

Review Article

Association Between Attention-Deficit/Hyperactivity Disorder and Eating Disorders, Eating-Related Symptoms, and Maladaptive Eating Behaviours: Protocol for an Overview of Systematic Reviews

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Background: Attention-deficit/hyperactivity disorder (ADHD) is among the most prevalent neurodevelopmental disorders worldwide and is associated with substantial functional impairment, psychiatric comorbidity, and symptom persistence across the lifespan. Increasing evidence suggests an association between ADHD and eating disorders, eating-related symptoms, and maladaptive eating behaviours, including anorexia nervosa, bulimia nervosa, binge-eating disorder, emotional eating, grazing, food addiction, night eating, food craving, selective eating, and loss-of-control eating. However, the evidence remains methodologically heterogeneous and conceptually fragmented across categorical diagnoses, dimensional symptoms, and specific behaviours. **Objectives:** This overview aims to identify, synthesize, and critically appraise evidence from systematic reviews and meta-analyses examining the association between ADHD and eating disorders, eating-related symptoms, and maladaptive eating behaviours across children, adolescents, and adults. **Eligibility Criteria:** We will include systematic reviews, with or without meta-analysis, that synthesize observational studies evaluating diagnosed ADHD in relation to eating disorder diagnoses, eating-related symptoms, or maladaptive eating behaviours. **Information Sources:** Searches will be conducted from database inception to the final search date in MEDLINE via PubMed, APA PsycINFO via EBSCOhost, CINAHL via EBSCOhost, EMBASE, SCOPUS, Academic Search via EBSCOhost, Epistemonikos, the Cochrane

Database of Systematic Reviews, SciELO, Web of Science Core Collection, and ProQuest. Also Prospero
Methods: Two reviewers will independently screen records, assess full texts, extract data, and evaluate methodological quality and risk of bias. AMSTAR 2, ROBIS, GRADE, and corrected covered area will be used where applicable. Planned Synthesis: Findings will be synthesized narratively and, where appropriate, quantitatively by outcome domain, population, ADHD definition, measurement approach, and study design.

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Introduction

Rationale

Attention-deficit/hyperactivity disorder (ADHD) is the most prevalent neurodevelopmental disorder worldwide, affecting approximately 5.3% of children and adolescents and 2.5% of adults with substantial regional and methodological variability^{[1][2][3]}. Beyond its high prevalence, ADHD is associated with substantial functional impairment, psychiatric and somatic comorbidity, increased premature mortality, and persistence of symptoms across the lifespan^{[4][5][3][6]}

Over the past decade, a growing body of evidence has linked ADHD with eating disorders and maladaptive eating behaviours, including anorexia nervosa, bulimia nervosa, binge-eating disorder, binge eating, emotional eating, grazing, and loss-of-control eating^{[7][8][9]}. Population-based studies suggest that individuals with ADHD may have up to a fourfold increased risk of developing eating disorders compared with the general population^[10]. Likewise, Latin American studies have reported a high frequency of disordered eating behaviours among university students, including in Chile, where approximately one-third of students present maladaptive eating symptoms^{[11][12]}.

Several neurobiological and psychological mechanisms may underlie this association. Impulsivity, executive dysfunction, and emotional dysregulation—core features of ADHD—may impair eating-related self-regulation and increase vulnerability to impulsive eating behaviours. In addition, shared alterations in dopaminergic reward pathways may predispose individuals to seek immediate gratification through highly palatable foods, particularly in the context of emotional or binge eating^[13]. However, the available literature is characterized by substantial methodological heterogeneity, differences between categorical

and dimensional outcomes, and conceptual fragmentation between DSM-based diagnoses and specific eating-related behaviours.

In this context, an umbrella review would allow a critical synthesis of the available evidence, an assessment of its methodological quality, and clarification of the magnitude and consistency of the association between ADHD and different eating disorders and eating-related behaviours.

Objectives

The aim of this overview is to synthesize and critically assess the magnitude and consistency of the association between ADHD and eating disorders, eating-related symptoms, and maladaptive eating behaviours, based on evidence from systematic reviews and meta-analyses.

Methods

Design

We will conduct an overview of systematic reviews and meta-analyses during July and August 2026. Given the absence of a single standardized guideline specifically designed for conducting overviews of observational evidence, this protocol will follow methodological recommendations for umbrella reviews of observational studies, as proposed by Zhou et al.^[14], and will incorporate relevant elements from Cochrane guidance for overviews of reviews^[15] and the PRIOR statement, restricted to items applicable to observational evidence^[16]. The MOOSE reporting recommendations for meta-analyses of observational studies will also be considered^[17]. This protocol follows PRISMA-P guidance, with intervention-focused items adapted to the context of observational evidence^[18].

