

Sexual and Gender Minority Individuals Present with Higher Rates of Presumptive PTSD in a Residential Treatment Setting for Eating Disorders

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BACKGROUND AND RATIONALE

- Trauma histories and resultant posttraumatic stress disorder (PTSD) and its symptoms are strongly associated with eating disorders (EDs), which are known to occur across all sexual orientations and gender identities.
- Prior traumas and PTSD have also been reported to occur significantly more frequently in individuals identifying as lesbian, gay, bisexual, transgender, queer or questioning, non-binary, or other (LGBTQ+).
- Although higher rates of traumatic events and PTSD have been reported to occur in individuals presenting to higher levels of ED care, little is known about rates of PTSD and related comorbidity in LGBTQ+ individuals with EDs.

METHODOLOGY

- A sample of 570 adults with DSM-5 EDs admitted to residential treatment (RT) gave informed consent and completed a series of validated assessments:
 - Eating Disorder Examination Questionnaire (EDE-Q)
 - Eating Disorder Inventory-2 (EDI-2)
 - Patient Health Questionnaire (PHQ-9)
 - Spielberger State-Trait Anxiety Inventory (STAI)
 - Eating Disorder Quality of Life (EDQOL) scale
- The rates of current presumptive PTSD (PTSD+) and no PTSD (PTSD-) by LGBTQ+ status were determined by responses on the Life Events Checklist (LEC-5) for criterion A and the PTSD Symptom Checklist for DSM-5 (PCL-5) for criteria B-E.
- This research project was approved by the Salus IRB.

RESULTS

- Nearly 25% of individuals self-reported as LGBTQ+.
- ED diagnoses significantly differed across the groups (see Figure 1) with the LGBTQ+ group having lower rates of AN-R and higher rates of OSFED ($\chi^2 < .003$).
- The PCL-5 total scores were significantly higher in the LGBTQ+ group (41.9 ± 18.9) than the non-LGBTQ+ group (34.0 ± 20.8 , $t=4.0$, $p \leq .001$) (Figure 2).
- Rates of presumptive PTSD were higher in the LGBTQ+ group ($.63 \pm .48$) compared to the non-LGBTQ+ group ($.45 \pm .50$, $t=-3.58$, $p \leq .001$) (Figure 3).
- The LGBTQ+ group also had significantly higher scores on the EDEQ (Figure 4), EDI-II (Figure 5), the PHQ-9 (Figure 6), and the STAI-Trait (Figure 7) but not the STAI-State or the EDQOL.

RESULTS (CONTINUED)

