

Abstract geometric lines in the top left corner, consisting of several thin, light brown lines that intersect to form various polygons and triangles.

DEPRESSION & EATING DISORDERS

Greta Ru-Mei Zu



OBJECTIVES

Determine the impacts of depression on eating disorders.

Determine whether depression treatments has any impact on the eating disorders.

INTRODUCTION

DEPRESSION

Definition, causes, symptoms, treatments

EATING DISORDERS

Definition (anorexia nervosa, bulimia nervosa, binge-eating), causes, symptoms, treatments

IMPACTS

Similarities, impacts on one another, augmented risks

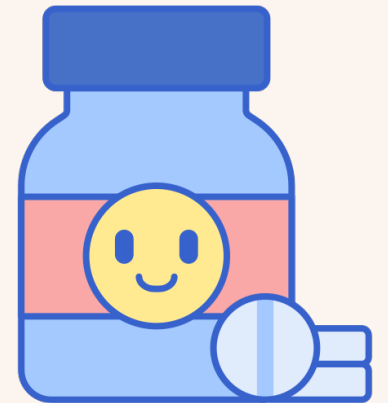
TREATMENTS

Antidepressants and eating disorders

DEPRESSION



- Major depressive disorder (MDD): common but serious medical illness that negatively affects the way one feels, thinks and acts.
- Risk factors
- Symptoms
- Treatments



EATING DISORDERS



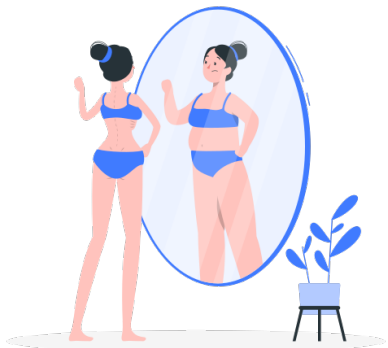
- Eating disorders (EDs) : serious, often fatal, illnesses associated with severe disturbances in one's eating behaviours.
- Risk factors
- Treatments



COMMON EATING DISORDERS (SYMPTOMS)

ANOREXIA NERVOSA

Extremely restricted eating, intense fear of weight gain, distorted body image.



BULIMIA NERVOSA

Binge-eating followed by purging, excessive use of laxatives, excessive exercise.



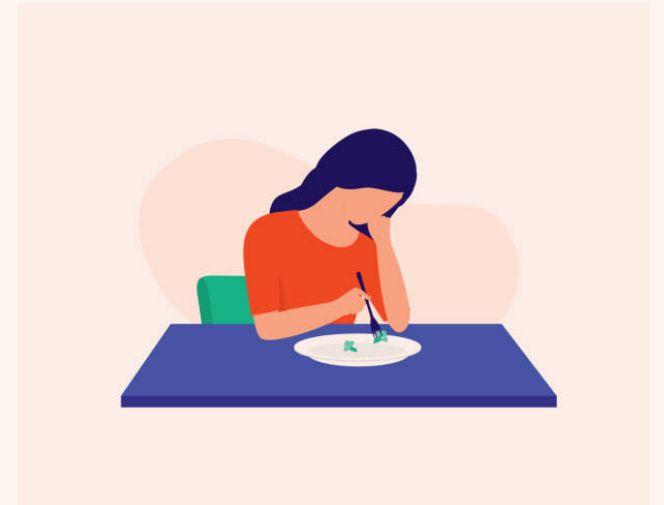
BINGE- EATING

Eating large amounts of food when full, feeling guilty, frequent dieting no weight loss



