ASSOCIATION OF EATING BEHAVIORS AND DEMOGRAPHIC PROFILES OF FILIPINO ADULTS WITH TYPE 2 DIABETES MELLITUS SEEN IN A TERTIARY HOSPITAL

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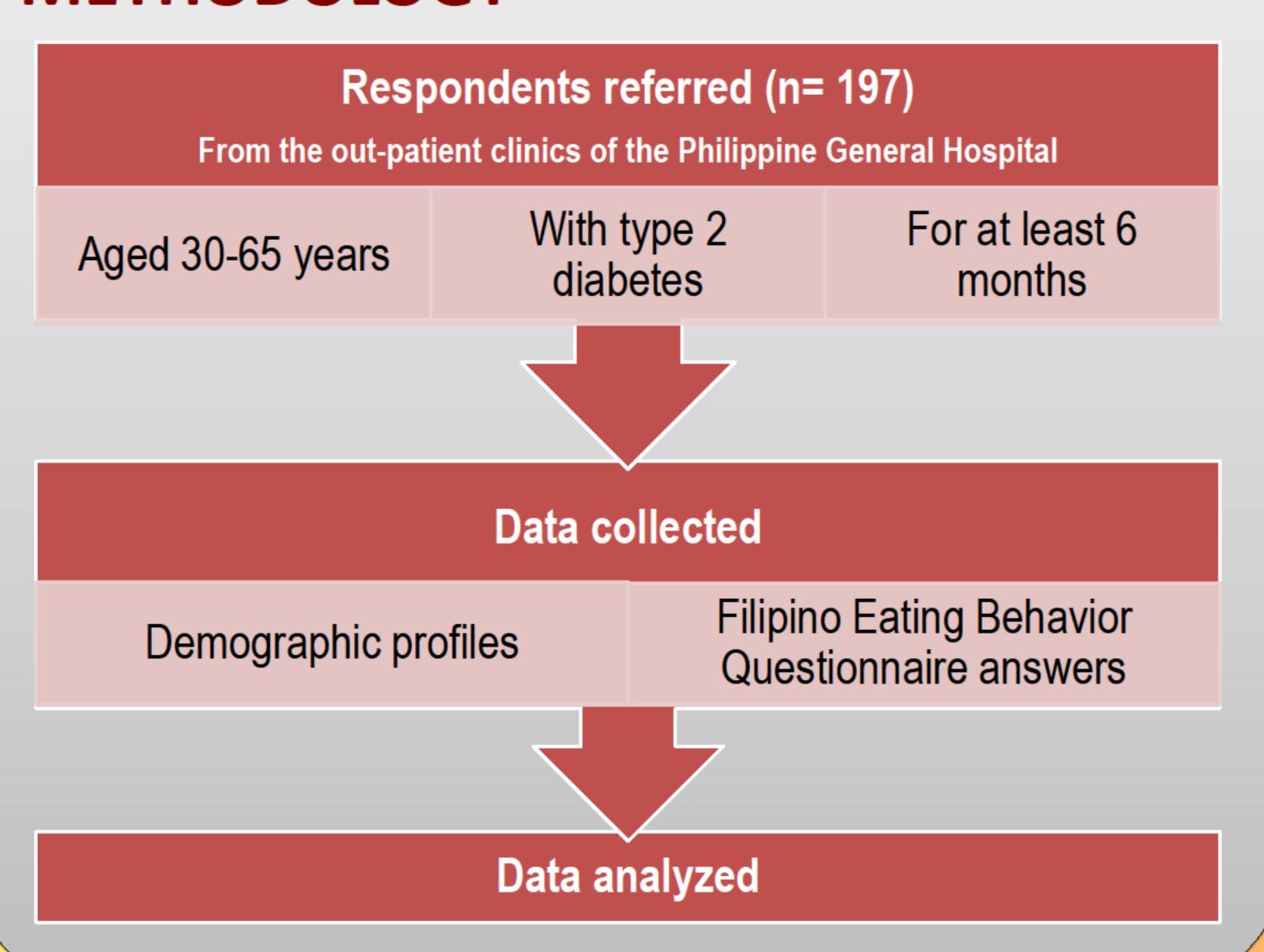
BACKGROUND

Patients with type 2 diabetes mellitus face daily challenges in making dietary choices that are influenced by eating behaviors. Hence, studies have evaluated eating behaviors and even described their differences across demographic profiles to address such confounding issues. Recognition of eating behaviors and associated demographic profiles could aid in individualizing dietary plans and direct community nutrition programs in forming cost-effective measures.

OBJECTIVE

The primary goal of this study is to identify differences in eating behaviors across demographic profiles of Filipinos with type 2 diabetes mellitus.

METHODOLOGY



Eating Behavior	Definition
Uncontrolled	tendency to eat more than usual due to loss of control over food intake
Restrained	restriction of food intake in order to control or lower blood sugar levels
Emotional	eating due to inability to resist emotional cues
Social	increased eating in the company of familiar others
Pro-active	enhanced eating in order to avoid hypoglycemia

The Filipino Eating Behavior Questionnaire

It is a 28-item, self administered questionnaire that is answerable by a 4-point Likert scale of frequency. It assesses five eating behaviors, namely: uncontrolled, restrained, emotional, social, & pro-active eating.

RESULTS: Eating behaviors & demographic profiles

Significant eating behaviors scores in: (p value <0.05)	Associated demographic factors
Uncontrolled	Higher education Family history of diabetes Eating 2 meals & no snacks per day
Restrained	Previous smoking history Treatment with OHAs & insulin Eating 3 meals & 1 snack per day
Emotional	Eating 2 meals & no snacks per day
Social	Younger age (30-50 years) Higher education Being employed Family history of diabetes
Pro-active	Longer duration of diabetes Eating no snacks
	OHAs – Oral hypoglycemic agents

RESULTS: Intercorrelations & Prevalence rates

Uncontrolled, emotional, social, and pro-active eating domains seem to have direct relationships, while restrained eating tends to show an inverse relationship with the other eating behaviors.

In this study, the estimated prevalences were 14%, 14%, 12%, 13%, and 11% for uncontrolled, restrained, emotional, social, and pro-active eating, respectively.

CONCLUSION

Among patients with type 2 diabetes mellitus, eating behaviors may vary and depend on their demographic profiles. Eating behaviors related to overeating seem to be directly related to each other and inversely related to restrained eating. Prevalence rates of behaviors related to overeating and restrained eating were both relatively low.

The main author has nothing to disclose.

This poster does not contain any trade names or cover any unapproved uses of specific drugs, other products or devices.

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