

The influence of negative emotions on decision making in women with restrictive and purging type Anorexia Nervosa in comparison to healthy women

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The current study aims to examine the influence of negative emotions on decision making ability in female patients with Anorexia Nervosa restrictive (AN-R) and purging (AN-P) type in comparison to healthy women. There are two primary hypotheses:...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Eating disorders and disturbances
Study type	Observational invasive

Summary

ID

NL-OMON36668

Source

ToetsingOnline

Brief title

Decision making and emotions in Anorexia Nervosa

Condition

- Eating disorders and disturbances

Synonym

Eating disorders and Anorexia Nervosa

Research involving

Human

Sponsors and support

Primary sponsor: Universiteit Utrecht

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: anorexia nervosa, decision making, emotions

Outcome measures

Primary outcome

Decision making as indicated by performance on the Iowa Gambling Task and the Game of Dice task.

Secondary outcome

Impulsivity (BIS), eating disorder severity (EDDS and BITE), depression (BDI), anxiety (STAI), emotion regulation (ERQ), sensitivity for reward and punishment (SPSRQ).

Study description

Background summary

AN patients have impaired decision making ability. They are inclined to base their decision on the short term gains (not eating to loose weight and (temporarily) reduce anxiety) without considering future consequences (health problems and no recovery). A possible factor underlying these decision making deficits are the affective disturbances seen in AN patients. Examples of affective disturbances are emotional problems such as disturbed emotion recognition and maladaptive emotion regulation, but also have to do with more fundamental disturbances such as abnormalities in the dopaminergic system. Another important factor is the personality differences between restrictive and purging AN patients. AN-P patients seem to have more impulsive characteristics as well as show more impulsive behaviours than AN-R patients, especially in response to negative affect (also referred to as urgency). However, so far no study on decision making in AN patients differentiated between different subtypes. It may be that AN-P and AN-R patients both have difficulties making adaptive decisions, but AN-P patients may show even more impaired decision making in response to negative affect.

Study objective

The current study aims to examine the influence of negative emotions on decision making ability in female patients with Anorexia Nervosa restrictive (AN-R) and purging (AN-P) type in comparison to healthy women. There are two primary hypotheses: both patients groups (AN-R and AN-P) will show decision making impairments in comparison to a healthy control group, and AN-P patients will be more impaired after experiencing negative emotions while AN-R patients will show no difference in their decision making ability. Secondary objectives of this study are to compare different kinds of decision making by using two different measures: the Iowa Gambling Task (IGT) and the Game of Dice task (GD), and to compare the findings with the results of the same experiment in patients with binge eating problems (Bulimia Nervosa and Binge Eating Disorder), that we recently conducted. The expectations related to this objective are that AN-P patients will resemble patients with binge eating problems, while this will not be the case for the AN-R patients.

Study design

Three groups can be distinguished and in each group a negative emotion induction will be conducted among half of the participants by means of a film fragment. This fragment has been used before in patients with Anorexia Nervosa and is known to temporarily elicit negative emotions. The other half of the participants will watch a neutral film fragment and will therefore not experience negative emotions. Subsequently, participants are asked to perform the IGT and the GD task to measure different aspects of decision making performance. Prior to the emotion induction, questionnaires will be administered to measure several relevant personality characteristics and eating disorder severity.

Study burden and risks

Participants* collaboration will include one session (of about 50 minutes and in the control group about 80 minutes) only. Therefore the burden is relatively small. All participants are asked to fill in some questionnaires which can be considered a small burden. Subsequently, half of the participants will experience negative emotions as a result of watching a film fragment, and the other half will not experience negative emotions. This procedure to evoke negative emotions has been used very frequently by other researchers (e.g., Jakobs et al., 1999; Macht & Mueller, 2007) and specifically also by BN and BED patients in a participating clinic (Ursula Centre Eating Disorders, 2009). This film fragment has also been used in a study with AN patients in Altrecht Eating Disorders Rintveld that was approved by the Ethical Committee of the UMCU (Zonneville-Bender et al., 2005). Furthermore, we recently conducted a study using the exact same procedure (except for the GD task) in BN and BED patients (CCMO number NL21460.041.08 and registration number of the METC 08-426/E) that was also approved by the Ethical Committee of the UMCU. More importantly, no negative consequences were experienced as a result of this procedure. Near the

end of the study, participants will perform both the IGT and the GD task which are both card games that been used several times before in patients with eating disorders as well as in other psychiatric disorders (e.g., OCD, depression, schizophrenia). Patients find these games interesting to play. The entire procedure is considered safe.

Prior to the study, participants are ensured that their treatment will not be influenced in any way by participating in the study and they are told that they can stop participating in the study at any time without reason. At the end of the study, participants will be thoroughly debriefed. They are instructed that they can contact the researchers or the therapist anytime in case of question or any inconveniences as a result of their participation.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Patients have to be female and older than 18 years, and conform the criteria of the DSM-IV diagnosed with Anorexia Nervosa purging type or restrictive type, or Eating Disorders Not Otherwise Specified with Anorectic restrictive or purging type tendencies. The control group will consist of women 18 years or older who are demographically equivalent to the patients.

Exclusion criteria

Additional to the inclusion criteria, in the control group, women are excluded when they have psychiatric or psychological problems as measured with the M.I.N.I., a structured interview to assess problems according to diagnostic criteria of the DSM-IV.

Study design

Design

Study type:	Observational invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Other

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	27-01-2011
Enrollment:	90
Type:	Actual

Ethics review

Approved WMO	
Date:	15-11-2010

Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO	
Date:	21-02-2012
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL33536.041.10