



The comparison of obese and non-obese persons in terms of food addiction

Hacer Hicran MUTLU¹, Hasan Hüseyin MUTLU²

¹ Istanbul Medeniyet University Faculty of Medicine, Department of Family Medicine, Istanbul, Turkey

² Istanbul Medeniyet University Faculty of Medicine, Department of Medical Education, Istanbul, Turkey

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Although the term ‘addiction’ was previously used only to describe excessive alcohol and substance abuse, it has recently been realized that some behaviors have a neurobiological basis similar to alcohol and substance addiction. Food addiction is one of these behaviors. In many studies, it has been suggested that especially obese and overeating people have food addiction.^{1,2} The aim of our study was to compare the food addiction prevalence among obese and non-obese persons who applied to obesity and family medicine outpatient clinics.

The patients who applied to the Family Medicine outpatient clinic and obesity outpatient clinic between 15.01.2019-30.06.2019 were included in the study. The age, gender, weight, height, and smoking status of the patients were questioned. Yale Food Addiction Scale which was developed by Gearhardt et al.¹ and adapted to the Turkish language by Bayraktar et al.² was conducted on the individuals who volunteer to participate in the study.

195 patients without obesity and 403 patients

with obesity were included in the study. The mean age and body mass index, the distribution of gender, and smoking status of the individuals were shown in Table 1. The food addiction prevalence in the obese group was 33.7% and 14% in the non-obese group. The prevalence of food addiction was significantly higher in obese individuals ($p<0.001$, OR: 3.13, 95% CI: 2.09-4.68).

The prevalence of food addiction varies between 1.60% and 24% in non-obese people and 7.7% and 56.8% in obese people in different populations.^{1,3-7} Food addiction prevalence among obese and non-obese people detected in our study was in harmony with the literature. In a study comparing food addiction prevalence in obese and non-obese individuals, food addiction was more common among obese persons.⁸ Contrarily, food addicted individuals did not differ in body mass index from non-addicted participants in another sample.⁹ Food addiction is a discussed concept recently. Food addiction should be considered as a behavioral addiction and should be treated as an addiction. It is detected more common in obese



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Address for Correspondence:

Hacer Hicran MUTLU

Istanbul Medeniyet University Faculty of Medicine, Department of Family Medicine, Istanbul, Turkey

E-mail: hicranbeyca@hotmail.com



Table 1. Comparison of sociodemographic features of obese and non-obese individuals

Variables	Non-obese Group n=403	Obese Group n=195
Age (years)	22.44±7.5	45.01±13.09
Gender		
Female (n, %)	264 (61.4)	166 (38.6)
Male (n, %)	179 (86.1)	29 (13.9)
BMI (kg/m ²)	22.49±2.8	35.56±4.6
Smoking		
Yes (n, %)	40 (9)	36 (47.4)
No (n, %)	403 (91)	159 (28.2)

mean±SD.

individuals than in those who are non-obese. Therefore, food addiction should be screened and treated in obese individuals.

Conflict of Interests

Authors declare that there are none.

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