Figure 1

ED Diagnoses by LGBTQ+ Status

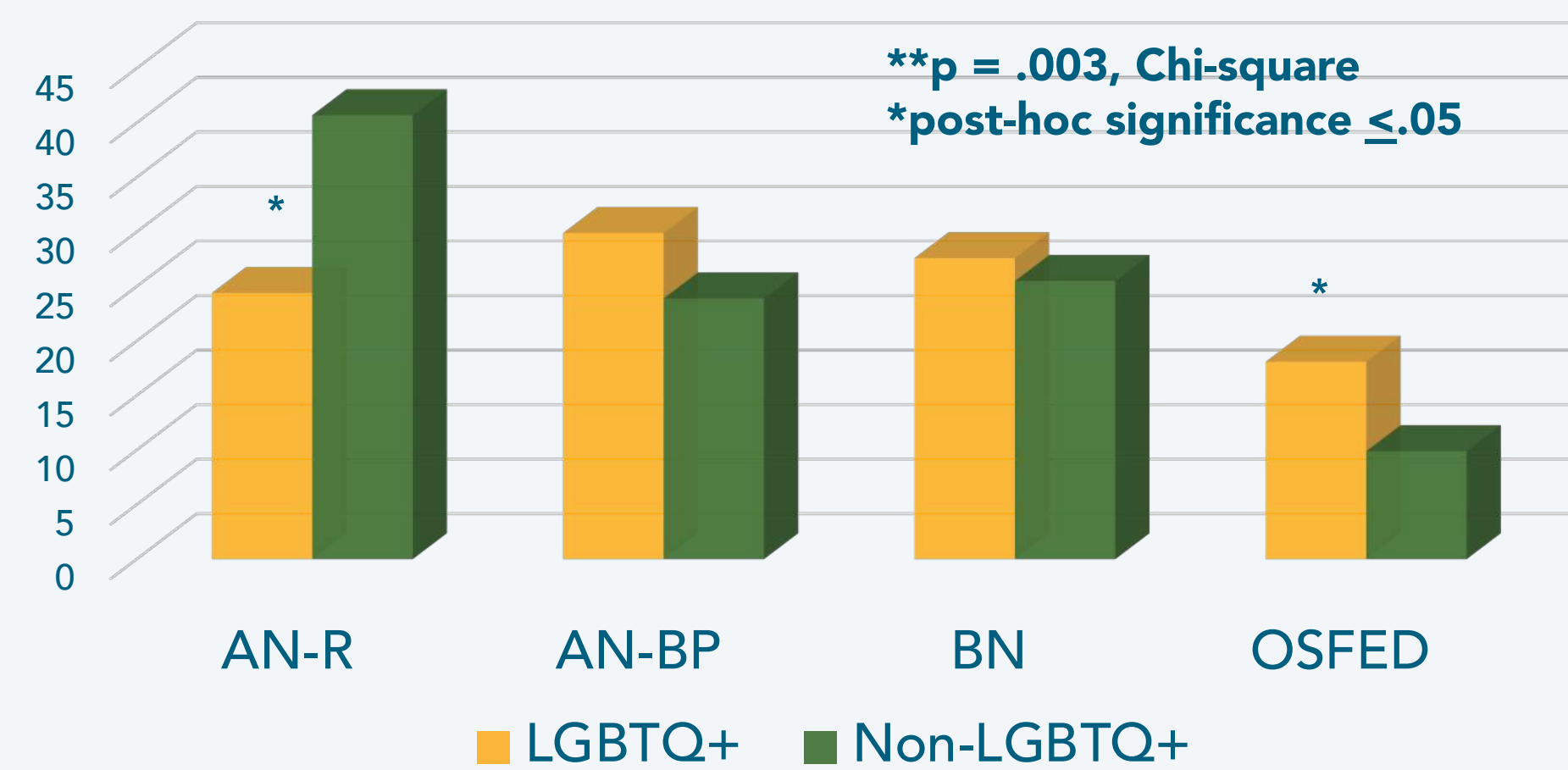


