



ORIGINAL ARTICLE

## Satisfaction with weight and characteristics of eating disorders in high school<sup>☆</sup>



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### KEYWORDS

Adolescents;  
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### Abstract

**Introduction:** The prevalence of diseases related to eating behaviour disorders has increased among adolescents. The objective of this study is to analyse the satisfaction with body weight of schoolchildren as regards their body mass index and the strategies used to control their diet. **Method:** A total of 1197 students from secondary education (12–18 years) answered a questionnaire on eating habits and body weight control. Their weight and height were measured and body mass index was calculated.

**Results:** More than two-thirds (68.1%) of the students who had an adequate BMI were satisfied with their weight. Greater dissatisfaction with weight is associated with overweight (OR = 10.23) and obesity (OR = 16.60). Students with overweight are on a diet having consulted an expert such as a physician or even the family, whereas among schoolchildren with normal weight there is a large percentage on a diet without consultation. About 13.87% of the schoolchildren have undertaken compensatory activities due to excessive eating. An overweight BMI is associated, with more than twice the risk (OR > 2.00), with the use of measures such as physical activity, vomiting, or fasting to compensate an excessive intake.

**Conclusions:** Overweight and obese schoolchildren are more likely to be dissatisfied with their body and are more likely to use ploys such as vomiting, in order to compensate for the excess intake.

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**PALABRAS CLAVE**

Adolescentes;  
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alimentario

**Satisfacción con el peso y rasgos de trastorno del comportamiento alimentario en secundaria****Resumen**

**Introducción:** Las enfermedades relacionadas con los trastornos del comportamiento alimentario han incrementado su prevalencia entre los adolescentes. El objetivo de este estudio es analizar la satisfacción con el peso corporal de los escolares en relación con su índice de masa corporal y las estrategias que utilizan para el control de la dieta.

**Método:** Mil novecientos noventa y siete alumnos de enseñanza secundaria obligatoria (12 a 18 años) contestaron un cuestionario sobre hábitos alimentarios y de control de peso corporal, además se les pesó y talló, y se calculó el índice de masa corporal.

**Resultados:** Un 68,1% de los escolares tiene una relación de satisfacción con su peso e índice de masa corporal adecuados, una mayor insatisfacción con el peso se asocia con el sobrepeso (OR = 10,23) y obesidad (OR = 16,60). Los alumnos con sobrepeso hacen dieta asesorándose principalmente por un médico o la familia, mientras que en los escolares con normopeso hay un amplio porcentaje que realiza dieta por su cuenta. Un 13,87% de los escolares ha realizado actividades compensatorias ante ingestas excesivas; un índice de masa corporal de sobrepeso se asocia a más del doble de riesgo (OR > 2,00), con el empleo de medidas como la actividad física, el vómito o el ayuno para compensar una ingesta excesiva.

**Conclusiones:** Hay más posibilidades de insatisfacción corporal en los escolares con sobrepeso y obesidad. Los alumnos con sobrepeso tienen más posibilidades de utilizar maniobras, como el vómito, para compensar los excesos de ingesta.

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**Introduction**

At present, eating disorders (EDs) are the most frequent type of psychiatric disorder with physical repercussions and the third most common chronic disease in young women 15–19 years of age<sup>1</sup> due to their increased prevalence and severe consequences for affected patients,<sup>2</sup> and they have reached almost epidemic proportions in the young population of western countries.<sup>3</sup>

These disorders have a psychological and multifactorial aetiology,<sup>4</sup> and the two that are best defined are anorexia nervosa (AN) and bulimia nervosa (BN).

Multiple factors are involved in the onset of EDs, each of which may be involved to a greater or lesser extent in the development or continuation of these diseases.<sup>1,5–8</sup> There is growing evidence that age, self-concept and physical activity may play key roles in the pathogenesis of some EDs.<sup>9–12</sup> There are additional specific factors, known as dietary factors, that are behind voluntary choices to lose weight.<sup>13</sup>

In this regard, EDs are closely associated, as a cause and/or effect, with changes in body image.<sup>14</sup>

Eating disorders are relatively more common in female adolescents and young women.<sup>11,15</sup> The incidence of AN increased worldwide in the 20th century, especially in women 15–24 years of age; its incidence in Europe has remained stable since the 1970s, but it seems to have increased in some South American countries.<sup>16</sup>

In recent years, there has been evidence of an increase in the well-established clinical forms of EDs in Spain.<sup>17</sup> The prevalence of AN is approximately 0.5–1%, peaking in the 15- to 24-year-old age group, while the prevalence of BN is

higher, 2–3%,<sup>8,10,18</sup> and the prevalence of eating disorders not otherwise specified (EDNOS) is approximately 2.7%; all of these percentages are lower in males.<sup>2,13,19,40</sup> The prevalences found in males in the Spanish population are similar to those in other countries and comparable to the prevalence reported by the American Psychological Association, and 8.8% of adolescents are considered to be at risk.<sup>20</sup>

The combination of a negative body image with overvaluing body image is a predisposing factor for EDs<sup>14,21,22</sup> associated with an increase in restrictive behaviours.<sup>23,24</sup>

Once we reviewed these data, the main aim of our study was to analyse the body image of compulsory secondary school (ESO) students in Badajoz, as well as their behaviours in relation to variables associated to weight control, using the body mass index (BMI) percentile to analyse its influence in these types of pathologies, in order to be able to implement strategies to prevent and control EDs.

**Participants and methods****Participants**

We conducted a quantitative epidemiological study with a non-experimental cross-sectional ex post facto design. Participants were selected by random cluster sampling. We estimated the sample size with a formula for finite or known populations with a confidence interval (CI) of 95.4%. We surveyed a total of 1197 participants, 49.9% of who were male ( $N=597$ ) and 50.1% female ( $N=600$ ); Table 1 summarises the characteristics of the sample.

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