

A FIVE-YEAR PROSPECTIVE FOLLOW-UP STUDY OF LONGSTANDING EATING DISORDERS

Influence from personality disorders and Child Sexual abuse

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INTRODUCTION

Follow-up studies have shown that 20-30% of patients with eating disorders develop longstanding symptoms strongly impairing their daily life. There are very few studies on the course of these patients. The present work provides knowledge of the course and long-term outcome of longstanding eating disorders (ED) and comorbid personality disorders (PD) for patients with previous treatment failures.

Specific aims

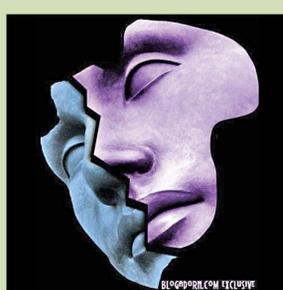
1. What are the course and long-term outcome of patients with longstanding ED (Study 1)?
2. How do the proportions of PDs in subgroups of ED and among ED patients evolve in a longitudinal perspective (Study 2)?
3. What predicts poor outcome of longstanding ED (Study 3)?

METHODS

From August 1998 to June 2001, 86 consecutive patients were admitted to a specialised ED unit at a psychiatric hospital, Modum Bad and entered this study. The admission criteria were symptoms of AN, BN, and EDNOS that impaired daily life functioning, inadequate responses. The participants were assessed upon admission, discharge and at one-, two-, and five-year follow-up (Figure 1). A total of 77 patients (90 %) were available for the five-year follow-up. Measures in this study comprised self-report questionnaires completed by the participants (IIP, SCL-25 and EDI) and three structured clinical interviews (SCID-II, SCID-I and Eating Disorder Examination).



Eating disorder are syndromes characterized by severe disturbances in eating behavior and by distress or excessive concern about body shape or weight.

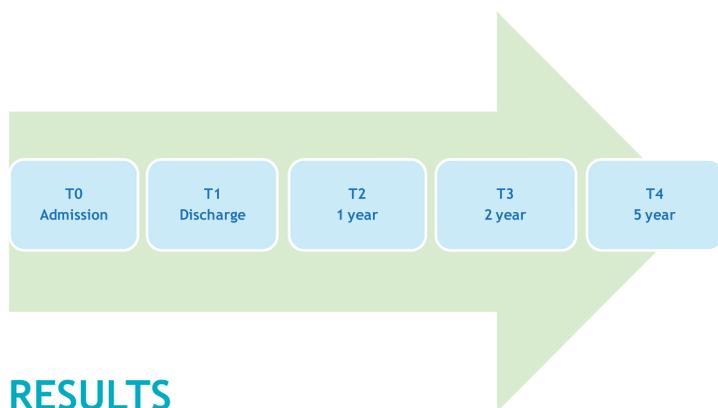


Personality disorder is characterized as an enduring pattern of inner experience and behaviour that deviates markedly from the expectations of the individuals culture.

Study 3:

Vrabel, K., Hoffart, A., Ro, O., Martinsen, E. W., & Rosenvinge, J. (2009). Co-occurrence of avoidant personality disorder and child sexual abuse predicts poor outcome in longstanding eating disorders. *Journal of Abnormal Psychology* (in press). Reports on prognostic factors for the poor outcome of ED symptoms and how the predictors interact. Multi-level mixed model was used to examine the predictors. In these prospective longitudinal analyses, avoidant PD and child sexual abuse interacted in predicting high levels of ED during a long-term course (figure 2).

Figure 1: Design of study



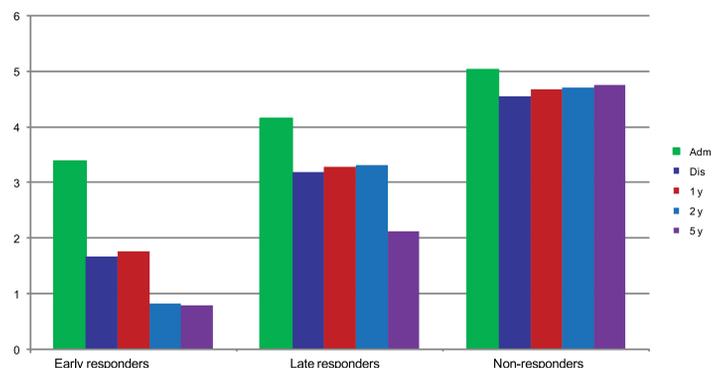
RESULTS

Study 1:

Vrabel, K. R., Ro, O., Martinsen, E. W., Hoffart, A., & Rosenvinge, J. H. (2009). The course of illness following inpatient treatment of adults with longstanding eating disorders: A 5-year follow-up. *International Journal of Eating Disorders*, 41, 224-232.

Reports on the course and outcome of five years after completing treatment and identifies subgroups of patients with different course and outcome. The key findings were first that among the 77 patients (90%) who participated, 46 patients (61%) had improved, and 30 (39%) did not meet diagnostic criteria for an ED. Second, a cluster analysis identified a group of 21 patients (27%) with no improvement over time (table 1).

Table 1: Different course of ED-symptoms

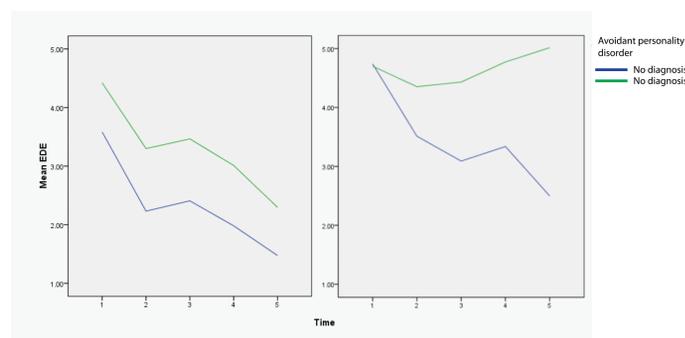


Study 2:

Vrabel, K. R., Ro, O., Martinsen, E. W., Hoffart, A., & Rosenvinge, J. H. (2010). Five-year prospective study of personality disorders in adults with longstanding eating disorders. *International Journal of Eating Disorders*, 43, 22-28.

Reports on the change in proportions of PD over time. The results showed that during inpatient treatment, 58 patients (78%) had one or more PD and this was reduced to 32 patients (43%) at the five-year follow-up. Dimensional indices and a mean personality index changed significantly over time in anorexia nervosa, bulimia nervosa and eating disorder not otherwise specified, but no significant changes between-diagnoses emerged. Recovered patients had lower frequency of personality disorder ($p < .01$).

Figure 2: Interaction of avoidant personality disorder x child sexual abuse x time. Left: patients without a history of child sexual abuse Right: Patients with a history of child sexual abuse.



DISCUSSION

Limitations:

- The sample size is relatively small, thus deflating statistical power for some of the statistical tests. On one hand, this small sample size means there is little risk of type I error.
- Follow-up assessments were not performed by independent assessors, but by expert clinicians who to some extent had been involved in the treatment.
- One important question is whether the findings may be generalized to ED patients in general, as the patients of this study have been recruited from a specialist treatment unit.

Conclusion:

- There was statistically significant reduction in eating disorder symptoms at the five-year follow-up.
- Cluster analysis identified a group of patients with no improvement over time.
- Patients had higher probability of recovery from personality disorders than from eating disorders.
- Avoidant personality disorder and child sexual abuse interacted in predicting high levels of eating disorder symptoms during the longterm course.