating behavior and Body Mass Index (BMI) were determined by questionnaires for 1471 men and 2381 women from two US cohorts. Obesity positively associated with emotional and uncontrolled eating. An overall genetic susceptibility to obesity might extend to eating behaviors. The link between specific emotional eating disorder and obesity may be mediated by eating behavior but larger studies are needed to confirm these findings.

Discussion

In contrast to the researchers who are arguing that emotional eating disorder causes obesity, some of the researchers are believing that people who have emotional eating disorder are already obese. Thus, obesity cannot be a result of this disorder because obesity is with them even from the beginning. "Laboratory studies indicate that obese individuals are more emotionally reactive and more likely to overeat when distressed than are those of normal weight, these findings applied only to snacks, not to meals. (Lowe & Fisher, 1983) [10]. I would like to differentially disagree with this argument and findings because according to their study, these finding do not involve real meals and limited just to snacks. For that reason making generalizations based on this study, such as obesity and emotional eating disorder is not positive correlated, is not possible because of the inadequacy of external validity of this study. On the other hand, there is a group of researchers that thinking obesity is an illness inherited with genes. Thus, external effect such as emotional eating disorder, binge eating disorder etc. cannot have effects on obesity. "We and others have identified several single gene defects that disrupt the molecules in the leptin-melanocortin pathway causing severe obesity in humans" (Farooqi & O'Rahilly, 2006) [11]. However, in other studies it is found that the effect of genes in obesity is only between 40-70%. "The involvement of genetic factors in the development of obesity is estimated to be 40-70%. Some of these obesogenic or leptogenic genes may influence obese individual's response to weight loss or weight management" (Hainer, Toplak & Mitrakou, 2008) [12]. In other words we can say that at least there is a 30 percent for external effects in becoming obese. One of these effect can be emotional eating disorder as other studies shown.

After seeing the both conflicting ideas and studies, we can assume that the link between obesity and emotional eating disorder is strong. Preventing and eliminating emotional eating disorder and directly preventing obesity is in our hand because both of them are treatable illnesses. The first condition to be able to change harmful behavior is to have awareness. If you think you are going to eat to deal with emotions, first try to notice the factors that start, maintain and increase this problem. Emotional eating can bring negative emotions like guilt, shame, and regret. It is possible to make positive changes even if you have little power over your meals and feelings. You can find healthier ways to deal with your emotions, learn to practice mindful eating, take your weight control and finally stop emotional eating. Furthermore the primary step to prevent might also be being able to distinguish between physical hunger and emotional hunger. Eating normally is an action taken to satisfy the physical need of nutrition, and in fact, the aim is to get energy. It is important to realize this physical need and recognize bodily hunger to prevent emotional eating. Because it is found that generally emotional eaters are not able to distinguish their physical hunger from emotional hunger.

Conclusion

In conclusion, emotions are directly affecting our eating behaviors, it is a natural and human condition that our food is affected by our emotional state. However, we are using foods as a way of reflecting our feeling too often and turning this behavior into a coping mechanism and into a vicious circler might cause several problems, more significantly it may lead to obesity. Whether emotional eating disorder and obesity is positively correlated or not is a controversial topic among researchers. While some of them are arguing that obesity cannot be a result of emotional eating disorder because of its inherited nature, some of them were believing that the direction in this relation is visa-versa because the people who are diagnosed with obesity were already involving in emotional eating

disorders. However, all of these above mentioned arguments have lost their accountability and reliability because more sufficient evidences and scientific experiments have shown that there is a positive correlation between emotional eating disorder and obesity. The more people try to cope with their undesired or neutral feelings by using foods and seeing them as a way for expressing their feelings, the more they might get diagnosed with obesity in the future because of the carbohydrate, sugar and fat intake during the emotional eating process. I strongly encourage future researchers to work more in this area because there is a huge ignorance and gap in it. It is known that if you do not now what you are facing with, you might not able to prevent and cope with it. Thus, understanding the causes and effects of emotional eating disorder an obesity may help individuals to be free from illnesses and to be in state which they feel themselves both physiologically and physically well. In addition, I recommend to those who are reading this paper and feeling the similar symptoms of emotional eating disorder in himself/herself to urgently seek help from a specialist because neither obesity nor emotional eating disorder is not unchangeable.

References

1. Turton R, Chami R, Treasure J (2017) Emotional eating, binge eating and animal models of binge-type eating disorders. *Current obesity reports* 6: 217-228.
2. World Health Organization. (2014) What is overweight and obesity.
3. Belluz J (2017) Obesity now kills more people worldwide than car crashes, terror attacks, and Alzheimer's combined.
4. Kaplan HI, Kaplan HS (1957) The psychosomatic concept of obesity. *Journal of Nervous and Mental Disease* 125: 181-201.
5. Braet C, Soetens B, Moens E, Mels S, Goossens L, et al. (2007) Are two informants better than one? Parent-child agreement on the eating styles of children who are overweight. *European Eating Disorders Review: The Professional Journal of the Eating Disorders Association* 15: 410-417.
6. Mayo Clinic Staff (2012) Eating disorders.
7. Ünal SG (2018) Duygusal Beslenme Ve Obezite. *Başkent Üniversitesi Sağlık Bilimleri Fakültesi Dergisi-BÜSBİD* 3-30-47.
8. Seven H, Yüksek Lisans Tezi (2013) Yetişkinlerde duygusal yeme davranışının beslenme durumuna etkisi (Doctoral dissertation, Sağlık Bilimleri Enstitüsü). pp. 182.
9. Cornelis MC, Rimm EB, Curhan GC, Kraft P, Hunter DJ, et al. (2014) Obesity susceptibility loci and uncontrolled eating, emotional eating and cognitive restraint behaviors in men and women. *Obesity* 22: E135-E141.
10. Lowe MR, Fisher EB (1983) Emotional reactivity, emotional eating, and obesity: A naturalistic study. *Journal of behavioral medicine* 6:135-149.
11. Rahilly S, Farooqi IS (2006) Genetics of obesity. *Philosophical Transactions of the Royal Society B: Biological Sciences* 361: 1095-1105.
12. Hainer V, Toplak H, Mitrakou A (2008) Treatment modalities of obesity: what fits whom?. *Diabetes care* 31: S269-S277.