



Contribution ID: 15

Type: **Talk**

Morbid obesity as a result of non-substance-based dependency

Thursday, 12 September 2024 17:00 (20 minutes)

Keywords: obesity, bariatric surgery, MMPI-2, addictive behaviour, recovery

Bariatric surgery emerges as a superior approach for managing morbid obesity and associated comorbidities compared to conservative therapy. A cohort of 16 morbidly obese individuals, identified by a BMI exceeding 40 or 35 in the presence of diabetes or prediabetes, underwent Pylorus-preserving single-anastomosis duodeno-ileal bypass with sleeve gastrectomy (SADI-SG). This surgical intervention targets weight loss and metabolic improvement. Also, non-substance-based behavioral addictions remain underexplored. Morbid obesity is postulated to stem from impulse control disorders manifested through chronic overeating. The behavioural characteristics of overeating align with criteria delineating controlled loss-of-control phenomena akin to addictive behaviours. Assessment of psychological phenomena utilized the MMPI-2 after a one-year follow-up period. Results revealed addictive behavior patterns despite the absence of substance abuse, as confirmed by laboratory panels conducted at intervals of 3-6-9-12 months post-surgery. MMPI-2 data delved into underlying drives behind addiction-driven behaviours, employing scales typically associated with substance-based addictions: Content scales component subscales and Harris Lingoes subscales. Internal validity was examined through the correlation of MAC-R, APS, and AAS scales with other subscales. A notable proportion of subjects exhibited elevated scores on addiction-related

scales despite maintaining sobriety for the 12-month postoperative period.

The study underscores the utility of MAC-R and APS scales as highly specific indicators of non-substance-based behavioural addiction, particularly overeating. The call for larger sample sizes and a multicenter approach underscores the potential significance of these findings in understanding and addressing addictive behaviours in the context of morbid obesity and related interventions.

Are you currently an Early Career Researcher?

Yes, I am still a student or have not yet received my Ph.D.

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Session Classification: Talk Session 9

Track Classification: Clinical Psychology and Psychotherapy