The protocol was registered in PROSPERO (CRD420261464200) before formal screening began and will be uploaded to an open-access protocol repository. Any amendments to the protocol will be documented with the date, rationale, and description of the change.

Eligibility criteria

Eligibility criteria will be defined according to the PECOS framework. Eligible reviews will include populations with attention-deficit/hyperactivity disorder (ADHD), and will examine their association with any eating disorder diagnosis, eating-related symptoms, maladaptive eating behaviours, or related

constructs. Eligible comparators will include individuals without ADHD, individuals with lower ADHD symptom levels, or any other comparison group defined in the included reviews.

We will include systematic reviews, with or without meta-analysis, that synthesize observational studies and report continuous or dichotomous measures of association between ADHD and eating-related constructs. A review will be considered systematic if it reports a clearly formulated research question, explicit eligibility criteria, a reproducible search strategy in at least one bibliographic database, and a structured process for study selection.

Secondary outcomes may include symptom severity, functional impairment, prevalence or incidence of eating-related psychopathology, and other clinically relevant outcomes reported by the included reviews. We will include published and unpublished systematic reviews from database inception to the final search date. Articles published in English, Spanish, or German will be eligible, reflecting the language expertise available within the review team.

Narrative reviews without explicit systematic methods, protocols, editorials, commentaries, letters, conference abstracts without sufficient methodological information, and reviews without ADHD-specific data will be excluded. Reviews focused exclusively on obesity, body mass index, metabolic outcomes, or bariatric surgery will be excluded unless they report specific eating disorder, eating symptom, or eating behaviour outcomes in relation to ADHD.

No supplemental primary studies will be included as independent units of evidence. Primary studies cited within included reviews will be used only to assess overlap, clarify review-level data, and, if required, understand discrepant findings across reviews. Any exploratory re-analysis using primary study data extracted from included reviews will be clearly labelled as exploratory and will only be conducted if primary studies are sufficiently comparable and non-overlapping.

Information sources

The following electronic databases will be searched from inception to the final search date: Searches will be conducted from database inception to the final search date in MEDLINE via PubMed, APA PsycINFO via EBSCOhost, CINAHL via EBSCOhost, EMBASE, SCOPUS, Academic Search via EBSCOhost, Epistemonikos, the Cochrane Database of Systematic Reviews, SciELO, Web of Science Core Collection, and ProQuest.

In addition, PROSPERO will be searched to identify ongoing, completed, or unpublished systematic reviews and to locate associated protocols or full reports. Protocols without completed results will not be

included as units of evidence but will be used to identify potentially relevant ongoing or unpublished reviews.

Supplementary search methods will include screening the reference lists of included reviews and relevant guidelines, citation searching, consultation with subject-matter experts, and searches of relevant grey-literature sources. Guidelines will not be included as independent units of evidence unless they contain an identifiable systematic review meeting the prespecified eligibility criteria; however, their reference lists may be screened to identify eligible reviews.

Supplementary search methods will include screening the reference lists of included reviews and relevant prior reviews, consulting subject-matter experts, and searching grey literature. Relevant sources will include the websites and guideline repositories of the World Health Organization; the American Psychiatric Association; the European Psychiatric Association; the World Federation of Societies of Biological Psychiatry; the American Diabetes Association; The Obesity Society; Obesity Canada; the Chilean Ministry of Health (Ministerio de Salud de Chile; MINSAL), including relevant national obesity and eating disorder guidelines; the National Institute for Health and Care Excellence; relevant Australian and Scottish guideline-producing bodies; and the Academy for Eating Disorders. When full-text reports are unavailable or relevant data are missing, the corresponding authors will be contacted.

Search strategy

Search strategy will be structured around three main Boolean concepts: ADHD, eating disorders or eating-related behaviours, and systematic reviews or meta-analyses. Search strategies will be adapted to the syntax and controlled vocabulary of each database. No date restrictions will be applied. Language restrictions will be limited to English, Spanish, and German. (Table 1).

The ADHD concept will include terms related to attention-deficit/hyperactivity disorder and its variants. The eating-related concept will include terms related to anorexia nervosa, bulimia nervosa, binge-eating disorder, eating disorder not otherwise specified, binge eating, loss-of-control eating, picky eating, selective eating, purging, compensatory behaviours, emotional eating, night eating syndrome, night eating behaviour, food addiction, grazing, snacking, nibbling, picking, food craving, and disordered eating. The review concepts will include terms related to systematic reviews, meta-analyses, umbrella reviews, and overviews of reviews.

A complete reproducible search strategy for at least one database will be included in the protocol, and the full search strategy for each database will be reported in an appendix.

Study records

Data management

Search results from each database will be exported in RIS or CSV format and uploaded to Rayyan for screening. Additional records identified through reference lists, expert consultation, protocol registries, and grey literature will also be uploaded to the same platform. Duplicate records will first be identified using Rayyan and then manually verified by one reviewer before removal.

