



# Characterizing the Course of Binge Eating (BE) Behavior 10 Years Following Metabolic and Bariatric Surgery (MBS)

*Deborah Lynn Reas (Oslo University Hospital), Selma Lie (Oslo University Hospital), Tom Mala (Oslo University Hospital, University of Oslo), Ingela Lundin Kvaalem (University of Oslo)*

## Abstract

**OBJECTIVE:** Little is known about the longer-term maintenance, remission, or development of de novo binge eating (BE) within the context of metabolic and bariatric surgery (MBS). This study investigated the course of BE at 10 years following MBS and examined preoperative and concurrent factors associated with the remittance, continuance, or development of BE. **METHOD:** 177 participants (76.8% F) with a mean age of 44.7 (9.6) and mean BMI of 42.8 (5.4) at T1 underwent metabolic and bariatric surgery (94.4% Roux-n-Y). **RESULTS:** Results showed that 85 (48%) had never engaged in BE prior to \_or\_ after surgery, 33 (18.6%) continued BE, 37 (20.9%) evidenced remission from BE after surgery, and 22 (12.4%) reported de novo BE following surgery. Those who continued BE (endorsed at pre- and post-surgery) were younger (39.6 vs 46.2 years,  $p < .001$ ) than those who never endorsed BE, and they reported lower self-esteem than those who remitted or never engaged in BE ( $p < .001$ ). They also reported more food addiction symptoms ( $p < .001$ ) than all other groups and were more likely to regain > 25% of their preoperative weight. **CONCLUSIONS:** These data provide greater nuance to the clinical picture characterizing the course of BE within the context of metabolic and bariatric surgery. Approximately 30% engaged in BE a decade following MBS, and 12% were de novo cases. Findings suggest the importance of assessing BE both \_prior to and after\_ surgery to assess for the continuation, or onset, of BE behavior.

**Submission Format:** Scientific Paper

**Is It a Student Paper?** No

**Topics:** Other

**For workshops only**

No Answer Given