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### **Orthorexic Tendencies, Sociodemographic Characteristics, and Nutritional Behaviors among University Students**

## Üniversite Öğrencileri Arasında Sosyodemografik Özellikler, Beslenme Davranışları ve Ortoreksik Eğilimler

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| **Article Information** | **ABSTRACT** |
| *Received*: xxxxxxxx (Blank)  *Accepted*: xxxxxxxxx  (Blank) | Orthorexia Nervosa (ON) is a condition characterized by an obsession with healthy eating and strict adherence to a diet perceived as healthy. The number of studies regarding the incidence and etiology of ON is limited. It is known that people are a ground breaking factor for mental and physical health problems and can negatively affect them, and people belonging to health-related professions are in the risky group. Therefore, it is important to evaluate this situation and to provide the necessary support. Therefore, this study aimed to determine the tendency to Orthorexia Nervosa (ON) and related factors among university students. The study, designed in the cross-sectional type, was carried out with the participation of a total of 816 students. The Orthorexia Nervosa Scale (ORTO 11) was used to evaluate the tendency for ON, and a structured questionnaire designed in line with the literature was used to evaluate the related factors.The mean score that students got from the ORTO 11 scale was 27.24 ± 3.74. The level of ON was determined to be higher among female students and among individuals who did not consume tobacco products and alcohol, who read food labels on food packages, who often preferred organic food, who did not consume fast-food, or who had regular eating habits (p <0.05 for each category). The students were determined to have a tendency for ON and the characteristics of food choice and consumption increase the ON tendency. Identifying the symptoms of ON will be helpful in classifying the disease and developing diagnostic criteria.  **Anahtar Kelimeler:** Orthorexia nervosa, University student |
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| **Makale Bilgisi** | **ÖZ** |
| *Geliş Tarihi*:  Xxxxxxxxx  (Blank)  *Kabul Tarihi*: xxxxxxxxx  (Blank) | Ortoreksiya Nevroza (ON) sağlıklı beslenmeye dair takıntı ve sağlıklı algılanan diyete katı bağlılık ile karakterize bir durumdur. ON’un görülme sıklığı ve etiyolojisine ilişkin çalışma sayısı sınırlıdır. Kişilerin ruhsal ve fiziksel sağlık problemleri için zemin hazırlayıcı bir faktör olduğu ve onları olumsuz yönde etkilemekte ve sağlık ile ilişkili mesleklere mensup kişilerin riskli grupta yer alabileceği bilgisi göz önünde bulundurulduğunda bu durumun değerlendirilmesi ve gerekli desteğin sağlanması önem kazanmaktadır. Bu nedenle bu araştırmanın amacı üniversite öğrencileri arasında Ortoreksiya Nevroza (ON) eğilimini ve ilişkili faktörlerin belirlenmesidir. Kesitsel desende tasarlanan bu çalışma 816 öğrencinin katılımı ile tamamlanmıştır. ON eğiliminin değerlendirilmesi için Ortoreksiya Nervoza Ölçeği (ORTO 11), ilişkili faktörlerinin değerlendirilebilmesi için literatür bilgisi doğrultusunda hazırlanan yapılandırılmış soru formu kullanılmıştır. Öğrencilerin ORTO 11 ölçeğinden aldıkları ortalama puan 27.24±3.74’dır. Kadın öğrencilerde, sigara ve alkol tüketmeyenlerde, ambalajlı gıda alırken üzerindeki bilgilere bakanlarda, tükettikleri gıdaların organik olmasına özen gösterenlerde, fast-food türü yiyecek tüketmeyenlerde ve düzenli yemek yeme alışkanlığı olanlarda ON düzeyinin daha yüksek olduğu saptanmıştır (her biri için; p<0.05).Öğrencilerinin ON eğilimi olduğu, besin seçimi ve tüketimine ilişkin özelliklerin ON eğilimini artırdığı tespit edilmiştir. ON’a ilişkin belirtilerin belirlenmesi, hastalığın sınıflandırılmasında ve tanı kriterlerinin geliştirilmesinde faydalı olacaktır.  **Keywords:** Ortoreksiya nervoza, üniversite öğrencisi |
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#### Introduction

