A STUDY ON PROFILE AND LIFE STYLE OF BINGE EATING PEOPLE

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ABSTRACT

Illness characterized by severe distress and concern about body weight or shape describe eating disorder. It means inadequate or excessive food intake, which can ultimately damage a well being of the individual. Binge Eating Disorder is the name of an eating disorder, in which a person is unable to prevent himself or herself from eating large amounts of food, often in a mindless state and in a short space of time; and the eating feels out of control. Compulsive eating describes the eating pattern of individuals, who feel that their eating is out of control and they are addicted to food leading to weight gain. People, who describe themselves as compulsive eaters feel that they cannot control their eating, and thus they end up eating more than they need. As a result, compulsive overeaters usually struggle to control their weight. Compulsive overeaters have cravings that they cannot master, and may over eat small or large amounts of food, or just pick and nibble some of the time. The objective of present research is, to study the profile of binge eating disorder people to understand their life style. The sample consisted of 55 eating disorder population in Hyderabad. The data about their demographic profile, life style and eating habits was collected through questionnaire developed by the investigator.

KEYWORDS: Depression and binge eating are strongly linked self-esteem, loneliness, and body dissatisfaction

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INTRODUCTION

When the world is dealing with hunger, there is another set of population, who suffer from eating disorder. Eating disorders are actually serious and often fatal illnesses that cause severe disturbances to a person's eating behaviors. Obsessions with food, body weight, and shape may also signal an eating disorder. Common eating disorders include anorexia nervosa, bulimia nervosa, and binge-eating disorder. People with binge-eating disorder lose control over his or her eating. As a result, people with binge-eating disorder often are overweight or obese. Eating unusually large amounts of food in a specific amount of time and feeling distressed, ashamed, or guilty about eating. They frequently diet, possibly without weight loss. Depression and binge eating are strongly linked. Many binge eaters are either depressed or have been before; others may have trouble with impulse control and managing and expressing their feelings. Low self-esteem, loneliness, and body dissatisfaction may also contribute to binge eating

People with binge eating disorder are frequently overweight or obese. This can lead them to feel chronically depressed about the way they look. After succumbing to an episode of binge eating, they may feel disgusted with themselves, worsening their depression. Binge eating episodes lead to obesity which, in turn, causes depression owing to weight stigma, poor self-esteem and reduced mobility. Depression may also lead to obesity as

such people tend to engage in "emotional binge eating" to deal with the pain of rejection, have poor sleep patterns and turn into couch potatoes. Apart from depression and stress, other causes of binge eating are lack of confidence, loneliness, family history (related to genes) and hormonal deficiency. Binge-eating disorder is also defined as uncontrollable, excessive eating, followed by feelings of shame and guilt.

OBJECTIVES

The objective of present research is to study the profile of binge eating disorder people to understand their life style

METHODOLOGY

The present study was conducted in Hyderabad, a sample of 55 obese people were selected. The data about their demographic profile, life style and eating habits was collected through questionnaire developed by the investigator

RESULTS

The data collected using the schedules and standardized scales was scored, analyzed and presented in the following tables.

Table 1: Profile of the Sample

Dimension	Range	Frequency	Percentage	Male		Female	
		N	%	N=20	%	N=30	%
Age	23-28	20	40%	6	30%	14	46.6%
	29-34	23	46%	8	40%	15	50%
	35-40	4	8%	3	24%	1	3.3%
	>40	3	6%	3	24%	-	-
Gender							
	Male	20	40%	-	-	-	-
	Female	30	60%	-	-	-	-
Marital status							
	Married	32	64%	14	70%	18	60%
	Unmarried	18	36%	6	30%	12	40%

The table 1 presents information about the general profile of the sample selected. From the table, it can be pointed out that 40% i.e. 20 of which 12% men and 28% women are in age group of 23-28yrs, 46% i.e. 23 (16% males & 30% females) in 29-34years age group, while 8% in 35-40yrs and very less 6% are above 40 years. The sample consisted of 40% males and 60% females. The sample consists of 64% i.e. 32 were married of which 28% are men and 36% women. The percentage of unmarried is 36% (12% of men and 24% of women)

Table 2: Distribution of Sample According to their Occupational Status

Dimension	Educational Status	Frequency	Percentage	Males		Females	
				N	%	N	%
a.	Degree	18	36%	3	6%	15	30%
b.	Post graduates & Engineers	32	64%	17	34%	15	30%
Working status							
a.	Employed	40	80%	18	36%	22	44%
b.	unemployed	10	20%	2	4%	8	16%
Occupational status							
a.	Software	29	58%	14	28%	15	30%
b.	Teachers	7	14%	-	-	7	14%

Table 2: Contd.,							
c.	Sales executives	4	8%	4	8%	-	-
d.	Students	4	8%	2	4%	2	4%
e.	Home makers	6	12%	-	-	6	12%
Income level							
a.	24 lakhs per year	26	52%	9	18%	11	22%
b.	25-40lakhs per year	14	28%	5	10%	14	28%
c.	Above 40 lakhs per year	10	20%	6	12%	5	10%

