Short Communication

iMedPub Journals
www.imedpub.com

Journal of Obesity & Eating Disorders
ISSN 2471-8203

2024
Vol.10 No.4:203

The Role of Food Addiction in Depression-Related Weight Gain

Kerlin Mandison*

Department of Medical Science, University of Wollongong, Wollongong, Australia

Corresponding Author: Kerlin Mandison, Department of Medical Science, University of Wollongong, Wollongong, Australia, Email: kmadison@gmail.com

Received date: August 21, 2024, Manuscript No. IPJOED-24-19883; **Editor assigned date**: August 23, 2024, PreQC No. IPJOED-24-19883 (PQ); **Reviewed date**: September 6, 2024, QC No. IPJOED-24-19883; **Revised date:** September 13, 2024, Manuscript No. IPJOED-24-19883 (R); **Published date**: September 20, 2024, DOI: 10.36648/2471-8203.10.4.203

Citation: Mandison K (2024) The Role of Food Addiction in Depression-Related Weight Gain. J Obes Eat Disord Vol.10 No.4: 203.

Description

Depression is linked to an increased risk of cardio metabolic diseases, often mediated by weight gain and associated overeating behaviours. This study investigates food addiction symptoms as a mediator between depressive symptom severity and Body Mass Index (BMI), examining how this relationship varies by appetite profile and sex. In a sample of 628 adults, depressive symptoms were assessed using the centre for epidemiological studies depression scale and food addiction symptoms were measured with the yale food addiction scale. Results indicated that food addiction fully mediated the relationship between depressive symptoms and BMI. Furthermore, an increased appetite significantly moderated this relationship, with no significant differences observed between sexes. These indings highlight the importance of addressing food addiction symptoms in interventions aimed at mitigating weight gain in individuals experiencing depression [1].

Depression is a significant risk factor for various cardio-metabolic disorders, including obesity and heart disease, contributing to increased mortality from these conditions. The relationship between depression and cardiometabolic health is complex, with emerging evidence linking weight gain during depressive episodes to heightened morbidity [2]. As the prevalence of weight gain related to depression rises, especially in obesogenic environments, understanding the mediators of this relationship is vital for developing effective health interventions [3].

Role of food addiction in depression

Research indicates that weight gain associated with depression is influenced by behavioural and physiological factors, particularly overeating. The consumption of highly palatable foods, o ten rich in sugar and fat, tends to increase during periods of emotional distress. This behaviour may reflect addiction-like responses, where individuals experience cravings and withdrawal symptoms akin to those seen in substance use disorders. While food addiction is not officially recognized as a formal disorder in major diagnostic manuals, its behavioural characteristics warrant attention, particularly regarding its connection to depression and weight gain [4].

The study utilized a cross-sectional design with a sample of 628 adults. Depressive symptoms were evaluated using the CES-D, while food addiction symptoms were assessed via the Yale Food Addiction Scale (YFAS) [5]. Participant demographics, including BMI, appetite profile and sex, were collected through self-report questionnaires. Mediation and moderated mediation analyses were performed to search the relationships among depressive symptom severity, food addiction symptoms and BMI, while also examining the moderating effects of appetite profile and sex [6].

The prevalence of food addiction symptoms in this sample was 21.7%. After controlling for age and exercise levels, food addiction symptoms fully mediated the relationship between depressive symptom severity and BMI [7]. Increased appetite significantly moderated this relationship, with stronger effects observed in individuals reporting higher appetite levels. Although sex did not significantly moderate the mediation effect, males and females exhibited similar food addiction symptom scores [8].

These findings underscore the critical role of food addiction in the exchange between depression and weight gain. The significant mediation effect suggests that food addiction may be a key behavioral risk factor influencing increased adiposity in those with severe depressive symptoms. The pronounced effects in individuals with increased appetite further highlight the need for targeted interventions that address both depressive symptoms and food addiction behaviors, particularly in those displaying heightened appetite [9].

Future research should search longitudinal designs to establish causal relationships and consider the potential impact of interventions that focus on reducing food addiction symptoms in depressed individuals. Additionally, understanding the underlying neurobiological mechanisms linking food addiction and depression could provide further insights into effective treatment strategies [10].

Conclusion

Food addiction symptoms play a significant mediating role in the relationship between depressive symptom severity and BMI. Monitoring and addressing these symptoms may offer valuable pathways for reducing weight gain and improving health outcomes in individuals experiencing depression, particularly for those with increased appetite.

References

1. Mills J, Thomas S, Larkin T, Pai N, Deng C. (2018) Problematic eating behaviours, changes in appetite and weight gain in major depressive disorder: The role of leptin. J Affect Disord 240: 137-145.
2. Ohlsson B, Manjer J. (2020) Sociodemographic and lifestyle factors in relation to overweight defined by BMI and normal-weight obesity. J Obes. 7:2020:2070297.
3. Preacher K, Hayes A. (2004) SPSS and SAS procedures for estimating indirect effects in simple mediation models. Behav Res Methods Instrum & Comput 36: 717-731.
4. Qiao Y, Liu S, Li G, Lu Y, Wu Y, et al. (2021) Role of depressive symptoms in cardiometabolic diseases and subsequent transitions to all-cause mortality: An application of multistate models in a prospective cohort study. Stroke Vasc Neurol 6: 511-518.
5. Fortuna J. (2012) The obesity epidemic and food addiction: Clinical similarities to drug dependence. J Psychoactive Drugs 44: 56-63.
6. Gearhardt A, White M, Masheb R, Morgan P, Crosby R, et al.(2012) An examination of the food addiction construct in obese patients with binge eating disorder. Int J Eat Disord 45: 657-663.
7. Carter A, Hendrikse J, Lee N, Yucel M, Hall W, et al. (2016) The neurobiology of food addiction and its implications for obesity treatment and policy. Annu Rev Nutr 36:105-128.
8. Dallman M, Pecoraro N, Akana S, La Fleur S, Gomez F, et al. (2003) Chronic stress and obesity: A new view of comfort food. Proc Natl Acad Sci USA 100: 11696-11701.
9. Finch L, Tomiyama A. (2015) Comfort eating, psychological stress and depressive symptoms in young adult women. Appetite 95: 239-244.
10. Burrows T, Hides L, Brown R, Dayas C, Kay-Lambkin F. (2017) Differences in dietary preferences, personality and mental health in Australian adults with and without food addiction. Nutrients, 9: 285.