

EFFECTIVENESS OF NUTRITIONAL EDUCATION IN PATIENTS WITH ANOREXIA AND BULIMIA NERVOSA

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Eating disorders have recently become a very popular disease. They can have many causes, yet the predisposing factor is very often an inappropriate slimming diet resulting from a lack of knowledge concerning nutrition. There are very few studies on the level of knowledge among people suffering from eating disorders. The existing data on nutritional education among these patients is highly insufficient. The aim of the present work was to carry out a programme to disseminate knowledge on nutrition among patients suffering from eating disorders and to assess the effectiveness of the programme. The knowledge as regards nutrition among patients with anorexia increased by 23%, an increase of 18% was observed in the case of patients with bulimia and the control group showed a 21% increase in knowledge concerning this matter.

INTRODUCTION

Within the last decade eating disorders have become a more and more frequent phenomenon among adolescent and mature women [Kolarzyk *et al.*, 2000; Janas-Kozik *et al.*, 2004; Eapen *et al.*, 2006]. An inappropriately managed slimming treatment is one of the predominant factors predisposing women to anorexia or bulimia nervosa [Pytasz *et al.*, 2003]. Even though patients suffering from eating disorders have some awareness of nutrition issues, their knowledge is rather selective and very schematic [Abraham & Llewellyn-Jones, 2001; Czarnewicz-Kamińska & Tylka, 2004]. According to the author's own studies, the level of knowledge among patients suffering from eating disorders is insufficient and therefore education on nutrition is essential [Czarnewicz-Kamińska & Gronowska-Senger, 2007]. Nutritional education encompasses a group of communication activities that aim at provoking a change in eating behaviour of a patient and at achieving health improvement [Andrien, 1994]. Choosing the appropriate method of reaching the patients has a great impact on the effectiveness of the whole process [Rozkowski, 1994]. Appropriate actions support fostering a more positive attitude towards the rationalisation of eating habits by changing patients' views on the results of such rationalisation [Jeżewska-Zychowicz, 1996]. There are very few studies on the level of nutrition knowledge among patients suffering from eating disorders. Psychiatric treatment rarely includes dietary therapy and education. Discussing nutrition issues with the patient is considered inappropriate and disrupting the therapeutic process. It is also believed that patients with eating disorders have a negative attitude towards changes in their eating habits, which only confirms the necessity of nutritional education. That is why the research presented in this work was undertaken.

The aim of this work was to carry out trainings on nutrition among patients suffering from eating disorders and to assess the effectiveness of the programme.

SUBJECTS AND METHODS

The study group consisted of 40 patients diagnosed as suffering from anorexia nervosa and 40 patients diagnosed as suffering from bulimia nervosa. The subjects were female patients of the Neurosis Clinic in the Warsaw Institute of Psychiatry and Neurology (Klinika Nerwic IPiN w Warszawie). The control group was selected according to the matched-pair method (80 people). The level of knowledge on nutrition of both groups had been estimated before the education process was introduced. It was assessed by means of a questionnaire concerning nutritional knowledge. More detailed information on the questionnaire can be found in reference literature given below [Czarnewicz-Kamińska & Gronowska-Senger, 2007]. Another part of the research was nutritional education carried out simultaneously according to two methods: a talk and an educational brochure prepared by the researchers. The effectiveness of the process was assessed 3 weeks after the research had been conducted by means of a questionnaire estimating the education's effectiveness (a set of questions from the questionnaire, which had been used for the assessment of patients' knowledge before the research, with questions put in a different order) and a statistical computing programme "Statistica".

RESULTS AND DISCUSSION

The statistical analysis was carried out on the basis of the Chi² test of independence for a multi-field table, assuming

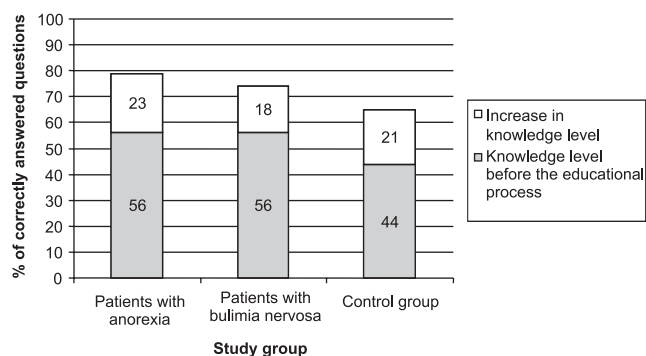


FIGURE 1. The level of knowledge on nutrition before and after the educational process – mean value from all groups.

