Personological factors are associated with interpersonal problems accross eating disorders



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BACKGROUND

Interpersonal problems represent difficulties related to the person's social interactions, in terms of family functioning or relationships with colleagues but more in general also in relation to the occupational context.

Many studies showed that interpersonal problems play a key role in the field of eating disorders (EDs), as they would represent a risk and maintenance factor of these disorders.

The first objective of this study was to evaluate the differences in interpersonal problems between groups of patients with different diagnoses of EDs.

The second objective was to identify how personological variables are associated with interpersonal problems accordint to the ED diagnosis.

METHODS

The sample is made up of 111 women with EDs (mean age= 25.4±12.7 years) divided in 3 different groups: 48 with Anorexia Nervosa (AN), 27 with Bulimia Nervosa (BN) e 36 with Binge-eating Disorder (BED). Patients answered the following tests: EDE-Q, YSQ-S3, TCI-R, PID-5, IIP-32.

The data collected were processed with the Statistical Package for Social Sciences version 22 (IBM-SPSS Inc., Chicago, II, USA).

The scores of the three groups were compared through ANOVA. Linear Regression analysis was run to identify possible personological predictors of interpersonal problems.

The significance level was set at p < .05.

RESULTS

Patients with BN exhibit significantly higher scores on almost all EDE-Q scales than the other diagnoses (Table 1).

Significant differences emerged at the TCI-R in the Cooperativeness dimension (BED> AN, BN; Tab. 2).

Regarding YSQ-S3, differences emerged in the "Defectiveness/Shame" (p = .012; AN, BN> BED) and "Pessimism" schemas (p = .012; BN> BED). No differences emerged in the PID-5.

Finally, at IIP-32 patients with AN reported higher scores in the Cold/Distant domain than patients with BED, who showed higher scores in the Intrusive/Needy domain than patients with AN and BN (Fig. 1).

Linear regression reported the association between interpersonal problems and the dimensions Impaired autonomy/Performance (YSQ-S3) in the AN group, Disconnection/Rejection (YSQ-S3) in the BN group and Negative Affectivity of PID-5 in the BED group (Tab. 3).

Tab. 1: EDE-Q groups comparison

	AN		BN		BED				
	Media	DS	Media	DS	Media	DS	F	р	Post hoc
Restraint	3.2	2.1	3.7	1.7	1.8	1.8	7.752	.001	BN>AN,BED
Eating Concern	2.8	1.7	4.1	1.4	3.3	1.4	5.236	.007	BN>AN
Shape Concern	4.0	2.0	5.0	1.3	4.6	1.4	3.061	.051	
Weight Concern	3.5	1.9	4.5	1.6	4.0	1.4	2.314	.104	
Total score	3.4	1.7	4.3	1.1	3.4	1.1	3.480	.035	BN>AN

Tab. 2: TCI-R groups comparison

	AN		BN		BED				
	Media	DS	Media	DS	Media	DS	F	Sign.	Post hoc
Novelty Seeking	99.6	14.9	102.2	15.0	99.3	14.2	.243	.785	
Harm Avoidance	87.9	17.9	87.9	12.5	89.2	11.8	.069	.933	
Reward Dependence	88.4	12.1	87.4	11.4	92.5	10.6	1.391	.255	
Persistence	106.7	22.1	103.7	20.4	106.5	18.5	.147	.864	
Self-directedness	122.4	20.2	126.4	21.2	128.0	19.1	.641	.530	
Cooperativeness	103.4	12.8	101.8	12.0	112.7	16.9	3.968	.015	BED>AN,BN
Self-trascendence	66.0	13.9	61.0	17.3	68.1	13.5	1.296	.280	

Fig. 1: IIP-32 groups comparison



Tab. 3: Linear regression analysis

	Dependent variable	Adjusted R ²	F	р	Independent variable	В	t	р
AN	IIP-32 Total	.722	60.621	<.001	Mancanza di autonomia (YSQ-S3)	.857	7.786	<.001
BN	IIP-32 Total	.584	16.462	.002	Distacco/Rifiuto (YSQ-S3)	.789	4.057	.002
BED	IIP-32 Total	.482	15.899	.001	Affettività Negativa (PID-5)	.717	3.987	.001

CONCLUSIONS

Patients with ED showed specific interpersonal problems and, in particular, specific personological traits are closely linked to the construct of interpersonal problems.

Psychotherapeutic interventions focused on identifying the different personological factors can be effective in helping patients with ED regarding interpersonal problems.

References

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