SYSTEMATIC REVIEW OF RESEARCHES TESTING MOVEMENT AND BODY TECHNIQUES IN THE TREATMENT OF EATING DISORDERS

Milena Adámková, Běla Hátlová

Abstract
We aim to review the kinesiotherapeutic programs that have been used in therapies for patients with an eating disorder, focusing on the programs that are based on body-oriented therapies, body movements and sports. To this end we have collected and analysed the results of all the programs that have been documented and tested on clinical populations, and that were published in or before 2008. For our methodological framework we used the Systematic Review method.

Keywords: Systematic Review, eating disorders, therapy, body techniques, kinesiotherapy

Background
Anorexia nervosa, bulimia nervosa and other psychiatric diseases, as included in the term "eating disorders", are common ailments facing not only adolescents but also young adults and children.

The best-known psychological treatments for eating disorders that have been used for many years are interpersonal therapy, cognitive-behavioural therapy, behavioural therapy, family systems, and pharmacotherapy (Fairburn & Harrison, 2003; Garner & Garfinkel, 1997; Wilson, 2004).

The illness is felt to involve both psychological and physical aspects, acting together. This implies that diagnostic criteria are directly connected with the body. Consequently there has always been a therapy focused on body, body experience, movement or physical exercise, such as Dance Movement therapy (Levy, 1988, Rifkin-Gainer, 1984, Krueger & Schofield, 1986), Kinesiotherapy (Hatlova, B., 2003), Body-oriented therapy (Probst et al., 1995, Vandereycken et al., 1987), and Massage therapy (Hart et al., 2001, Field, et al. 1998).

The problem when using body-oriented techniques could lie in exercise addiction, which has been well known in the case of anorexia nervosa disaster. But there is also a positive side, as follow-ups show that they usually prevent relapse (Bhandari & Agarwala, 1996). Experience has shown that we need a multidisciplinary approach, such as the incorporation of experimental therapies in combination with one or more traditional forms.
of therapy in the comprehensive treatment of eating disorders. Using multidisciplinary approaches, however, makes it difficult to verify body-focused therapies for there appear to be problems of methodology and there are the risks of overloading patients with too much psychological testing. That is also the reason why so few studies that test body-focused therapies have been published.

To dispose of well-tested therapies, however, is highly important for patients, for the management of therapeutic institutions and for the improvement and future research of the existing treatments. The purpose of this study is to offer a full overview of all tested movement – and body-focused therapies used for patients with eating disorders till the year 2008.

Methods

The design of the study follows the methodological design of Systematic Review. We searched for English language articles which describe a treatment focused on the body, tested in the treatment of patients with eating disorders.

The basic search was done in the electronic databases PubMed and EBSCO. PubMed provides access to bibliographical information that includes MEDLINE and some additional life-science journals that submit their full texts to PubMedCentral and receive a qualitative review by NLM.


As an additional search we used a parallel search, made by the search services of the Czech National Medical Library, and we searched through references included in articles.

Conclusion

In total we looked through more than 1800 articles. The problem in finding relevant articles in this field is a problem of keywords, search terms, titles and abstracts, which do not always match with a subject described in the article, which only partially describe the article or which are not always understandable. The next problem also lies in the above-mentioned multidisciplinary approaches. For example, cognitive behavioral therapy may or may not include movement techniques, but when this is not mentioned, it is a problem for the reader to find this out.

41 Studies were found to be relevant. The increasing number of studies acknowledges the rising importance of body-focused therapies in eating disorders (table 1, graph 1). The findings show that only 41,5 % of the studies (table 2) had more than 30 respondents. On the other hand, the other 58,5 % of the researched studies had less than 30 respondents and so the statistical validity of the studies is not too high. By contrast, 12 % of the studies include both male and female respondents (table 3, graph 2), which is a great result when we look at the small number of hospitalized male patients with an eating disorder.
In the search there were also some studies with therapies that were not tested or that were only tested on a non-clinical population, which is a pity for future use in clinical practice. The results we show suggest that therapists should use test methods in their practice and help the others build a strong field for therapies focused on the body for eating disorders.

Table 1  Number of published studies by decades (n=41)

<table>
<thead>
<tr>
<th>Year of publishing</th>
<th>Number of studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970-1979</td>
<td>2</td>
</tr>
<tr>
<td>1980-1989</td>
<td>6</td>
</tr>
<tr>
<td>1990-1999</td>
<td>12</td>
</tr>
<tr>
<td>2000-2008</td>
<td>21</td>
</tr>
</tbody>
</table>

Graf 1   Number of published studies by decades (n=41)
Table 2  Number of patients included in studies (n=41)

<table>
<thead>
<tr>
<th>Number of patients included in studies (n=41)</th>
<th>Number of studies</th>
<th>Studies (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - 29</td>
<td>24</td>
<td>58.5 %</td>
</tr>
<tr>
<td>30 - 229</td>
<td>17</td>
<td>41.5 %</td>
</tr>
</tbody>
</table>

Table 3  Sex of the studies’ sample (n=41)

<table>
<thead>
<tr>
<th>Sex of the studies’ sample (n=41)</th>
<th>Number of studies</th>
<th>Studies (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only female</td>
<td>35</td>
<td>85 %</td>
</tr>
<tr>
<td>Female and male</td>
<td>5</td>
<td>12 %</td>
</tr>
<tr>
<td>No specified</td>
<td>1</td>
<td>3 %</td>
</tr>
</tbody>
</table>
Literature


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