After title and abstract screening and full-text assessment, data from included reviews will be extracted into a pre-specified Microsoft Excel extraction form.

Selection process

Before formal screening, a calibration exercise will be conducted using 20 records to ensure consistent application of the eligibility criteria. Title and abstract screening will then be performed independently by two blind reviewers. Disagreements will be resolved by discussion; if consensus cannot be reached, a third reviewer will adjudicate.

Full texts of potentially eligible articles will be retrieved and uploaded to Rayyan. Full-text screening will also be conducted independently by two reviewers, with disagreements resolved by consensus or by a third reviewer. Reasons for exclusion at the full-text stage will be recorded and reported.

Data collection process

A pilot extraction exercise will be conducted using five included articles to refine the extraction form and calibrate the data collection process. Data extraction and risk-of-bias assessment will then be conducted independently and in duplicate by two reviewers. Extracted data will be compared and synthesized by consensus. Persistent disagreements will be resolved by a third reviewer.

When relevant data are missing or unclear, the corresponding author will be contacted by FV. Authors will be given two weeks to respond. If no response is received, the review will proceed using the available published information, and missing data will be reported as such.

Management of Review and Primary Study Overlap

During study selection, potentially overlapping reviews will not be excluded solely on the basis of overlap. All eligible reviews will initially be retained to allow mapping of the evidence base. During data collection,

a citation matrix will be constructed to identify primary studies included across reviews. Primary study overlap will be quantified using the corrected covered area both overall and, where feasible, by outcome domain. Corrected covered area will be calculated as $CCA = (N - r) / (r \times c - r)$, where N is the total number of included primary study occurrences across reviews, r is the number of unique primary studies, and c is the number of included reviews.

In cases of substantial overlap, findings will be interpreted cautiously to avoid double-counting evidence. Priority in interpretation will be given to reviews with lower risk of bias, higher methodological quality, more recent search dates, broader coverage of primary studies, greater relevance to the review question, and more transparent synthesis methods. If overlapping reviews report discrepant findings, discrepancies will be explored in relation to eligibility criteria, population characteristics, ADHD definitions, eating-related outcome definitions, primary study design, search date, risk of bias, methodological quality, and certainty of evidence.

Data items

A pre-specified extraction form will be used to collect data on review characteristics, eligibility criteria, measurement approaches, outcome definitions, effect estimates, methodological quality, risk of bias, certainty of evidence, primary study overlap, and synthesis methods. For each included review, we will extract the review title, first author, year of publication, country or region, funding source, conflicts of interest, review objective or question, review type, protocol registration status, whether the review is an update of a previous review, databases searched, date of the last search, language restrictions, inclusion and exclusion criteria, number of included studies, number of participants, primary study designs, population characteristics, setting, and, where available, age, sex or gender distribution, socioeconomic status, educational level, and clinical or community recruitment source.

ADHD-related variables will include the definition of ADHD, diagnostic criteria, measurement instruments, informant type, diagnostic thresholds or cut-off scores, ADHD presentation or symptoms domain, and whether ADHD was assessed categorically, dimensionally, or both. Where available, we will also extract information on ADHD symptom severity, age at assessment, comorbid psychiatric conditions, and ADHD medication status, particularly stimulant or non-stimulant pharmacotherapy.

Eating-related variables will include the specific eating disorder diagnosis, eating-related symptoms, or maladaptive eating behaviours assessed, as well as the measurement instrument, diagnostic threshold or cut-off score, severity measure, prevalence or incidence estimates, and mean scores with standard

deviations, where available. Outcomes will be categorized as formal eating disorder diagnoses, dimensional eating disorder symptoms, or specific eating-related behaviours. Where reported, we will extract information on body mass index or weight status; compensatory behaviours; the use of medications as compensatory behaviours, including insulin misuse and the use of anorectic or weight-loss medications; binge-eating frequency; loss-of-control eating; restrictive eating; purging behaviours; emotional eating; food addiction; grazing; night eating; food craving; and selective or picky eating.

We will also extract methodological and synthesis characteristics, including search strategy characteristics, protocol registration, study selection procedures, data extraction procedures, risk-of-bias tools used for primary studies, whether risk of bias was incorporated into the interpretation of findings, statistical methods used for meta-analysis, heterogeneity statistics, methods used to explore heterogeneity, publication bias assessment, certainty or confidence assessment, and the main conclusions of each review. For overlap assessment, we will extract the list of primary studies included in each review, including author, year, sample characteristics, outcome domain, and effect estimate where available.

