

AN EXPLORATIVE STUDY OF BULIMIA AND OTHER EXCESSIVE BEHAVIOURS

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ABSTRACT

Based on prospective data of clinical populations (women) this study aims at elucidating the bulimic phenomenon and parallels and contrasts between bulimia, severe overweight, alcoholism and drug-addiction as to course of dependence, conditions and consequences.

The empirical data of 45 consecutively evaluated bulimic patients and of sex and age matched overweights were collected by means of semi-structured interviews. Certain data were validated against official records. The comparable groups of alcoholics and drug-addicts were the object of a secondary analysis. The data of the comparative samples were analysed in relation to the data of a normal group.

The bulimics originated from socially well adjusted homes, mainly the upper social classes, having a high level of education they have declined to a social and mental current status resembling that of the alcoholics and drug-addicts. The overweights resemble the normals to a great extent in background, education and current status.

Common to all excessive behaviours involved is poor security in background family with a predominance of mental instability with the parents of bulimic probands. The disparities between bulimia and the other types of excessive behaviours are greater than the commonalities between the types.

Excessive drinking, drug-taking and eating resulting in obesity are all, contrary to bulimia, collective behaviours with epidemiological social contagion as an important causal factor. A too strong acceptance of societal norms constitute a certain causal factor in the case of bulimia.

The application of total consumption theories reveal that body weight as a consequence of food consumption, in the same manner as alcohol consumption is distributed according to a frequency distribution curve of lognormal type. As to drug consumption the prerequisites of lognormality most likely exist when viewing criminality as a proxy measure of drug consumption. Bulimia is unlikely to be identified in the aggregates by means of frequency distribution curves of lognormal type, as normals do not exist and the results show that bulimia is an individual behaviour.

It is suggested that upward trends in the prevalence of obesity could be prevented through differential price control aiming at a decrease in the total energy consumption of fat and sugar. This study has shown that extreme liberty of choice as in the case of food leads to control of the individual via stigmatization as in the case of the obese, and formation of ideals with the bulimics as victims.

The bulimics abuse the counter-strategy of objective overweight indicating that dieting in their case most probably is a strategy against perceived overweight as the majority are of normal- or underweight. The bulimics fear of fatness could be understood in the light of stigmatization imputed to obese individuals.

Some tendencies indicate that the size of the weight loss per se or a rapid or protracted weight loss are not determining as to severity of bulimia but the level of the lowest weight attained.

KEY WORDS: alcoholism, bulimia, course of dependence, dieting, drug-addiction, oversocialization, perceived overweight, severe overweight, social contagion, stigma, total consumption.

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