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STRESS RELATED EATING AND DRINKING DISORDERS

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Abstract-

<u>Background:</u> Stress is an important factor in the development of addiction and may contribute to an increased risk for obesity, sleeping disorders, drinking problems. Aims and Objectives: To study the relation between stress and eating disorder, sleep pattern changes and drinking behaviour.

<u>Methods</u>: A population based study of 100 individuals of different professions & age groups(16-45yrs) in Chennai was conducted.

<u>Results</u>: Stress driven individuals consumed more alcohol than other people, ate more of junk food. The best predictors of stress related eating & drinking disorder among men were , a long history of unemployment, academic stress among college goers & school goers, and amongst women lack of emotional support.

<u>Conclusions</u>: Psychological programs should be conducted and cover the way in which people deal with emotions ,stress. Mental health amongst others aspect of health should be a serious topic of concern and problems should be brought out in the open and seek help. Keywords: stress, alcoholism ,obesity

Background-

Stress-related eating has been linked to an increased risk of obesity and distinct features in food and alcohol consumption among adults. Stress is an important factor in the development of addiction and may contribute to an increased risk for obesity, sleeping disorders, drinking problems. Adverse eating habits, such as intake of high energy-dense (fatty) foods, chocolates, snacking, skipping breakfast and eating less fruit and vegetables, seem to be more common among children and adolescents experiencing stress and those prone to emotional eating, i.e., overeating in response to negative emotional arousal. Higher stress was associated with less healthy dietary behaviours and with higher body weight shorter sleep, tobacco use, and alcoholism. In the present study, we investigated the prevalence of self-reported stress-related eating behaviour and its association with overweight/obesity, abdominal obesity, food and alcohol consumption and other health behaviours (tobacco use, sleeping, physical activity, eating meals with one's family, binge eating and extreme weight control practices)

Methods-

A population based study of 100 individuals from different genres of life, different professions in Chennai ,India was conducted. Stress —related eating behaviour , dietary habits and other health behaviours were assessed using a questionnaire.

Results and Observations-

Stress driven individuals consumed more alcohol than other people. Stress driven eaters ate more of junk food. Eg Pizza, burgers, chips, etc. Among boys frequent consumption of junk food, alcohol & tobacco were more prevalent in stress driven people. Among girls frequent consumption of sweets, shorter sleep and occasional use of tobacco were more prevalent in stress driven people. The best predictors of stress related eating and drinking disorder in men were, a long history of unemployment, academic stress among college goers and school goers, mental stress at work and amongst women lack of emotional support. Stress related eating behaviour was more common in girls than boys.. Stress driven eaters had a higher prevalence of night eating , overweight, obesity and abdominal obesity.

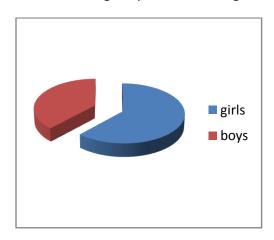


Fig.Stress related eating behaviour more common in girls (68%)

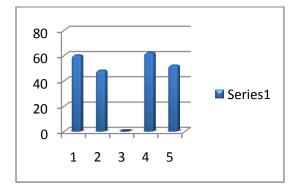


Fig. Stress related alcoholism & tobacco use more in males (60% & 62% respectively) in comparison to females.



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Discussion-

The co-occurrence of obesogenic habits(binge eating behaviour, inadequate sleep, consumption of calorie-dense) explains the association between stress-eating tendency and greater BMI & waist circumference. In adolescents &young adults loss of control was a requisite for overeating as a predictor of overweight . Stress related alcoholism & tobacco use had male preponderance. Strict diet and strenuous exercise for weight control were associated with stress-related eating behaviour. When stressed, some people increase whereas others decrease their food and drink consumption. Family environment, stress at work & unemployment in males and lack of emotional support in females seems to be a crucial determinant of stress. Health examinations at schools to recognise high-risk subjects using short questionnaires ,considering mental health as a serious topic of concern, intensive counselling ,psychological & dietary therapy could be helpful. In addition to the home environment, many other environments, such as schools, sports clubs , can influence adolescents' food choices; these places often provide easy access to snack-type foods and sugary drinks. Thus, health policies and programmes should be aimed at ensuring the supply of healthy, affordable foods and beverages and limiting the availability of energy-dense, low-satiety snacks. Changes in the school food environment have been found to affect adolescents' food choices both in and outside of school.

Conclusion-

Stress related eating and drinking is associated with obesity as well as adverse dietary and other health behaviours among both genders. Psychological programs should be conducted and cover the way in which people deal with emotions ,stress. Mental health amongst others aspect of health should be a serious topic of concern and problems should be brought out in the open and seek help. In terms of obesity prevention , adolescents who use food as a passive way of coping could benefit from learning healthier strategies for weight control and stress management.

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