



Press Release: New Research Shows Perfectionists Troubled by Bulimia

HALIFAX, NS - Researchers at Dalhousie University in Halifax have uncovered an important link between perfectionism and bulimia.

A [study](#) conducted by Ivy-Lee Kehayes, a Ph.D. Student in Dalhousie University's Clinical Psychology program, and by Dr. Simon Sherry, a Professor in Dalhousie University's Department of Psychology and Neuroscience, offers the most complete test of the link between perfectionism and bulimia nervosa to date.

"Our results suggest treating perfectionism as early as possible may help to stop the development of bulimia nervosa," says Dr. Sherry, who is also a practicing clinical psychologist. "Since bulimia nervosa is widespread and destructive, uncovering factors that lead to bulimia nervosa is essential."

To get a complete picture of whether perfectionism leads to bulimia nervosa, the Dalhousie researchers conducted a meta-analysis of 12 longitudinal studies totalling 4,665 participants. Most study participants were female (86.8 per cent) and included adolescents, undergraduates, and community-dwelling adults, with an average age of 19.

"We showed perfectionism predicted increases in bulimia nervosa, even after controlling for baseline levels of bulimia nervosa," says Kehayes. "This suggests perfectionists are prone to developing bulimia nervosa. In fact, our results indicate perfectionism is centrally important to the personality of people who go on to develop bulimia nervosa."

About 1.5 per cent of girls or women (or 275,000 Canadian females) will have bulimia nervosa at some point in their life (Hudson et al., 2007). At least 80 per cent of individuals with bulimia nervosa are female. Bulimia nervosa typically onsets between age 16 and 20 and lasts for more than eight years before symptoms remit (van Son et al., 2006).

Individuals with bulimia nervosa often develop serious medical problems such as electrolyte imbalances or tooth decay (Brown & Mehler, 2017). Serious psychological problems, such as depression, posttraumatic stress disorder, and alcohol misuse, frequently accompany bulimia nervosa. About two per cent of individuals with bulimia nervosa die per decade, and about one in five deaths in bulimia nervosa are due to suicide (Smink et al., 2013).

Dr. Sherry says it's a dog-eat-dog world today.

"We've got controlling and hyper-competitive helicopter parents. And in society at large, self-interest and winning are emphasized. Your rank and your performance matter more than ever," says Dr. Sherry. "These conditions are rife for developing perfectionism. So, it's not surprising I treat more and more perfectionism-linked cases of bulimia nervosa in my office each week."

Dr. Sherry says that building on his team's research, clinicians may want to assess and to treat

both bulimic symptoms (e.g., vomiting) and underlying perfectionism (e.g., self-criticism).

“It’s time to go beyond entirely symptom-focused treatments of bulimia and to develop more encompassing treatments that consider whether underlying personality traits drive patterns of bulimia nervosa,” concludes Dr. Sherry. “About 25 per cent of individuals with bulimia nervosa develop chronic, hard-to-treat symptoms that last for many years. Clearly, more research is needed to understand and to defeat bulimia nervosa.”

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