



Review

Phenomenology, epidemiology, co-morbidity and treatment of a specific phobia of vomiting: A systematic review of an understudied disorder

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HIGHLIGHTS

- The first systematic review of existing literature on Specific Phobia of Vomiting
- Lack of research compared to other phobias, especially into effective interventions
- RCTs needed to evaluate effective treatments and comparison to other approaches.

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ABSTRACT

Specific Phobia of Vomiting (SPOV) is an under-researched disorder compared to other Specific Phobias. A systematic review was conducted to synthesise existing research across areas of phenomenology, aetiology, epidemiology, co-morbidity, assessment measures and treatment.

Online databases (Psychinfo, Embase, Medline, Pubmed and Cochrane Library) were searched using terms related to SPOV and 'emetophobia'. A manual search of reference lists of included papers was also conducted. In total, 385 articles were found and 24 were included in the review. The review was registered on the PROSPERO register (CRD42016046378).

The review presents a qualitative synthesis of identified studies exploring the features of SPOV including locus of fear, feared consequences of vomiting, and common safety and avoidance behaviours. It also identified articles describing aetiological factors involved in the development of SPOV, co-morbid disorders and the epidemiology of the disorder. Further studies focused on valid and reliable measures to assess SPOV, and treatments that are effective at reducing symptomatology of SPOV and psychological distress.

There are relatively few published research articles on SPOV, and particularly high quality studies exploring effective treatment options for SPOV. Further research should focus on RCTs for comparing different approaches to reducing symptomatology and distress in people with SPOV.

1. Introduction

1.1. SPOV: an overview

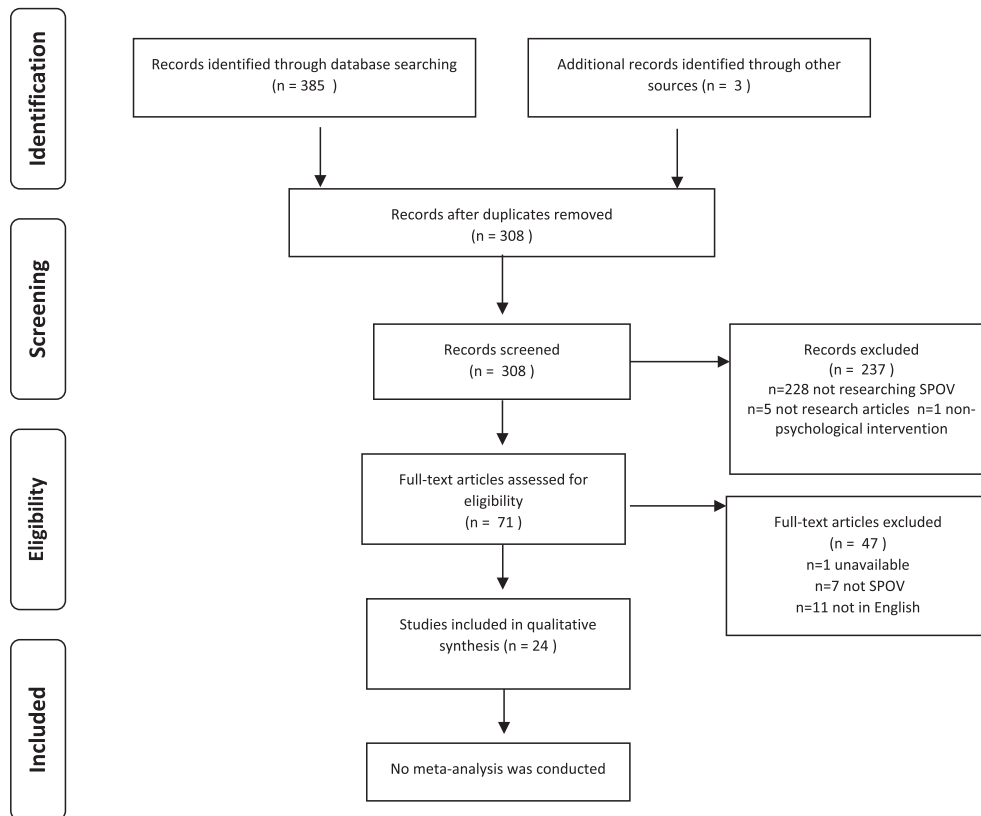
Specific Phobia of Vomiting (SPOV), also known as 'emetophobia', is categorized as a 'Specific Phobia: Other' subtype in DSM-V, involving a persistent fear of vomiting which is disproportional to the threat or danger posed by such an outcome (American Psychiatric Association, 2013; World Health Organization, 1992). Fear of vomiting will often lead to persistent avoidance of vomit or nausea-related activities or situations (World Health Organization, 1992). Individuals with SPOV typically fear themselves vomiting more than other people (Lipsitz,

