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The impact of childhood sexual abuse in anorexia nervosa[☆]

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Abstract

Objective: The aim of this study was to examine the impact of childhood sexual abuse (CSA) on clinical characteristics and premature termination of treatment in anorexia nervosa (AN).

Method: The participants were 77 consecutive patients with AN admitted to an inpatient eating disorders unit. The patients were assessed in terms of eating disorder symptoms, general psychopathology, and CSA history at admission to hospital.

Results: Thirty-seven patients (48%) reported a history of CSA before the onset of the eating disorder. Individuals with a history of CSA reported significantly greater psychiatric comorbidity, including higher levels of depression and anxiety, lower self-esteem, more interpersonal problems, and more severe obsessive-compulsive symptoms. Patients with the binge-purge subtype of AN (AN-BP) were significantly more likely to report a history of CSA prior to the onset of the eating disorder as compared with patients with the restricting subtype (AN-R) of the illness (65% of the AN-BP patients vs. 37% of the AN-R patients; p < .02). Contrary to our predictions, abused patients were not significantly more likely to dropout of treatment overall. However, patients of the binge-purge subtype (AN-BP) with a history of CSA were significantly more likely to terminate treatment prematurely as compared with the other patients.

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Conclusions: Consistent with previous findings, the present results indicate that the prevalence of CSA is high among individuals seeking inpatient treatment for AN. A history of CSA was associated with greater psychiatric disturbance overall and a higher rate of dropout for patients of the binge-purge subtype. © 2006 Elsevier Ltd. All rights reserved.

Keywords: Anorexia nervosa; Sexual abuse; Treatment dropout

Introduction

Several studies have shown that a significant proportion of individuals with eating disorders report a history of childhood sexual abuse (CSA). In addition, non-eating disordered individuals with a history of CSA typically share certain features with eating disordered individuals including intense feelings of shame, low self-esteem, and body image disparagement. Consequently, several researchers have hypothesized that sexual abuse may be a risk factor for the development of eating disorders (Oppenheimer, Howells, Palmer, & Chaloner, 1985). On balance, the findings of studies examining this hypothesis have shown that sexual abuse is not a *specific* risk factor for eating disorders but is associated with an increased risk of psychopathology *in general* (Steiger & Zanko, 1990; Thompson & Wonderlich, 2004; Welch & Fairburn, 1994; Wonderlich, Brewerton, Jocic, Dansky, & Abbott, 1997).

Reviews of the research on the association between CSA and eating disorders have noted variation across studies in the estimated prevalence rate of sexual abuse in both eating disorder and control populations (Thompson & Wonderlich, 2004). Such inconsistencies may reflect differences in the samples studied (e.g., clinic vs. community samples), methodological differences, as well as differences in the definitions used for sexual abuse (Wyatt & Peters, 1986a, 1986b). The use of face-to-face interviews has been found to be associated with higher prevalence estimates than self-report questionnaires (Wyatt & Peters, 1986a). Broader definitions of sexual abuse (e.g., abuse with or without physical contact) also produce higher prevalence rates than more restrictive definitions (Wyatt & Peters, 1986b).

There is some evidence that a history of CSA is associated with greater psychiatric disturbance in individuals with eating disorders. Rorty, Yager, and Rossotto (1994) found that CSA was associated with personality pathology in a community sample of people with bulimia nervosa. Two studies found that a history of sexual abuse predicted the presence of self-injurious behavior in patients with eating disorders (Favaro & Santonastaso, 2000; Nagata, Kiriike, Iketani, Kawarada, & Tanaka, 1999). Anderson, LaPorte, Brandt, and Crawford (1997) found that eating disorder patients with a history of sexual abuse reported higher levels of depression and anxiety as compared with patients without an abuse history. Two studies found an association between a sexual abuse history and obsessive-compulsive symptoms, particularly ritualistic cleaning behavior (Lockwood, Lawson, & Waller, 2005).

With two exceptions, studies to date have found no evidence that sexual abuse is associated with more severe eating disorder psychopathology in patients with eating disorders. A study by Fullerton, Wonderlich, and Gosnell (1995) found that sexual abuse was associated with higher scores on a self-report measure of eating disorder attitudes and behaviors. Another study by Waller (1992a, 1992b) showed that a history of sexual abuse was associated with more frequent episodes of binge eating and vomiting. Several studies have shown that CSA is associated with the presence of binge eating and purging behaviors in patients with eating disorders (Bulik, Sullivan, Fear, & Joyce, 1997; Deep, Lilenfeld, Plotnicov, Pollice, & Kaye, 1999; Oliosi & Dalle Grave, 2003; Waller, Halek, & Crisp, 1993). Studies of personality differences

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