

SYMPTOMS OF AVOIDANT/RESTRICTIVE FOOD INTAKE DISORDER (ARFID) AND OTHER EATING DISORDERS IN ADULTS IN THE GENERAL POPULATION WITH BOWEL SYMPTOMS

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Poster

Colorectal

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In a population-based cohort of 825 adults with bowel symptoms, disordered eating (ARFID or anorexia/bulimia screening positive) was common and associated with more severe symptoms and lower quality of life.

KEY POINTS

- Among 825 adults (66.2% female, mean age 34.0 ± 15.0 years) with bowel symptoms, 65.1% met Rome IV criteria for functional bowel disorder and 15.5% met criteria for functional dyspepsia.
- Positive screening for anorexia and bulimia was present in 44.7% of those with functional dyspepsia, 50.6% with overlapping functional bowel disorder and functional dyspepsia, 30.3% with functional bowel disorder only, and 14.9% of those not meeting diagnostic criteria.
- ARFID symptoms were most common in those with overlapping functional bowel disorder and functional dyspepsia (27.2%) compared to functional dyspepsia only (14.9%), functional bowel disorder only (9.9%), or no diagnosis (14.1%).
- Both disordered eating groups (ARFID and eating disorder) had higher proportions of females and reported more severe non-GI somatic symptoms, GI symptoms, anxiety, depression, and lower quality of life compared to those without disordered eating.
- The eating disorder group showed higher GI-specific anxiety while the ARFID group was associated with lower body mass index (24.5 ± 6.7 vs 27.3 ± 6.2 kg/m² in eating disorder group).

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