

## Review of: "Obesity and life events: the hypothesis of psychological phenotypes"

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Potential competing interests: No potential competing interests to declare.

## Obesity and life events: the hypothesis of psychological phenotypes

The article offers an interesting clinical perspective on the role that traumatic life events have on the development of obesity and on the identification of phenotypes of patients based on their characteristics and its focus for treatment planning.

In general, I would suggest to better clarify the aim of the entire paper: is it a review of literature (non-systematic review of the literature) or is it an empirical study?

Indeed, at a first sight, this article seems to be a report of the literature on psychological factors associated with obesity, with a specific focus on traumatic events. However, in the paragraph "Individual differences in Obesity history" the author reports the findings obtained through clinical interviews that allowed to identify two subgroups of patients with obesity: those who have always been obese and those who have always had a normal weight and then became obese following specific life events. These clinician observations are very interesting, but it is not clear from where they come. Is it a study that the author conduced? Or is it a reference from which the authors take the data from? Furthermore, the methodology behind this study it is however disregarded. So please specify in particular this paragraph. In case instead these data have been collected by the author, please clarify the aim of the study an explain a bit more in detail the methodology that has been used in this empirical study.

Other specific revisions can be found below:

- In the introduction paragraph, when reporting the definition of obesity based on the World Health Organization, the reference is missing in the text (even though it is reported in the references list).
- In the same paragraph, when describing the role that specific social factors might have in the development of obesity, in particular the social pressure to finish a plate of food, it might be useful for the reader to have a more specific



- example of it, as it is not really clear from the sentence what it means ("complex social pressures that can begin in childhood with the need to finish a plate of food and continue throughout life and can make healthy choices difficult").
- In the following paragraph ("the myth of obesity psychological patterns") the author explains the attempts that researches have done in the past to identify psychological factors associated with obesity, firstly citing the psychoanalytic approach and then moving to the systemic-relational and the cognitive-behavioral perspectives. It is not clear, however, when it is stated that "the aim of *the authors* was to formulate psychogenetic hypotheses of obesity...", to which authors she is referring to and to which approach (the psychoanalytic, the systemic-relational or the cognitive-behavioral?).
- As a general observation that applies for the entire paper, further references are needed to support the reported evidences. Some examples: in the paragraph "the myth of obesity psychological patterns" the author refers to some empirical studies of the first generation, without reporting references on these studies; in the same paragraph (page 3), again the author refers to "some studies" that showed that individuals with obesity suffer more than individuals who have a normal weight, but these studies are not cited; in the paragraph "obesity, life stressors and emotional abuse" (page 6) it is stated: "several authors have hypothesized that emotional eating may be a coping response to..." and also in this case references are missing.
- when talking about normal and high BMI it might be useful for the reader to have the thresholds of the BMI levels for obesity (i.e. first, second, and severe stage of obesity), this particularly applies when describing the four types of obesity phenotypes at page 4.
- It could be interesting to refer and report if available data about the relation between life events, Post-traumatic stress
   Disorder (PTSD) and Obesity, in particular in those patients with binge eating.
- When using abbreviations (such as BMR, NIH, CBT-ob, DBT, EMDR etc.), the authors should use the entire word
  when referring to it for the first time, and then use the abbreviation, as some readers might not be familiar with some of
  these words/concepts.

Qeios ID: GHPT8W · https://doi.org/10.32388/GHPT8W