For all outcomes, we will extract the reported association measures. For dichotomous outcomes, these may include odds ratios, risk ratios, hazard ratios, prevalence ratios, incidence rate ratios, or contingency data. For continuous outcomes, these may include Pearson's r , Spearman's ρ , standardized regression coefficients, unstandardized regression coefficients, standardized mean differences, mean differences, and other effect-size metrics. Where reported, confidence intervals, standard errors, p -values, heterogeneity estimates, and sample sizes will also be extracted. We will record whether effect estimates are crude or adjusted, the covariates included in adjusted models, and whether the effect estimate was directly reported or derived from available statistical data.

Outcomes and prioritization

The primary outcome will be the association between ADHD and eating-related constructs. For dichotomous outcomes, odds ratios will be prioritized as the preferred effect measure. For continuous outcomes, correlation coefficients, including Pearson's r and Spearman's ρ , will be prioritized. When several estimates are available for the same outcome, adjusted estimates will be prioritized over unadjusted estimates, provided that the adjustment set is clinically and methodologically appropriate.

Outcomes will be organized separately for formal eating disorder diagnoses, dimensional eating disorder symptoms, and specific maladaptive eating behaviours. Formal diagnoses will include anorexia nervosa,

bulimia nervosa, binge-eating disorder, and other DSM- or ICD-defined eating disorders. Dimensional and behavioural outcomes will include binge eating, loss-of-control eating, emotional eating, food addiction, grazing, night eating, food craving, restrictive eating, purging or compensatory behaviours, and selective or picky eating.

If included reviews report meta-analytic estimates, we will extract the summary effect estimate, confidence interval, statistical model, heterogeneity statistics, number of studies, number of participants, and any analyses exploring heterogeneity. Secondary outcomes will include symptom severity, functional impairment, prevalence or incidence estimates, group differences in eating-related symptom scores, and other clinically relevant outcomes reported in the included reviews.

Where possible, effect measures will be transformed into common metrics using established methods. Effect-size derivation will be conducted only when sufficient statistical information is available, such as means, standard deviations, sample sizes, contingency data, test statistics, or regression coefficients. Derived estimates will be clearly identified and examined in sensitivity analyses.

Risk of bias in individual studies

Risk of bias in included systematic reviews will be assessed using ROBIS. Two reviewers will independently apply the tool at the review level, and disagreements will be resolved by consensus or by a third reviewer.

Methodological quality will be assessed using AMSTAR 2, with adaptation to the observational nature of the evidence base. The following AMSTAR 2 domains will be considered: item 1, formulation of the review question and eligibility criteria using PECOS components; item 2, prior establishment of review methods and protocol registration; item 3, justification for eligible study designs; item 4, comprehensiveness of the literature search; item 5, duplicate study selection; item 6, duplicate data extraction; item 7, list and justification of excluded studies; item 8, description of included studies; item 9, adequacy of risk-of-bias assessment methods for primary observational studies; item 10, reporting of funding sources for included studies; item 11, appropriateness of meta-analytic methods when applicable; item 12, assessment of the potential impact of risk of bias on the synthesis when meta-analysis was performed; item 13, consideration of risk of bias when interpreting the results; item 14, explanation and discussion of heterogeneity; item 15, assessment of publication bias or small-study effects when quantitative synthesis was performed; and item 16, reporting of review authors' funding sources and conflicts of interest. Items 11, 12, and 15 will be coded as not applicable when no meta-analysis was conducted.

Risk-of-bias assessments of primary studies, as reported by the included reviews, will be extracted and summarized. If overlapping reviews provide discrepant assessments for the same primary study, two reviewers will independently examine the available information and reach a consensus judgment. These assessments will be reported in tables and incorporated into the interpretation of findings.

Data synthesis

A structured narrative synthesis will be conducted for all included reviews. Findings will be organized according to eating disorder diagnosis, eating-related behaviour, age group, sex or gender, setting, country or region, ADHD measurement method, eating-related measurement method, primary study design, methodological quality, risk-of-bias level, and certainty of evidence. Results will be presented separately for formal eating disorder diagnoses, dimensional eating-related symptoms, and maladaptive eating behaviours.

If feasible and appropriate, quantitative synthesis will be considered only when effect estimates are sufficiently comparable and primary study overlap can be adequately managed. Dichotomous and continuous outcomes will be synthesized separately unless transformation to a common metric is justified. The primary quantitative synthesis will preferentially use directly reported correlation coefficients or odds ratios. When necessary, effect sizes may be harmonized to a common correlational metric. Spearman's ρ and standardized regression coefficients may be treated as approximations of Pearson's r when justified. Odds ratios may be converted to Cohen's d and subsequently to r using established methods^{[19][20][21]}.

Before pooling, correlations will be bounded between -0.999999 and 0.999999 and transformed to Fisher's z values, with corresponding sampling variances calculated. Meta-analyses will be conducted using inverse-variance random-effects models. Between-study variance will be estimated using restricted maximum likelihood, and confidence intervals will be calculated using the Hartung–Knapp–Sidik–Jonkman method.