the probability of $p < 0.05$ as the significance limit. After the education process had been carried out an increase in knowledge on nutrition issues has been noticed in all study groups (Figure 1). The knowledge level of patients with anorexia grew by 23% (to 79%), in the case of patients with bulimia by 18% (to 74%) and in the control group by 21% (to 65%). The increase was statistically significant (by $p < 0.05$, $\chi^2 = 8.21$). The highest effectiveness was observed in the case of patients with anorexia. In this group the number of correctly answered questions increased to 79%.

The results of the discussed research are very promising, since they confirm the need of conducting such educational programmes [Komender *et al.*, 1997; Mascarenhas *et al.*, 2001; Pytasz *et al.*, 2003], although studies undertaken by other authors show that patients suffering from eating disorders have a negative attitude to changes in their eating habits [Pilecki *et al.*, 2003]. The research conducted by Waisberg [2002] and Andrewes [1996] demonstrated that the introduced educational programmes have significantly increased the level of nutrition knowledge, which resulted in changes in the attitudes and behaviour of the patients. A nutrition specialist should be included in a multidisciplinary treatment team [Whisenant & Smith, 1995]. The task of a dietician working with a patient is to educate, to deliver information on basic principles of nutrition and methods of keeping an appropriate body weight [ADA Reports, 2001]. All this should serve to correct a distorted food image and a warped idea of the nature of food of the patients as well as to deliver professional advice on the appropriate nutrition model in order to finally restore rational behaviour regarding nutrition among the patients [Abraham & Llewellyn-Jones, 2001].

CONCLUSIONS

The results of our study have proved that nutritional education applied in the case of patients suffering from eating disorders increases their nutritional knowledge. The knowledge among patients with anorexia has increased by 23%, among patients suffering from bulimia – by 18%, and in the control group by 21%. The value of the test of independence was $\chi^2 = 8.21$, by $p < 0.05$. Educational activities implemented into the therapeutic process can result in shorter therapies and an increase in the therapy's effectiveness, since knowl-

edge concerning nutrition constitutes the first step to changing nutrition attitudes and eating habits. Patients' education on nutrition is an important part of the treatment aimed at correcting nutritional mistakes which they make frequently in their daily lives.

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EFEKTYWNOŚĆ EDUKACJI ŻYWIENIOWEJ OSÓB Z ANOREKSJĄ I BULIMIĄ PSYCHICZNĄ

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Niewiele jest badań dotyczących poziomu wiedzy i edukacji żywieniowej chorych cierpiących na anoreksję i bulimię. W leczeniu psychiatrycznym zwykle pomija się aspekt dietoterapii i edukacji. Dyskusja na tematy żywieniowe uznawana jest za nieodpowiednią i zaburzającą proces terapeutyczny. Uważa się, że osoby z zaburzeniami odżywiania są negatywnie nastawione do zmiany nawyków żywieniowych, co potwierdza potrzebę przeprowadzenia edukacji żywieniowej. Stąd podjęto niniejsze badania, których celem było przeprowadzenie edukacji żywieniowej u osób z zaburzeniami odżywiania oraz ocena efektywności tego procesu. Grupę badaną stanowiło 40 osób z rozpoznaniem anorexia nervosa i 40 osób – bulimia nervosa. Osoby z grupy kontrolnej dobrano metodą parowania (80 osób). Narzędziem wykorzystywanym w edukacji żywieniowej była broszura edukacyjna oraz pogadanka. Efektywność procesu sprawdzano za pomocą kwestionariusza oceniającego. W przypadku wszystkich grup badanych po przeprowadzonej edukacji odnotowano przyrost poziomu wiedzy żywieniowej w stosunku do poziomu wyjściowego. Największą efektywność uzyskano po edukacji osób z anoreksją. Zastosowana edukacja zdecydowanie podniosła poziom wiedzy żywieniowej, co może przełożyć się na zmianę postaw i zachowań pacjentek, a tym samym podnieść skuteczność leczenia i przyspieszyć proces zdrowienia.