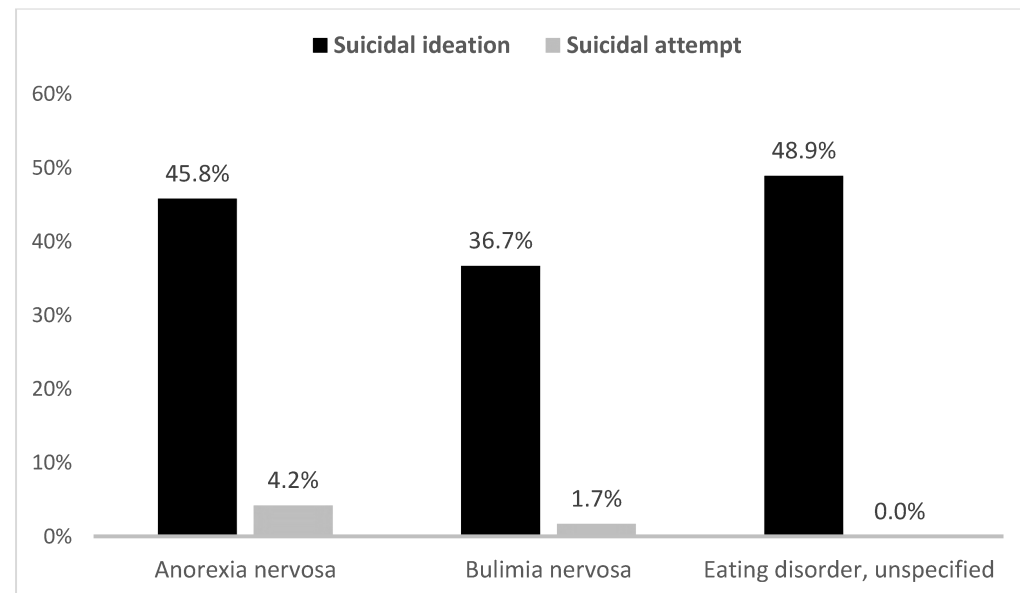
LINK/IMPACTS

- Link between depression and eating disorders
- MDD & ED reciprocally increase the risk of each other
- Shared risk factors, intense & frequent negative emotions



LINK/IMPACTS

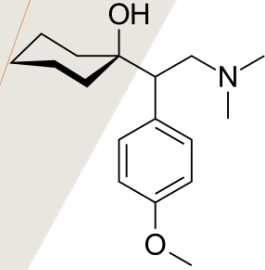
- Escape theory
- Depression and bulimia nervosa contribute reciprocally to each other
- Depressive symptoms predict increases in bulimic symptoms and vice-versa



TREATMENT EFFECTS

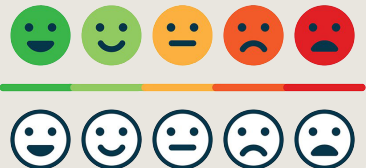
ANTIDEPRESSANTS

Relieve symptoms depression. Prevent suicidal thoughts, prevent symptoms from returning. Emotional stability.



ANOREXIA NERVOSA

No significant effect on weight gain.



BULIMIA NERVOSA

Good response to all classes of antidepressant drugs.

Drugs rarely lead to remission and effects not sustainable.

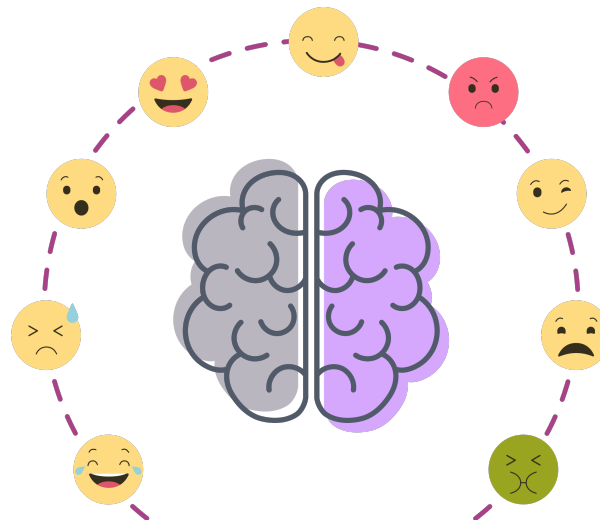
CONCLUSION

IMPACTS

- Depression impacts/elevates risk of having EDs and vice-versa
- Important to screen for ED in patients with MDD