For longitudinal studies, the primary analysis will use the first available measurement to avoid dependency between estimates. Follow-up assessments will be incorporated in sensitivity analyses where feasible. If multiple estimates are reported for the same population and outcome, priority will be given to the most fully adjusted estimate, the most validated measurement approach, and the estimate most closely aligned with the predefined outcome domain. If quantitative synthesis is not appropriate

because of heterogeneity, insufficient data, or substantial overlap, findings will be synthesized narratively.

Assessment of Heterogeneity

Statistical heterogeneity will be assessed using Cochran's Q , I^2 , and τ^2 when quantitative synthesis is performed. Conventional I^2 thresholds will be used as a descriptive guide, with approximately 25%, 50%, and 75% interpreted as low, moderate, and high heterogeneity, respectively.

Potential sources of heterogeneity will be explored, where sufficient data are available, according to age; sex or gender; educational and socioeconomic status; clinical versus community setting; country or geographical region; publication year; eating disorder diagnosis; type of eating-related behaviours; ADHD presentation and diagnostic or measurement method; eating-related assessment instrument; symptom severity; diagnostic classification system and edition, including DSM-IV, DSM-5, and ICD-based criteria; study design; and risk-of-bias level. Additional analyses may consider psychiatric comorbidity, medication use, treatment status, and whether diagnoses were established through clinical interviews, medical records, or self-report instruments.

Subgroup and Sensitivity Analyses

Pre-specified subgroup analyses will examine whether findings differ by age group, sex or gender, clinical versus community setting, country or region, type of eating disorder diagnosis, type of eating-related symptom or behaviour, ADHD diagnosis versus ADHD symptoms, ADHD measurement instrument, eating-related measurement instrument, risk-of-bias level, and methodological quality of the included reviews.

Sensitivity analyses will be conducted where feasible to assess the robustness of the findings. These analyses may include excluding reviews or primary studies at high risk of bias, excluding reviews with critically low methodological quality, restricting analyses to non-overlapping primary studies, restricting analyses to validated diagnostic or symptom measures, excluding effect estimates derived only through transformation, and comparing directly reported effect estimates with harmonized or transformed estimates.

Meta- Bias

When at least 10 studies are available for a given quantitative synthesis, small-study effects will be assessed using funnel plots and Egger's regression test. If quantitative pooling is not appropriate because of heterogeneity, overlap, or insufficient data, publication bias and selective reporting will be discussed narratively based on the assessments reported in the included reviews.

Meta-regression analyses will be considered when at least 10 studies are available for each covariate examined. Prespecified covariates may include mean age, proportion of female participants, educational or socioeconomic status, clinical versus non-clinical setting, country or geographical region, ADHD assessment method, diagnostic classification system and criteria, type of eating-related outcome, year of data collection, year of publication, sample size, and risk-of-bias level. All quantitative analyses will be conducted in R, version 4.3 or later.

Certainty of Evidence

The certainty of evidence for the primary outcomes will be assessed using the GRADE framework, considering risk of bias, inconsistency, indirectness, imprecision, and publication bias. Given the observational nature of the expected evidence base, certainty assessments will generally begin at low certainty and may be rated down or, where appropriate, rated up according to established GRADE criteria.

Where GRADE assessments are available in included reviews, they will be extracted and compared. If necessary and feasible, certainty assessments will be conducted de novo at the overview level for the main outcomes. Certainty judgments will be reported separately by outcome domain, including formal eating disorder diagnoses, eating-related symptoms, and maladaptive eating behaviours. Certainty of evidence will be assessed at the outcome level.

Ethics and Dissemination

Ethics committee approval is not required because this study will synthesize data from previously published systematic reviews and meta-analyses and will not involve individual participant data. Findings will be disseminated through publication in a peer-reviewed journal and may also be presented at academic conferences or research meetings. Supplementary materials, including search strategies, extraction forms, overlap matrices, and analytic code, will be made available where feasible.

Discussion

The substantial burden of ADHD and eating disorders, together with their potential comorbidity and plausible shared neurobiological mechanisms, underscores the need for a comprehensive synthesis of the available evidence^{[4][2][3][13][9][6]}. Both conditions are associated with significant functional impairment, psychiatric comorbidity, and long-term adverse outcomes. Their co-occurrence may therefore identify a clinically relevant subgroup with greater symptom complexity, increased service needs, and potentially distinct prevention and treatment implications.

Despite previous reviews addressing aspects of this association^{[7][8][9]}, no comprehensive overview has, to our knowledge, systematically integrated evidence across the broader spectrum of eating disorder diagnoses, eating-related symptoms, and maladaptive eating behaviours.

