Are Substance Use Disorders and “Food Addiction” Associated with Other Addictive Behaviors Among Weight Loss Surgery Patients?

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Introduction
Recent evidence suggests that weight loss surgery (WLS, or bariatric) patients are at risk for developing substance use disorders (SUDs; Saules et al., 2010).

Anecdotal evidence suggests that WLS patients may be at risk for developing other addictive behaviors, yet no empirical research has yet been conducted.

The purpose of this investigation was therefore to examine the rate of post-WLS addictive behaviors and their relationship to “food addiction” and SUDs.

Method
PROCEDURES:
A sample of post-bariatric surgery patients (N=62) completed a web-based survey.

PARTICIPANTS:
WLS patients with probable SUDs were oversampled from support groups to examine differences between those with probable SUDs (SUD; n=29, 46.8%) and those without (non-SUD; n=33, 53.2%).

MEASURES:
- Demographics questionnaire
- Michigan Assessment-Screening Tests/Alcohol-Drug (MAST-AD; Westermeyer, Yargsc, & Thuras, 2004)
- Yale Food Addiction Scale (YFAS; Gearhardt, Corbin, & Brownell, 2009)
- Addictive Behaviors Questionnaire (ABQ; Malat et al., 2010).

Results
WLS patients with a probable SUD were significantly more likely to meet criteria for all addictive behaviors.

Logistic regression analyses revealed that “food addiction” was not related to other addictive behaviors, but SUD was significantly associated with all addictive behaviors except for internet use.

Figure 1. Logistic Regression Models

Discussion
WLS patients, particularly those who develop SUDs, may be at risk for developing other addictive behaviors. Contrary to the concept of “addiction transfer,” however, those with presurgical “food addiction” were not more likely to meet criteria for SUD or other addictive behaviors.

These results are supported by research by Pulcini and colleagues (2012) who found that 14.4% of post-bariatric patients endorsed problems related to substance use and behavioral excesses (e.g., gambling), 7.5 ± 2.5 years post-surgery.

Future research should both explore treatment needs as well as the factors that may confer risk for post-surgical SUDs and other addictive behaviors among WLS patients.

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