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Bulimia in men: it exists and is successfully treated



Recent researches on eating disorders state that the incidence of these disorders in men is fewer than in women, but serious doubts remain about the connection between the disorder and the gender of patients. Cases of anorexia nervosa in men have been studied, but there is less research on bulimic disorders, which affect men as well (obsession with thinness or dissatisfaction with one's body). This research achieved better results in treatment for both genders using cognitive behaviour therapy.

Epidemiological recent researches show that eating disorders are less frequent in males than in females, and that while most characteristics of men and women patients are similar, some studies evidenced that men could report more comorbid (associated) disorders, more premorbid overweight or obesity, and a later age of onset. Other scientific studies, however, have failed to find gender differences in personality traits or familial-genetic or individual risk factors.

Regarding the prognosis of eating disorders, only few studies have analyzed differences between males and females. Results obtained have also been different: some researches

have shown a similar course and outcomes but others have referred to a better or even a poorer outcome in male patients when compared to females with the same eating disorder diagnosis.

Therapy for men diagnosed with eating disorders has received relatively little attention in the specialized literature. Most studies have been conducted in males diagnosed of Anorexia Nervosa undergoing inpatient-residential treatment, and have suggested that males have a better outcome than females. But very few studies have assessed the treatment of men with bulimic symptoms in addition to anorexia, and evidences about outcomes are still unknown.

Assessing different eating disorders in males is essential for clinical reasons: the increase in the prevalence rates makes necessary the availability of practical information on men with these disorders to help guide diagnostic and treatment decisions.

Our research, carried out in collaboration between specialized clinics of the Hospital de Bellvitge and methodologist of the Universitat Autònoma de Barcelona, examined whether outpatient treatment for male patients with bulimic symptomatology is as effective as it is for females. One sample of male patients was compared to that of females eating disorders individuals after a group Cognitive-Behaviour-Therapy. Our results showed a reduction of eating disorders symptoms after therapy for both genders, especially a decrease in the general bulimic symptomatology (valued with the standardized usual instruments, EDI and EAT questionnaires). In short, best outcomes (lower mean scores) were found for mean in some specific outcomes: drive for thinness, body dissatisfaction and interoceptive awareness. Treatment adherence was also similar across gender, and there was no significant difference in the risk of dropout during the treatment.

Our study constitutes a pilot research and a novel contribution to the literature as it compares across gender the outcome of a group cognitive-behaviour program of patients with bulimic disorder. The results obtained evidenced that this treatment appears to be effective and confer benefit for male and female eating disordered patients.

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References

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