This overview will provide a comprehensive synthesis of systematic reviews and meta-analyses examining the association between ADHD and eating disorders, eating-related symptoms, and maladaptive eating behaviours. By integrating evidence across formal diagnoses, dimensional symptoms, and behavioural constructs, this review aims to clarify the magnitude, direction, and consistency of the association and to identify areas where evidence is robust, uncertain, or absent.

The main strengths of this protocol include the use of duplicate screening and extraction, broad database coverage, explicit assessment of primary study overlap, appraisal of methodological quality and risk of bias, and planned assessment of certainty of evidence. The overview will also address a clinically relevant and conceptually fragmented evidence base by distinguishing between eating disorder diagnoses and specific eating-related behaviours.

Potential limitations include heterogeneity in ADHD definitions, assessment procedures, eating-related outcome measures, age groups, clinical settings, and primary study designs across included reviews. In addition, substantial overlap of primary studies across reviews may limit the independence of evidence and complicate quantitative synthesis. These limitations will be addressed through overlap assessment, sensitivity analyses, structured narrative synthesis, and cautious interpretation of findings.

The findings may inform clinicians, researchers, and policymakers about the co-occurrence of ADHD and eating-related psychopathology and may support more precise assessment, prevention, and treatment strategies for populations with this comorbidity.

Database	Boolean search strategy
MEDLINE via PubMed	((("Attention Deficit Disorder with Hyperactivity"[Mesh] OR ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("Feeding and Eating Disorders"[Mesh] OR "Feeding Behavior"[Mesh] OR "Eating Behavior"[Mesh] OR "Avoidant Restrictive Food Intake Disorder"[Mesh] OR "eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND (systematic[sb] OR "Systematic Review"[Publication Type] OR "Meta-Analysis"[Publication Type])

Database	Boolean search strategy
	OR "systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revisión sistemática" OR metaanalysis OR "meta-análisis" OR "revisión de revisiones" OR "revisión de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
APA PsycINFO via EBSCO	((DE "Attention Deficit Disorder with Hyperactivity" OR ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung").mp.) AND ((DE "Eating Disorders" OR DE "Eating Behavior" OR DE "Anorexia Nervosa" OR DE "Bulimia" OR DE "Binge Eating Disorder" OR "eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR

Database	Boolean search strategy
	"alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten").mp.) AND ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanalisis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*").mp.)
CINAHL via EBSCOhost	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR

Database	Boolean search strategy
	picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revisión sistemática" OR metaanálisis OR "meta-análisis" OR "revisión de revisiones" OR "revisión de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
Academic Search EBSCO	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR

Database	Boolean search strategy
	atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanálisis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
Epistemonikos	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta

Database	Boolean search strategy
	alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten")
Cochrane Database of Systematic Reviews	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion

Database	Boolean search strategy
	emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten")
SciELO	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR

Database	Boolean search strategy
	"alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanalisis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
Web of Science Core Collection	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND TS= ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR

Database	Boolean search strategy
	picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND TS= ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revisión sistemática" OR metaanálisis OR "meta-análisis" OR "revisión de revisiones" OR "revisión de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
ProQuest	(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND TS= ("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR

Database	Boolean search strategy
	atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND TS= ("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanálisis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
Embase via Ovid	('attention deficit hyperactivity disorder'/exp OR ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND ('eating disorder'/exp OR 'feeding behavior'/exp OR 'eating behavior'/exp OR 'avoidant restrictive food intake disorder'/exp OR 'anorexia nervosa'/exp OR 'bulimia nervosa'/exp OR 'binge eating disorder'/exp OR "eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR

Database	Boolean search strategy
	"compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND ('systematic review'/exp OR 'meta analysis'/exp OR "systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanálisis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
Scopus	TITLE-ABS-KEY(ADHD OR "attention deficit hyperactivity disorder" OR "attention-deficit/hyperactivity disorder" OR "attention deficit disorder" OR "hyperkinetic disorder" OR TDAH OR "trastorno por deficit de atencion e hiperactividad" OR "trastorno por déficit de atención e hiperactividad" OR ADHS OR "Aufmerksamkeitsdefizit-Hyperaktivitätsstörung") AND TITLE-ABS-KEY("eating disorder*" OR "feeding disorder*" OR "feeding and eating disorder*" OR "disordered eating" OR "eating psychopathology" OR EDNOS OR OSFED OR UFED OR "eating disorder not otherwise specified" OR "other specified feeding or eating disorder" OR "unspecified feeding or eating disorder" OR anorexia OR "anorexia nervosa" OR bulimia OR "bulimia nervosa" OR "binge eating disorder" OR "binge-eating disorder" OR "binge eating" OR "loss of control eating" OR "loss-of-control eating" OR "emotional eating" OR "food addiction" OR "Yale Food Addiction Scale" OR grazing OR snacking OR nibbling OR "night eating" OR "night eating syndrome" OR "food craving" OR overeating OR "compulsive eating" OR "uncontrolled eating" OR "impulsive eating" OR "external eating" OR "hedonic eating" OR "picky eating" OR "selective eating" OR "fussy eating" OR "food fussiness" OR "food neophobia" OR ARFID OR "avoidant