Figure 2

PCL-5 Total Score

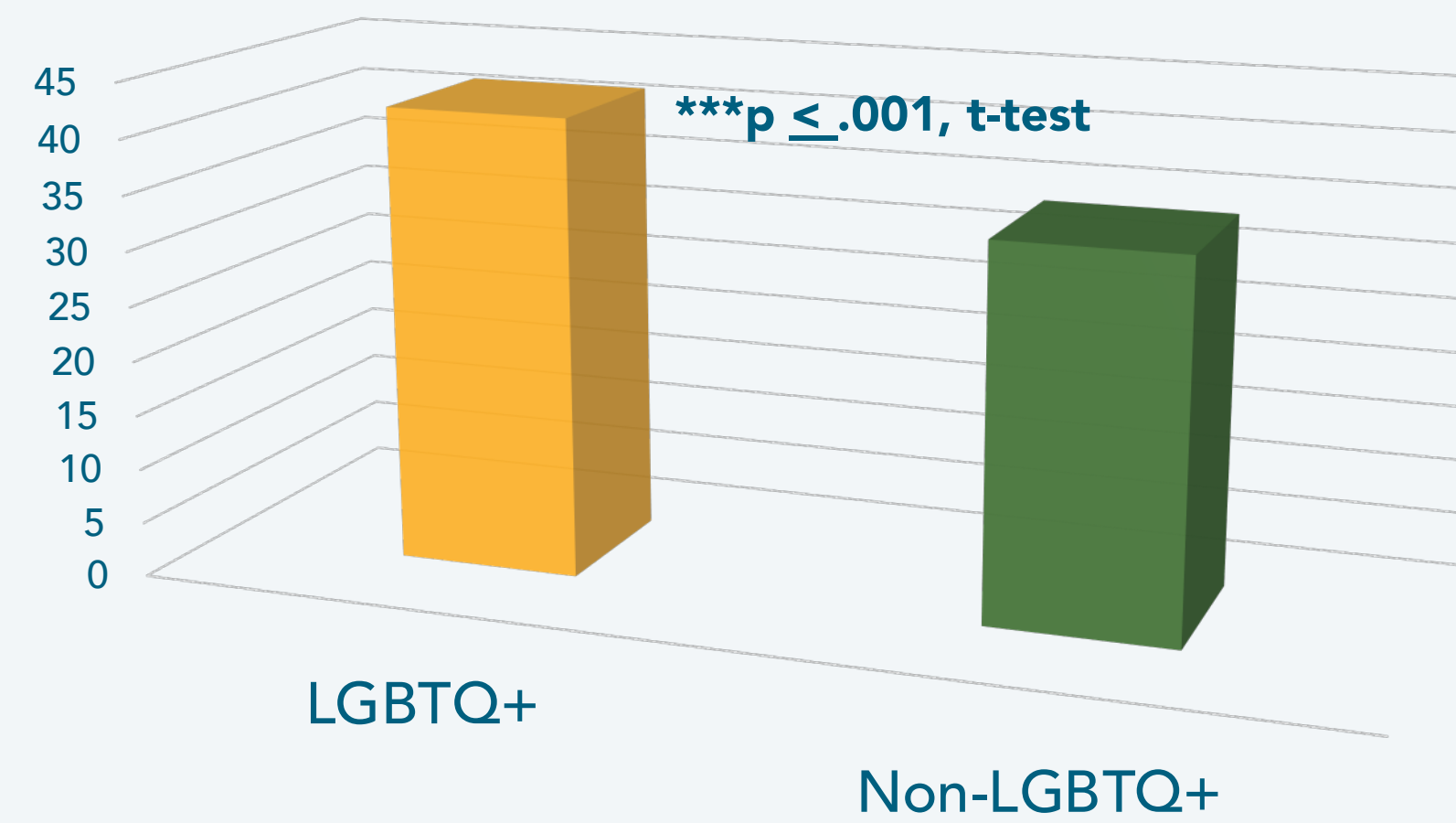


Figure 3

