Prospective study of attachment as a predictor of eating pathology and weight loss two years after bariatric surgery

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Abstract:

Background: Bariatric surgery remains the most effective treatment for severe obesity. However, post-surgery outcomes are variable with respect to long-term weight loss and changes in eating-related psychopathology. Post-operative recurrence of eating behaviours, such as grazing or binge eating symptoms, have been associated with increased weight regain following surgery. An important variable affecting eating psychopathology in obesity is attachment (relationship) style, which can predispose an individual to a predictive response in treatment relationships and can influence emotion dysregulation and subsequent maladaptive coping. Given the limited literature on the effects of pre-surgery attachment style on post-surgery outcomes, this study seeks to examine the association between attachment style and eating pathology and weight loss outcomes 2-years post-bariatric surgery.

Methods: Patients were recruited between 2011 to 2014 as part of the Toronto Bariatric Surgery Psychosocial (Bari-PSYCH) study, conducted at the Toronto Western Hospital Bariatric Surgery Centre of Excellence. Three linear regression analyses were conducted with pre-surgery attachment style as predictors and binge eating symptoms, emotional eating, and percent total weight loss (%TWL) at 2-years post-surgery as outcomes.

Results: Avoidant attachment style was a predictor of binge eating at 2-years post-surgery ($p = 0.010$), while anxious attachment style was a predictor of emotional eating at 2-years post-surgery ($p = 0.038$). Attachment style did not predict %TWL at 2-year post-surgery.

Conclusion: This study demonstrates that attachment style is predictive of post-surgery eating pathology but does not contribute to long-term weight loss. It is possible that attachment style indirectly affects weight outcomes through post-operative eating psychopathology.

Abstract categories: bariatric surgery, psychiatry
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