Fyer, Paterniti, & Klein, 2001; Veale & Lambrou, 2006); and a proportion fear vomiting in public as well as vomiting alone (Holler, van Overveld, Jutglar, & Trinka, 2013; Veale & Lambrou, 2006). The reported prevalence rate of SPOV varies; however, it is commonly thought to be rare in community samples (Becker et al., 2007).

SPOV is conceptualised as a Specific Phobia; however, there are ways in which it differs to other phobias. For example, SPOV is widely recognised to be more prevalent in women across the majority of studies. The reported prevalence rate of SPOV and a fear of vomiting varies; however, community prevalence rates also suggest that SPOV is relatively rare compared to other Specific Phobias (Becker et al., 2007). However, clinically many more people with SPOV may present to

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Fig. 1. PRISMA (2009) Flow Diagram.



services. Additionally there is significant overlap between the features of SPOV and other disorders, such as OCD, health anxiety and disordered eating (Veale, Costa, Murphy, & Ellison, 2012; Veale, Murphy, Ellison, Kanakam, & Costa, 2013). SPOV may therefore be more difficult to recognise and diagnose compared to other phobias, and therefore the path to specialist treatment may be hindered. This may further explain the underestimation of prevalence rates in community and clinical samples (Boschen, 2007; Veale, 2009). Furthermore, the feared stimuli central to SPOV are often interoceptive cues that occur daily such as gastric complaints or nausea. This may have implications regarding the development of SPOV and the degree of interference in daily life compared to phobias of external cues that can more easily be avoided. Lastly, SPOV is generally considered by clinicians as hard to treat. The evidence-based treatment of choice for a specific phobia is graded exposure (Wolitzky-Taylor, Horowitz, Powers, & Telch, 2008). However, a survey by Lipsitz et al. (2001) found that only 6% of individuals with fear of vomiting were willing to try exposure; 54% definitely would not try it and 36% were unsure. Treatment of SPOV may be further complicated by complex features such as rituals or compulsions, disordered eating and low BMI, other misdiagnoses, high dropout rates and difficulties with repeated exposure to vomiting (van Hout & Bouman, 2012; Veale, 2009; Veale & Lambrou, 2006).

1.2. Objectives

SPOV can be considered different to other Specific Phobias with regard to aetiology, complexity and treatment options. However, due its conceptualisation as a ‘Specific Phobia: Other’, research into the clinical features and treatment options specific to fear of vomiting is limited, with only one RCT to date. This review is therefore needed to highlight gaps and limitations in the current literature, in order to provide recommendations for further research.

The review will include a narrative synthesis of existing literature across the following domains:

- What is currently known about the phenomenology of SPOV?
- What is the prevalence rate of SPOV?
- What are the aetiological factors associated with SPOV?
- Which disorders are commonly comorbid with SPOV?
- Are there any valid and reliable measures for assessing SPOV?
- Which treatments are effective at reducing the symptomatology of SPOV?

2. Methods

2.1. Design

A systematic review of the literature was conducted and a qualitative synthesis of the results are presented. The review was registered on the PROSPERO register CRD42016046378. http://www.crd.york.ac.uk/PROSPERO/display_record.asp?ID=CRD42016046378

2.2. Search criteria

Search terms for all databases were “specific phobia of vomit*”, “emetophob*”, “fear of vomit*”, “phob* of vomit*” and “vomit* phob*”.

2.3. Selection procedure

Databases included in the search were Pubmed, Psycinfo, Embase, Medline and the Cochrane library. The final search was undertaken on 9th May 2016. All research studies on SPOV that were published in English from 1846 to May 2016 were eligible for inclusion in the review. The population of studies included in the review were people of any age with a diagnosis of or presenting with symptoms of SPOV, or fear of vomiting. We included case series, cohort studies and controlled trials. Included outcome measures were measures of SPOV symptomatology (self-reported symptoms e.g. visual analogues scales),

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