Per Cent with PTSD+ v. PTSD-

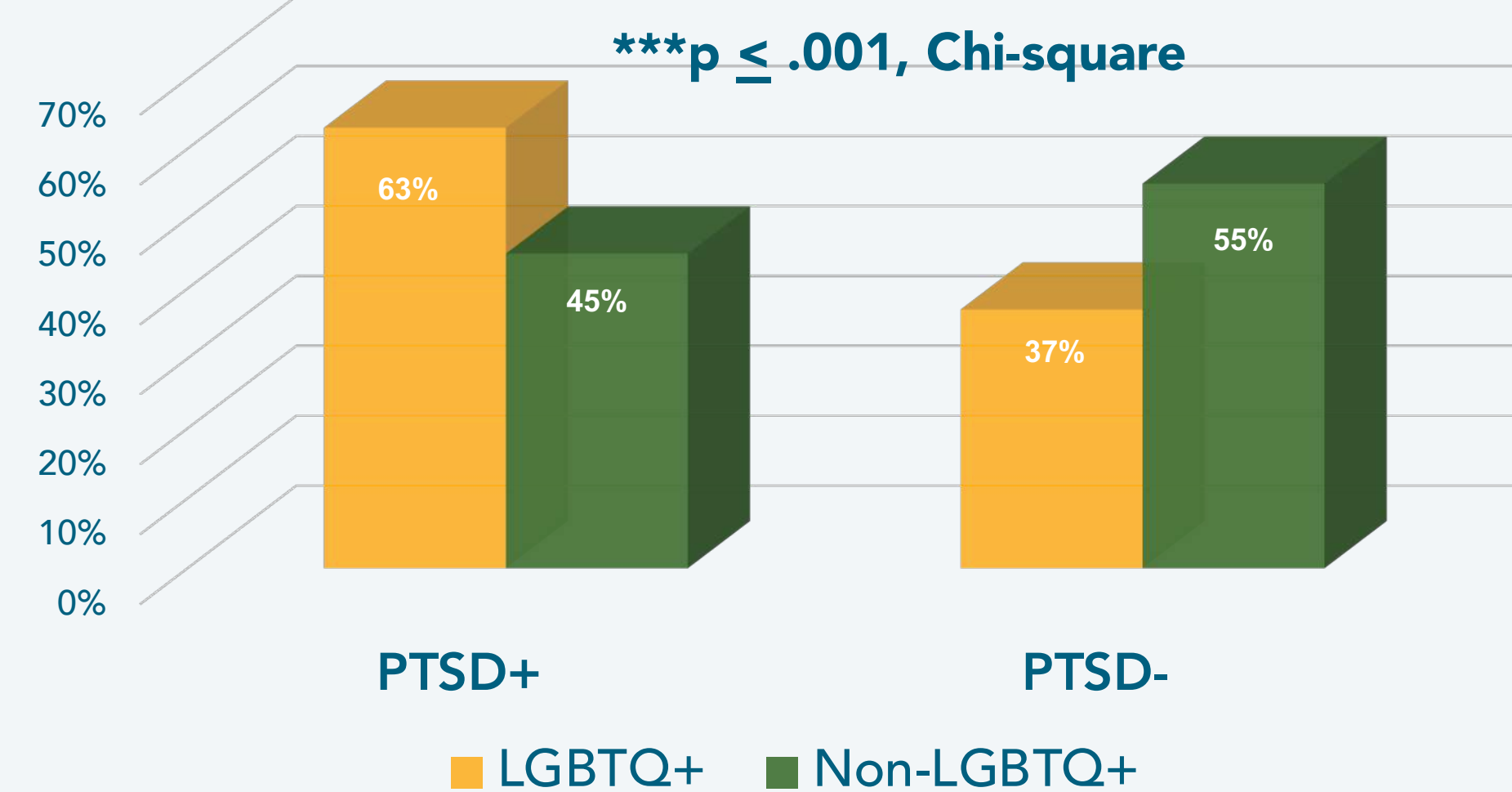


Figure 3