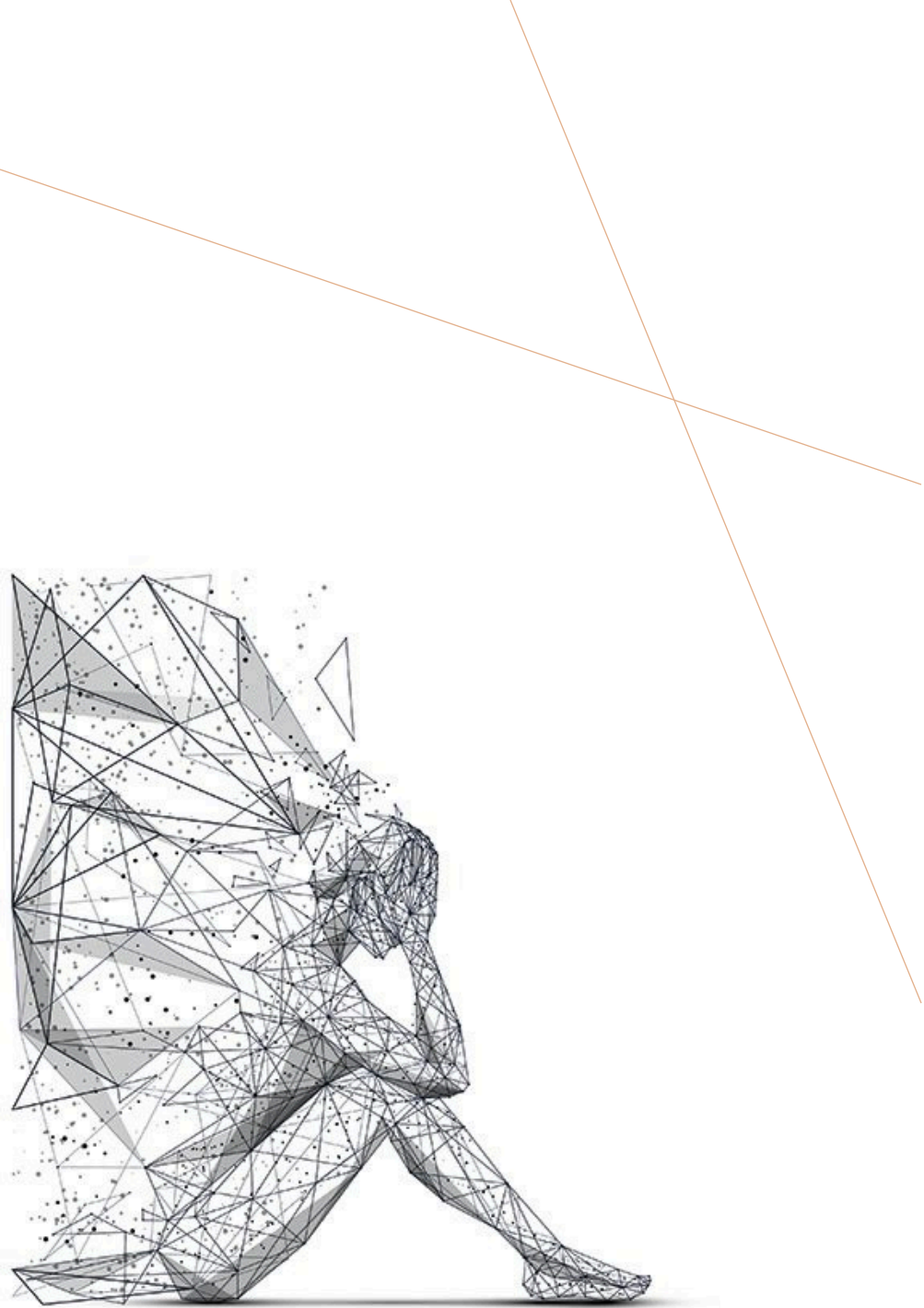
TREATMENTS

- Treatment impacts depend on type of ED
- Further research needed



FUTURE DIRECTIONS

- Other MDD treatments (ETC...)
- ED treatments on MDD
- Neurological impacts



REFERENCES

<https://www.psychiatry.org/patients-families/depression/what-is-depression>

<https://www.nimh.nih.gov/health/topics/depression>

<https://www.nimh.nih.gov/health/topics/eating-disorders>

<https://www.ncbi.nlm.nih.gov/books/NBK361016/>

Casper, Regina C. "Depression and Eating Disorders." *Depression & Anxiety (1091-4269)*, vol 8, July 1998, pp.96-104. *EBSCOhost*, <https://ezproxy.marianopolis.edu/login?url=https://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,url&db=aph&AN=11772784&site=ehost-live&scope=site>.

Presnell, Katherine, et al. "Depression and Eathing Pathology: Prospective Reciprocal Relations in Adolescents." *Clinical Psychology & Psychotherapy*, vol. 16, no. 4, July 2009, pp.357-65. *EBSCOhost*, <https://ezproxy.marianopolis.edu/login?url=https://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,url&db=aph&AN=43494841&site=ehost-live&scope=site>.

Garcia, Susana C., et al. "Increased Rates of Eating Disorders and Their Symptoms in Women with Major Depressive Disorders." *International Journal of Eating Disorders*, vol 53, no. 11, Nov. 2020, pp. 1844-54. *EBSCOhost*, <https://ezproxy.marianopolis.edu/login?url=https://search.ebscohost.com/login.aspx?direct=true&AuthType=cookie,ip,url&db=ssf&AN=146976621&site=ehost-live&scope=site>.