Healthy eating has become the main focus of people living in developed societies due to the growing incidence of obesity, diabetes, hypertension, cardiovascular disorders, osteoarthritis and cancer (Chaki, 2013). People tend to pay attention to the quality, quantity, and type of food they choose so that they can stay healthy and fit (McComb & Mills, 2019). Accordingly, healthy nutrition is an important part of a healthy lifestyle, as well as being an action associated with reducing the risk of chronic diseases and obesity (Hox & De Wit, 2011). Yet, there is a delicate line between selectivity in the type and quality of food to be consumed and developing a psychological obsession to keep fit. Going beyond this delicate line leads to impaired eating patterns and, in extreme cases, results in psychological eating disorders (Chaki, 2013).

Anorexia nervosa and bulimia nervosa are among the most common eating disorders (Akturk, Gul, & Erci, 2019). In addition to these known disorders, there is another disorder, which was first introduced by Steven Bratman (1997) and which has not yet been included in the Diagnostic and Statistical Manual of Mental Disorders 5th Edition: Orthorexia Nervosa (ON) (Dunn & Bratman, 2016; Chaki, 2013).

ON has two stages. The first stage consists of choosing to eat a healthy diet and the second stage involves the transformation of this eating style into an unhealthy obsession. The second stage is a pathological table (S. Bratman, 2017). After a while, a health-related behavior may become unhealthy, life-threatening, and it may negatively affect the physical, mental and social aspects of the person (Şengül, 2019; Brytek-Matera, 2012). Over time, the person tries to persuade those around to follow the same diet, feels guilty while consuming food considered as "unhealthy", is afraid of getting sick, and implements a kind of self-punishment by following an even more limited diet (Lopes, Melo, & Dias Pereira, 2020). Also, the person may conflict with family members in food choices, socialization may become limited, and consequently, negative nutritional outcomes may occur (Dunn & Bratman, 2016).

**Table 2.** Distribution of Students' Scores From ORTO 11 By Some Variables Related to Food Preferences/Consumption

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| Variables related to food preferences/consumption | **n** | **Median of ORTO 11 scores (min.-max.)** | **Test Value z/KW; p** |
| **Reading food labels while buying packaged food** |  |  |  |
| Yes | 721 | 27.0 (15.0-41.0) |  |
| No | 95 | 29.0 (16.0-37.0) | **5.140; 0.001** |
| **Caring for the food consumed to be organic** |  |  |  |
| No | 388 | 28.0 (19.0-37.0) | **7.912; 0.001** |
| Yes | 428 | 26.0 (15.0-41.0) |
| **Consumption of fast food and the like** |  |  |  |
| No | 121 | 27.0 (19.0-34.0) | **3.479; 0.001** |
| Yes | 695 | 27.0 (15.0-41.0) |
| **Eating order** |  |  |  |
| Consistent | 420 | 27.0 (15.0-37.0) | **4.433; 0.001** |
| Inconsistent | 396 | 28.0 (18.0-41.0) |
| **Total** | 816 | 27.0 (15.0-41.0) |  |

**z:** Mann-Whitney U test, **KW:** Kruskal-Wallis, p<0.05

**Subheadings**

Awareness of healthy eating has increased markedly in recent years (Brytek-Matera, 2012). Despite this increase, the incidence of ON (Dunn et al., 2017) and the data associated with risky groups vary (McComb & Mills, 2019). Therefore, the results of the study are expected to contribute to the uncertainty in the field. According to the results of the study, it can be said that students participating in the study had a tendency for ON (Mean ON score: 27.24 ± 3.74). The mean ON score obtained in the present study was similar to those of various studies whose sample consisted of students in the field of health (Cengiz, 2020; Agopyan et al., 2019; Arslantas, 2019; Parra-Fernandez et al., 2018; Duran, 2016; Fidan, Ertekin, Isikay, & Kirpinar, 2010).