EDEQ Global Score

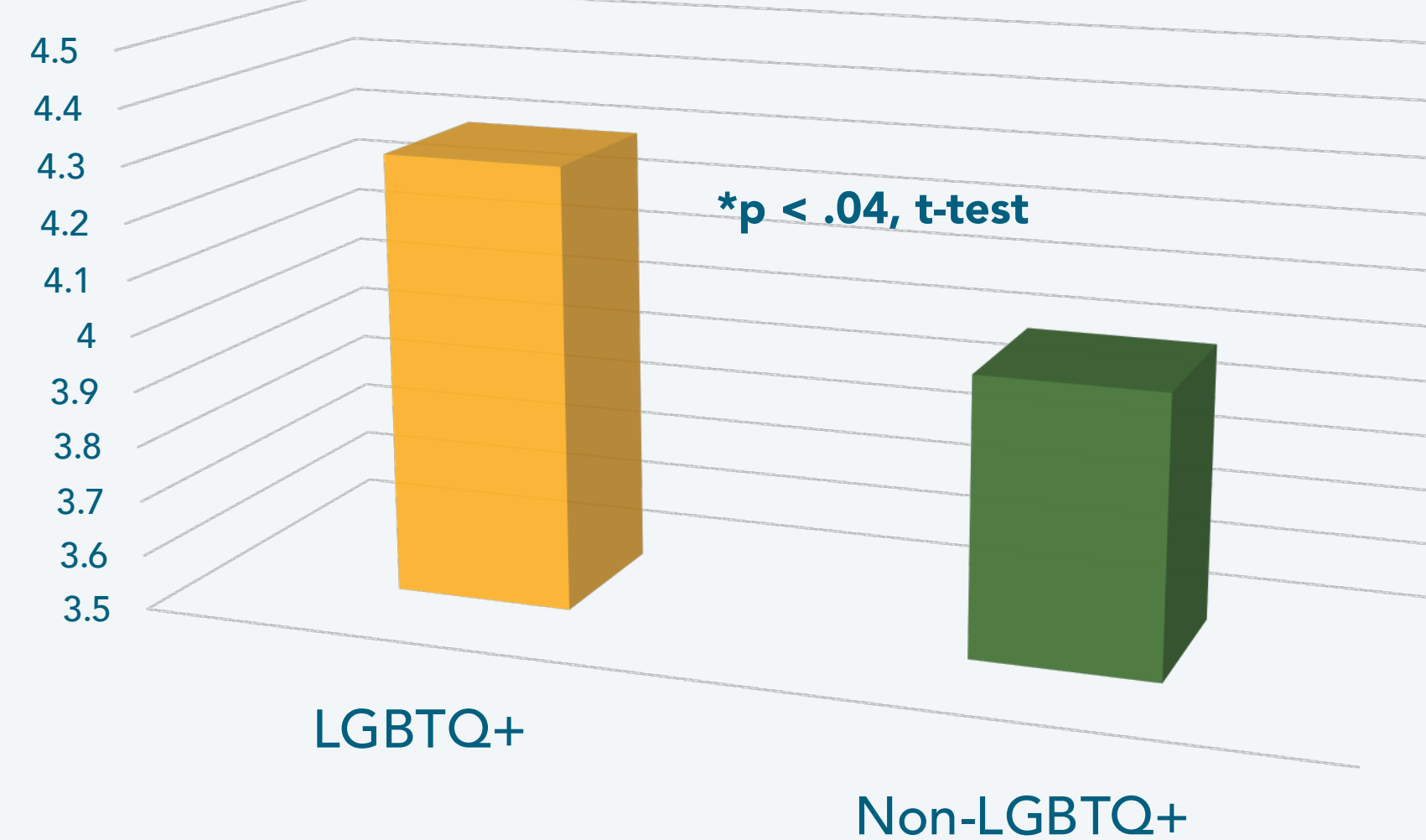


Figure 5

EDI-II Total Score