Database	Boolean search strategy
	restrictive food intake disorder" OR pica OR "rumination disorder" OR "restrictive eating" OR "restrained eating" OR "dietary restraint" OR purging OR vomit* OR "self-induced vomiting" OR laxative* OR diuretic* OR fasting OR "compensatory behaviour*" OR "compensatory behavior*" OR "excessive exercise" OR "compulsive exercise" OR "driven exercise" OR "insulin omission" OR "insulin restriction" OR "insulin misuse" OR "trastorno alimentario" OR "trastornos alimentarios" OR "trastorno de la conducta alimentaria" OR "trastornos de la conducta alimentaria" OR TCA OR "conducta alimentaria" OR "alimentacion desordenada" OR "alimentación desordenada" OR "anorexia nerviosa" OR "bulimia nerviosa" OR "trastorno por atracon" OR "trastorno por atracón" OR atracon* OR atracón* OR "perdida de control" OR "pérdida de control" OR "alimentacion emocional" OR "alimentación emocional" OR "adiccion alimentaria" OR "adicción alimentaria" OR picoteo OR "ingesta nocturna" OR "alimentacion nocturna" OR "alimentación nocturna" OR "craving alimentario" OR antojo* OR "alimentacion selectiva" OR "alimentación selectiva" OR "alimentación restrictiva" OR "restricción alimentaria" OR Essstörung* OR "gestörtes Essverhalten" OR Magersucht OR Bulimie OR "Binge-Eating-Störung" OR Essanfälle OR "Kontrollverlust beim Essen" OR "emotionales Essen" OR Esssucht OR Nahrungssucht OR Naschen OR Heißhunger OR "selektives Essverhalten" OR "restriktives Essverhalten") AND TITLE-ABS-KEY("systematic review*" OR meta-analy* OR metaanaly* OR "overview of reviews" OR "overview of systematic reviews" OR "umbrella review*" OR "review of reviews" OR "revisión sistemática" OR "revision sistematica" OR metaanalysis OR "meta-análisis" OR "revisión de revisiones" OR "revision de revisiones" OR "revisión paraguas" OR "systematische Übersichtsarbeit*" OR "systematische Review*" OR Metaanaly* OR "Meta-Analy*")
PROSPERO	((("ADHD") OR ("attention deficit hyperactivity disorder") OR ("attention-deficit/hyperactivity disorder"))) AND ((("eating disorder*") OR ("disordered eating") OR ("eating psychopathology") OR ("anorexia") OR ("bulimia") OR ("binge eating") OR ("emotional eating") OR ("food addiction") OR ("night eating") OR ("food craving") OR ("restrictive eating") OR ("selective eating") OR ("picky eating") OR ("ARFID"))

Table 1. Boolean Search Strategies by Database

Appendix A. PRISMA-P Checklist

Section and topic	Item No	Checklist item	Page
ADMINISTRATIVE INFORMATION			
Title:			
Identification	1a	Identify the report as a protocol of a systematic review	1,5
Update	1b	If the protocol is for an update of a previous systematic review, identify as such	
Registration	2	If registered, provide the name of the registry (such as PROSPERO) and registration number	2,6
Authors:			
Contact	3a	Provide name, institutional affiliation, e-mail address of all protocol authors; provide physical mailing address of corresponding author	1,2
Contributions	3b	Describe contributions of protocol authors and identify the guarantor of the review	3
Amendments	4	If the protocol represents an amendment of a previously completed or published protocol, identify as such and list changes; otherwise, state plan for documenting important protocol amendments	
Support:			
Sources	5a	Indicate sources of financial or other support for the review	2,3
Sponsor	5b	Provide name for the review funder and/or sponsor	2,3
Role of sponsor or funder	5c	Describe roles of funder(s), sponsor(s), and/or institution(s), if any, in developing the protocol	2,3
INTRODUCTION			
Rationale	6	Describe the rationale for the review in the context of what is already known	7,8
Objectives	7	Provide an explicit statement of the question(s) the review will address with reference to participants, interventions, comparators, and outcomes (PICO)	8
METHODS			