The occupational profile of the sample presented in the table above reveals that majority i.e. 64% are post graduates and engineers, while 18 i.e. 36% are only graduates. In this, 15% of women and 34% of men are postgraduate while 15% of women and 6% of men are graduates. Of the total sample, 80% are employed and 20% are not working. In men sample, 36% are employed and 6% are not working while 44% of women selected are employed while 16% are unemployed. The sample consisted of soft ware professional mostly (58%), teachers (14%) while 8% are sales executives, 8% students and 12% are home makers. The men sample in the study 28% are software professionals, 8% sales executives and 4% are students. The selected female samples 30% are in software, 14% are teachers, 4% students and 12% homemakers. The study reveals that majority of the sample 52% (26) have income of 24lakhs per years while 28% earn up to 24-40lakhs and 20% i.e 10 of them have income above 40lakhs. The study reveals that 18% of males and 22% of females are earning up to 24lakhs per year, 10% of male and 28% of female sample income level is between 25-40lakhs per year while 12% of men and 10% of women selected for the study have income of more than 40lakhs per year.

Table 3: Nutritional Status of the Respondents

Attributes	Range	Frequency	Percentage	Male		Female	
				N=20	%	N=30	%
Height (cms)	140-150	5	10%	3	15%	2	6.6%
	151-16	9	18%	5	25%	4	13.3%
	161-170	16	32%	5	25%	11	36.6%
	171-185	19	38%	6	30%	13	43.3%
Weight(kgs)	65-75	5	10%	3	15%	2	6.6%
	76-85	13	26%	5	25%	8	26.6%
	86-95	13	26%	6	30%	7	23.3%
	96 -110	19	38%	6	30%	13	43.3%
BMI							
Over weight	25-29.9	8	16%	3	15%	5	16.6%
Obese I	30-34.99	27	54%	12	60%	15	50%
Obese II	35-39.99	15	30%	5	25%	10	33.3%

Information about nutritional status of the respondents presented in the table above points out height of 38% sample i.e 19 is between 171cms-185cms, 34% 161cms-170cms while the height of 18% is between 151cms-160cms and 10% have height ranging from 140-150cms. The height 6% males and 4% females is between 140-150cms, sample 10% men and 8% women height is found to be between 151-160cms, the height of 14% males and 20% females is between 161-170cms and the height of 24% women and 14% men selected is between 171-180cms. The weight of majority of the selected sample is between 97-110kgs, 24% 86-96kgs and 26% have weight ranging from 76-85kgs, while 16% are 65-75kgs weight. The weight of 12% males and 4% females is between 65-75kgs, sample of 10% men and 16% women were weighing between 76-85kgs, the weight of 14% of males and 10% females selected is around 86-96kgs where as 20% of the selected women and 14% of men weight is between 97-110kgs.

The calculated BMI reveals that 16% have BMI 27-30kg/m², 54% 30-33kg/m² and 30% of the sample BMI is 34-37kg/m². From the study, it can be pointed out those 6% men and 10% women BMI between 27-30 and 24% men and 30% women BMI is between 30-33 while the BMI of 20% females and 10% males is around 34-37. The WHO recommendations given in the table shows that BMI between 25-29.9 is considered as overweight, while BMI of 30 and more is obese. The study shows that all the selected sample weight, height and BMI indicate that they are obese.

Table 4: Life Style of the Respondents

Attributes	Sub Divisions	Frequencies	Percentage	Male		Female	
				N	%	N	%
Life style	Sedentary	50	100%	20	40%	30	60%
	Moderate	-	-	-	-	-	-
Working hours	9am-5pm	8	16%	2	4%	6	12%
	3pm-1am	22	44%	9	18%	13	26%
	9pm-5am	20	40%	9	18%	11	22%
Eating outside	Frequently/daily	29	58%	13	26%	16	32%
	twice a week	13	26%	5	10%	8	16%
	Once a week	5	10%	2	4%	3	6%
	Once in month	3	6%	-	-	3	6%
Food preferred	Vegetarian	4	8%	-	-	4	8%
	Non vegetarian	8	16%	6	12%	2	4%
	Both	38	76%	14	28%	24	48%

The life style of the respondents presented reveal that all the selected sample both males and females selected have sedentary life style and majority (44%) of them have work times around 3pm-1am while 40% work timings are from 9pm-5am. The selected 4% males and 12% females had regular work timings of 9am -5pm. The work timings of 18% men and 26% women are from 3pm to 1am, whereas 18% of selected men 22% women work from 9pm to 5am. It was interesting to note that more than half of selected sample i.e. 58% (i.e. 26% of males and 32% women) eat outside food very frequently (almost daily), 26% (10% men and 16% women) twice a week, 10% (4% men and 6% women) once in a week and 6% women once in month. The most preferred food of 76% sample both vegetarian and non vegetarian, i.e. 28% men and 48% women while 16% (12% men and 4% women) prefer only non vegetarian and 8% of the women like to have vegetarian food.