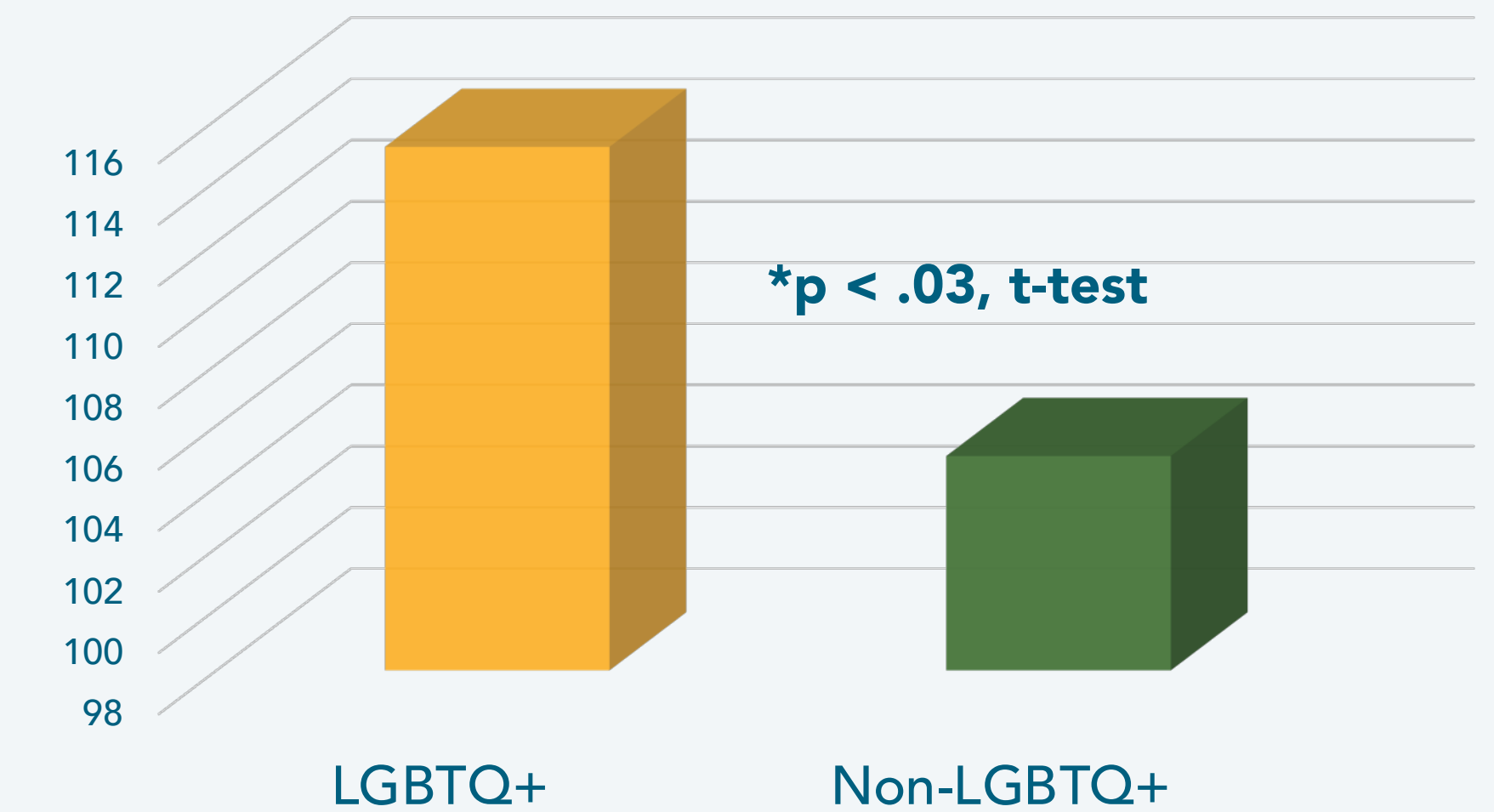


Figure 6

PHQ-9 Score

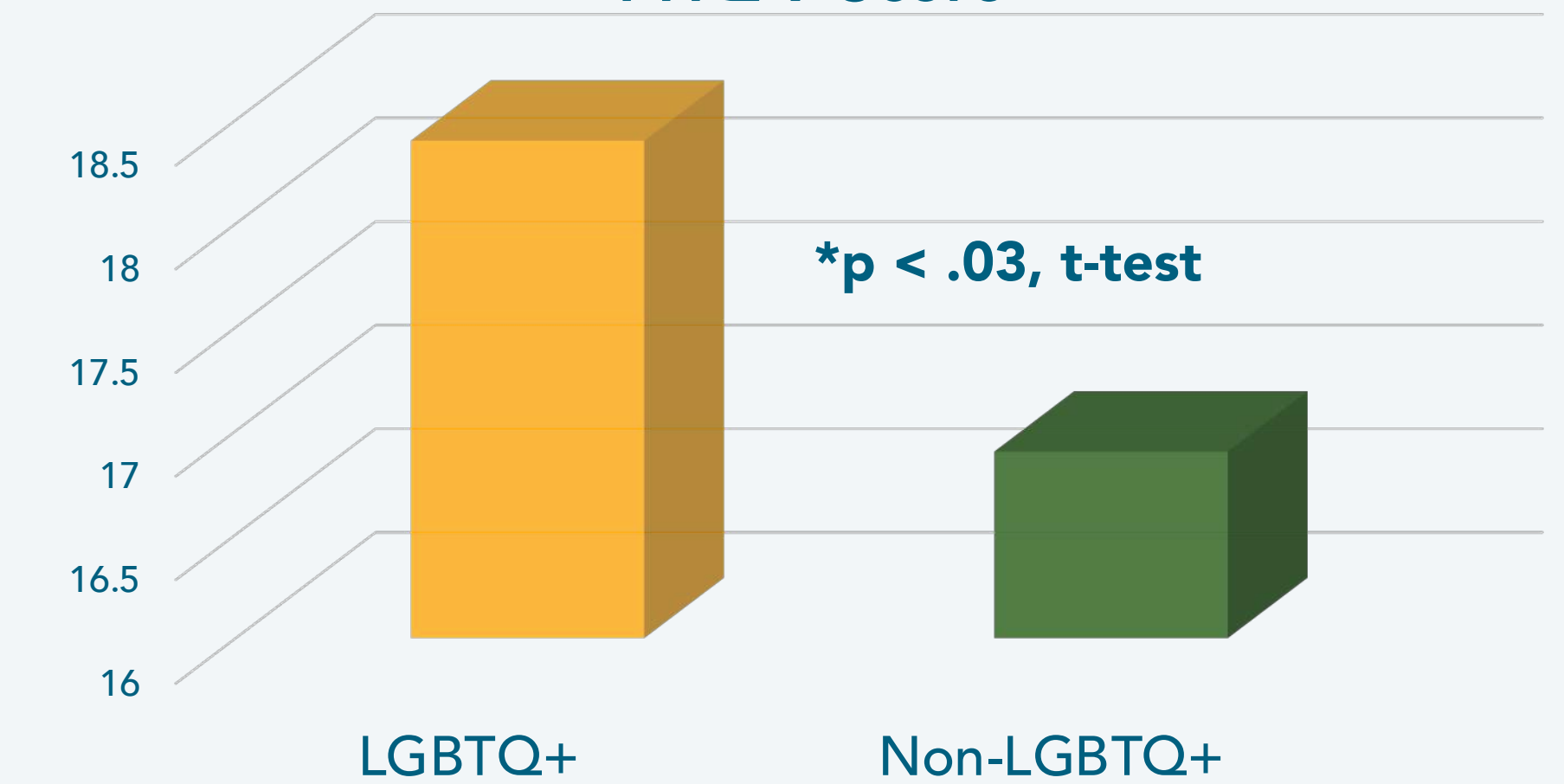
