Binge Eating and Social Media Addiction Are Linked in Adolescents



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The strongest association with binge eating was found in participants with a consistently high social media addiction score.

Adolescents with higher levels of social media addiction (SMA) are at an elevated risk for binge eating (BE), according to findings published in *Obesity*.

To explore potential BE triggers, researchers evaluated whether SMA and general social media usage time (SMT) influence the onset of BE. They also assessed the roles of sex and body mass index (BMI) as moderators.

The current longitudinal study utilized data from the Adolescent Brain Cognitive Development Study. Researchers collected baseline demographics from children aged 9 to 10 across 2-year, 3-year, and 4-year follow ups (Waves 1-3). SMA was measured using a 6-item survey adapted from the Bergen Facebook Addiction Scale, while BE was assessed through self-reports and parent reports using the Kiddie Schedule for Affective Disorders and Schizophrenia. Statistical models, including modified Poisson regression, were used to adjust for demographic and behavioral factors.

In the final study sample, there were 1940 participants with a mean (SD) age of 11.6 (0.50). Of these, 54.9% were girls, 49.5% were white, and 30.5% came from a household with an annual income less than \$50,000. Additionally, 40.4% were considered overweight or obese and 85.8% did not meet recommended physical activity levels.

Managing addictive behaviors rather than focusing solely on SMT may be particularly beneficial, especially for male adolescents, and effects may also differ by body weight.

Study participants were organized by BE profile: no BE at both waves 1 and 3, n=1538; developed BE, n=153; remitted from BE, n=165; and persistent BE, n=84. Over the three years, all profiles showed increased social media usage with daily usage time doubling by Wave 3 compared to Wave 1. All four BE profiles showed usage peaks during Wave 2 while persistent BE increased the most from 1.3 h/day to 3.3 h/day during Waves 1 and 3 respectively.

Results revealed a strong link between SMA and BE, with adolescents exhibiting SMA nearly twice as likely to develop BE symptoms over time (relative risk [RR] 1.90; 95% CI 1.10 to 3.27). The association was more pronounced in boys and those with higher baseline <u>BMI</u>. In contrast, general SMT did not correlate with BE risk, suggesting that problematic <u>behavioral patterns</u>, rather than screen time alone, are the primary drivers.

Further analysis categorized participants into 4 SMA trajectory groups over the study period: consistently low, decreased, increased, and consistently high. Adolescents in the consistently high SMA group showed the greatest risk for BE at follow-up (RR 3.01; 95% CI 2.07 to 4.37). Participants who experienced changes in SMA, whether an increase or decrease over time, faced heightened risks, highlighting the enduring impact of past problematic behaviors.

"Managing addictive behaviors rather than focusing solely on SMT may be particularly beneficial, especially for male <u>adolescents</u>, and effects may also differ by <u>body weight</u>," the researchers concluded.

The study's limitations include potential biases from self-reported data, a lack of diversity in the sample, and limited exploration of the content consumed on social media.

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