Section and topic	Item No	Checklist item	Page
Eligibility criteria	8	Specify the study characteristics (such as PICO, study design, setting, time frame) and report characteristics (such as years considered, language, publication status) to be used as criteria for eligibility for the review	9
Information sources	9	Describe all intended information sources (such as electronic databases, contact with study authors, trial registers or other grey literature sources) with planned dates of coverage	10,11
Search strategy	10	Present draft of search strategy to be used for at least one electronic database, including planned limits, such that it could be repeated	12
Study records:			12,13
Data management	11a	Describe the mechanism(s) that will be used to manage records and data throughout the review	12,13
Selection process	11b	State the process that will be used for selecting studies (such as two independent reviewers) through each phase of the review (that is, screening, eligibility and inclusion in meta-analysis)	13
Data collection process	11c	Describe planned method of extracting data from reports (such as piloting forms, done independently, in duplicate), any processes for obtaining and confirming data from investigators	13
Data items	12	List and define all variables for which data will be sought (such as PICO items, funding sources), any pre-planned data assumptions and simplifications	15
Outcomes and prioritization	13	List and define all outcomes for which data will be sought, including prioritization of main and additional outcomes, with rationale	17
Risk of bias in individual studies	14	Describe anticipated methods for assessing risk of bias of individual studies, including whether this will be done at the outcome or study level, or both; state how this information will be used in data synthesis	18
Data synthesis	15a	Describe criteria under which study data will be quantitatively synthesised	19
	15b	If data are appropriate for quantitative synthesis, describe planned summary measures, methods of handling data and methods of combining data from studies, including any planned exploration of consistency (such as I^2 , Kendall's τ)	19,20

Section and topic	Item No	Checklist item	Page
	15c	Describe any proposed additional analyses (such as sensitivity or subgroup analyses, meta-regression)	21,22
	15d	If quantitative synthesis is not appropriate, describe the type of summary planned	
Meta-bias(es)	16	Specify any planned assessment of meta-bias(es) (such as publication bias across studies, selective reporting within studies)	21,22
Confidence in cumulative evidence	17	Describe how the strength of the body of evidence will be assessed (such as GRADE)	22

Notes

Short Title: ADHD and Eating-Related Psychopathology: Overview Protocol

Registration: PROSPERO CRD420261464200

Statements and Declarations

Funding

This review is funded by Abbott. The funding includes consultancy fees to FV for methodological advice, scientific writing, and analysis. The funder will have no role in the development of the protocol, study selection, data extraction, risk-of-bias assessment, data analysis, interpretation of findings, manuscript writing, decision to submit, or choice of journal. The authors will retain full independence and responsibility for the design, conduct, interpretation, and reporting of the review.

Potential Competing Interests

FV has received consultancy fees from Abbott and holds minor shares in TEVA, Eli Lilly, Aztra Zeneca, Colagate-Palmolive, Pfizer, Abbot, Novo Nordisk, and United Health Group. MA has received consultancy, workshop, and speaker fees from Abbott. RP has received consultancy, workshop, and speaker fees from Abbott. AZ has received speaker fees from Merck and Teva. VNO has received speaker fees from Abbott.

The remaining authors declare no competing interests. All competing interests will be managed through transparent reporting, independent duplicate screening and extraction, and independent methodological appraisal.

Author Contributions

MA, AZ and FV conceived the study and led the development of the protocol. FV, MA, AZ, VNO, RP, and FD contributed to the methodological design, eligibility criteria, planned search strategy, data extraction framework, and synthesis plan. FV, VNO will contribute to screening, full-text assessment, data extraction, methodological quality assessment, risk-of-bias assessment, certainty-of-evidence assessment, and primary study overlap assessment. AZ, MA, RP, FD will contribute clinical, psychiatric, psychological, epidemiological, and/or eating-disorders expertise to the interpretation of findings. All authors critically reviewed the protocol, approved the final version, and agree to be accountable for the accuracy and integrity of the work.

Data Availability

Data extraction forms, analytic code, overlap matrices, risk-of-bias assessments, and summary tables generated during the review will be made available upon reasonable request and, where feasible, deposited in an open-access repository at the time of publication.

Ethics

Ethics committee approval is not required because this study will synthesize data from previously published systematic reviews and meta-analyses and will not involve individual participant data.

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Declarations

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extraction, risk-of-bias assessment, data analysis, interpretation, manuscript preparation, the decision to submit, or journal selection. The authors retain full independence and responsibility for the conduct and reporting of the review.

Potential competing interests: FV has received consultancy fees from Abbott and holds minor shares in Teva, Eli Lilly, AstraZeneca, Colgate-Palmolive, Pfizer, Abbott, Novo Nordisk, and UnitedHealth Group. MA and RP have received consultancy, workshop, and speaker fees from Abbott. AZ has received speaker fees from Merck and Teva. VNO has received speaker fees from Abbott. The remaining author declares no competing interests. All competing interests will be managed through transparent reporting, independent duplicate study selection and data extraction, and independent methodological appraisal.