In the present study, the relationship between ON and some variables such as gender and age was examined. In the literature, female students have been reported to have a higher tendency for ON compared to male students (Fidan et al., 2010; Sahin & Celik, 2016; Parra-Fernandez et al., 2018). In our study, similar to the literature, female students' tendency for ON was found to be higher compared to that of males. This can be justified by the ideal beauty measures imposed by society especially on girls today (Su et al., 2016; Hacıoğlu, 2017). Another variable that may be a risk factor for ON is age. The young population is stated to be more at risk in terms of ON compared to the older population (Fidan et al., 2010). However, since the majority of ON-related studies have been conducted with individuals in the 20-30 age group, age-related data are not clear (McComb & Mills, 2019). In the current study, no difference was found between ON and age groups. This may be related to the fact that students were in the young population group and that their ages were close to each other.

#### Conclusion and Recommendations

The study revealed the tendency of students for ON and ON-related factors. Determination of obsessional concerns of orthorexic individuals will be useful in the classification of the disease and development of diagnostic criteria. With this respect, we recommend that similar studies with different variables should be carried out with an experimental/quasi- experimental research design, and risk groups should be supported in light of results obtained.

#### Conflict of Interest

There is no conflict of interest.

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#### Authors’ contributions:

ÖÇ: Conception, design, literature review, data collection, writing, critical review. AÜ: Design, analysis. EU: Data processing, literature review and interpretation, editing

**References**

Adriaanse, M. A., Vinkers, C. D., De Ridder, D. T., Hox, J. J., & De Wit, J. B. (2011). Do implementation intentions help to eat a healthy diet? A systematic review and meta-analysis of the empirical evidence. *Appetite*, *56*(1), 183-193. doi: <https://doi.org/10.1177/0146167208325612>

Agopyan, A., Kenger, E. B., Kermen, S., Ulker, M. T., Uzsoy, M. A., & Yetgin, M. K. (2019). The relationship between orthorexia nervosa and body composition in female students of the nutrition and dietetics department. *Eat Weight Disorder*, *24*(2), 257- 266. doi: <https://doi.org/10.1007/s40519-018-0565-3>

Bratman, S. (2017). Orthorexia vs. theories of healthy eating. *Eat Weight Disorder*, *22*(3), 381-385. doi: [https://doi.org/10.1007/s40519- 017-0417-6](https://doi.org/10.1007/s40519-%20017-0417-6)

Brytek-Matera, A. (2012). Orthorexia nervosa–an eating disorder, obsessive-compulsive disorder or disturbed eating habit. *Archives of Psychiatry and psychotherapy*, *1*(1), 55-60.

Donini, L. M., Marsili, D., Graziani, M. P., Imbriale, M., & Cannella, C. (2005). Orthorexia nervosa: validation of a diagnosis questionnaire. *Eat Weight Disorder*, *10*(2), e28-32. doi: <https://doi.org/10.1007/BF03327537>

Dunn, T. M., & Bratman, S. (2016). On orthorexia nervosa: A review of the literature and proposed diagnostic criteria. *Eat Behaviors*, *21*, 11-17. doi: <https://doi.org/10.1016/j.eatbeh.2015.12.006>

Dunn, T. M., Gibbs, J., Whitney, N., & Starosta, A. (2017). Prevalence of orthorexia nervosa is less than 1 %: data from a US sample. *Eat Weight Disorder*, *22*(1), 185-192. doi: <https://doi.org/10.1007/s40519-016-0258-8>

Fidan, T., Ertekin, V., Isikay, S., & Kirpinar, I. (2010). Prevalence of orthorexia among medical students in Erzurum, Turkey.

Grunert, K. G., Wills, J. M., & Fernandez-Celemin, L. (2010). Nutrition knowledge, and use and understanding of nutrition information on food labels among consumers in the UK. *Appetite*, *55*(2), 177-189. doi: <https://doi.org/10.1016/j.appet.2010.05.045>

McComb, S. E., & Mills, J. S. (2019). Orthorexia nervosa: A review of psychosocial risk factors. *Appetite*, *140*, 50-75. doi: <https://doi.org/10.1016/j.appet.2019.05.005>