Table 5: Obesity Related Facts of the Respondents

Attributes	Dimensions	Frequency	Percentage	Male		Female	
		N	%	N	%	N	%
Onset of obesity	Childhood	-	-	-	-	-	-
	Adolescence	8	16%	2	4%	6	12%
	Adulthood	26	52%	14	28%	12	24%
	Recently (last 6 months)	16	32%	4	8%	12	24%
Family history of obesity	Yes	17	34%	5	10%	12	24%
	No	33	66%	15	30%	18	36%
Health issues related to obesity	Thyroid	20	40%	7	14%	13	26%
	Diabetes	18	36%	10	20%	8	16%
	Blood pressure	8	16%	3	6%	5	10%
	None	4	8%	-	-	4	8%

The obesity related information of the respondents reveal interesting facts that 52% (28% men and 24% women selected) of them are obese only after reaching adulthood while 32% i.e. 8% of males and 24% females recently became obese and only 16% of which 4% are males and 12% females are obese from their adolescence. It was surprising to note

from the study that none of them are obese from their childhood days.

It was surprising to note that out of the 66%, males are 30% and 36% are females, who didn't have family history of obesity. Only 17% (10% males and 24% females) had family history of obesity.

The study further notes that health related problems like thyroid are found in 40% of which, 14% are males and 26% females, a sample of 36% (20% men and 16% women) have diabetes, 16% (6% men and 10% women) are suffering from Blood Pressure due to obesity.

Table 6: Binge Eating Habits of the Respondents

Eating Habits	Dimensions	Frequencies	Percentages	Male		Female	
		N	%	N	%	N	%
No. of meals per day	Two	5	10%	2	4%	3	6%
	Three	27	54%	7	14%	20	40%
	Four	18	36%	11	22%	7	14%
Circumstance of overeating	Stress	23	46%	13	26%	10	20%
	Alone	4	8%	-	-	4	8%
	Boredom	3	6%	-	-	3	6%
	Depression	20	40%	7	14%	13	26%
Feeling after over eating	Guilt	12	24%	4	8%	8	16%
	Anxious	8	16%	3	6%	5	10%
	Happy	28	56%	11	22%	17	34%
	Nothing	2	4%	2	4%	-	-
Time of snacking	Evening	3	6%	-	-	3	6%
	Night	21	42%	8	16%	13	26%
	Mid night	26	52%	12	24%	14	28%

The binge eating habits of the respondents presented in the table points out that 54% (14% males and 40% females) of them have three meal pattern, 36% of which 22% are men and 14% women have four meals a day and 10% i.e. 4% males and 6% females have two meals per day. The study finds that the circumstances during which the respondent overeat is 46% (26% men and 14% women) under stress, and the study points out that binge eating habit occurs during the depression in 14% men and 26% women i.e. 40% of the selected sample. And 8% of women binge eat when alone and 6% of women overeat because of boredom. The feelings of respondents after over eating is found to guilt in 24% (8% males and 16% females), A sample of 16% of which 6% are men and 10% women feel anxious and majority of the selected sample 56% (22% males, 34% females) feel happy after overeating, while 4% of men have no feeling after binge eating. The time of snacking (indulging in binge eating) of respondents is mostly midnight (52%) of which 24% males and 28% females and during nights (42%) out of which 16% are males and 26% females and 6% of women snack in evenings while none of the males selected snack in evening.

Table7: Gender Differences in Binge Eating Habits

Attributes	Male		Female		T Value	P Value
	Mean	SD	Mean	SD		
No. of meals per day	2.7895	.78733	2.4000	.62146	1.926	.06 NS
Circumstance of overeating	1.4737	.96427	1.9000	1.18467	1.315	.195 NS
Feeling after over eating	1.7368	1.24017	2.0667	1.17248	-.938	.353 NS
Time of snacking	4.0000	.74536	3.8000	.55086	1.079	.286NS

There are no significant differences in mean scores of male and female binge eating habits

CONCLUSIONS

Binge eating disorder is one of psychological eating disorders, which needs to be addressed urgently. The study reveals that life style is major factor of developing this disorder. The study concludes that unusual work timings, sedentary life styles, more income levels and comforts are mostly deciding factors of binge eating disorder. Indulging in overeating often results in obesity, due to which, other health related problems like thyroid, diabetes, blood pressure. Unusual body weight makes the individual to feel guilt, depressed and lowers self esteem. Though weight reduction centers help to reduce the weight, there is always a chance for getting back to binge eating. This disorder is psychological, so it needs to be intervened with Cognitive behavior therapy with behavior modification, which would help to conquer this psychological eating disorder and stop its reoccurrence.

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