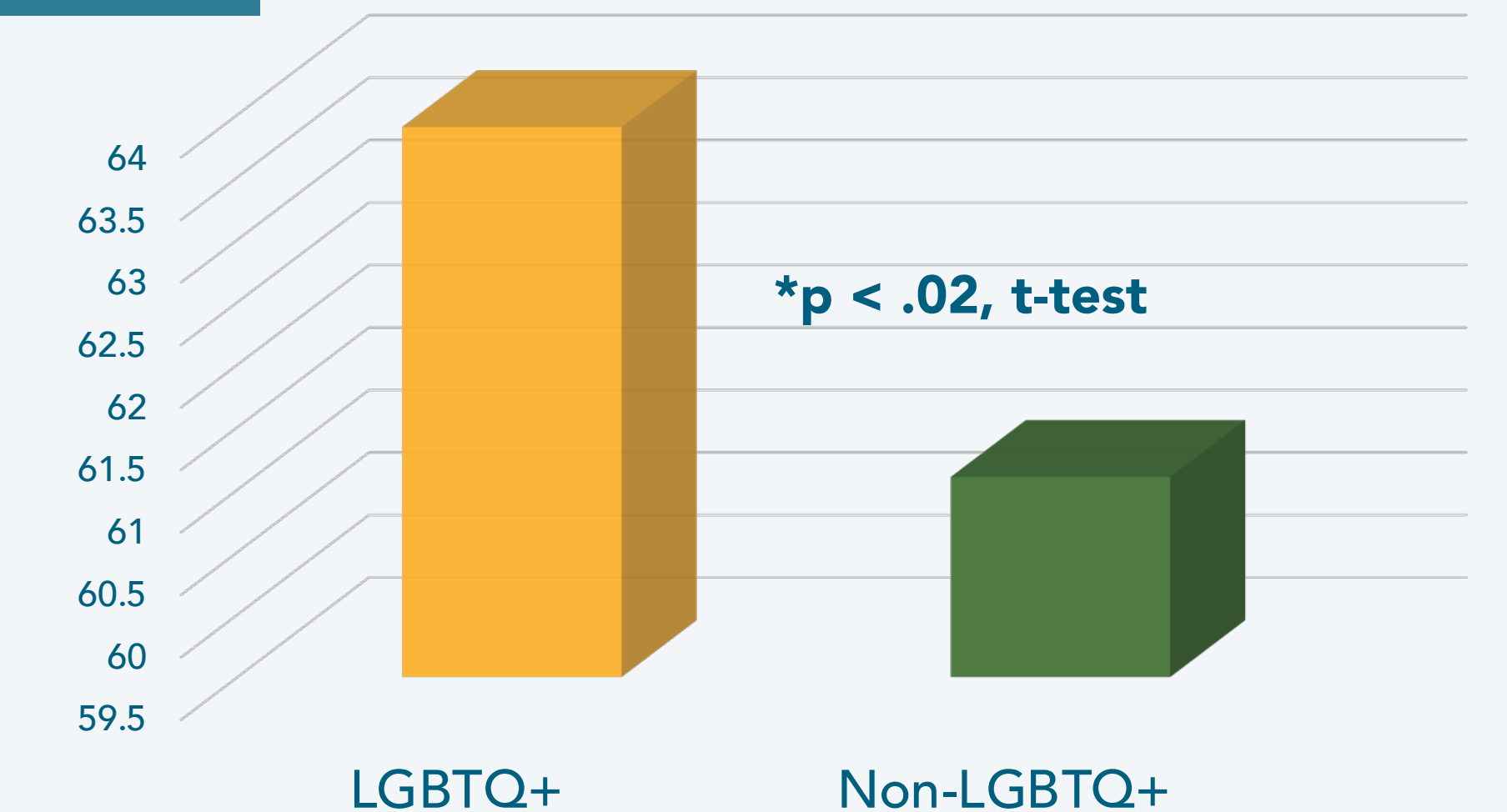


Figure 7

STAI-Trait Score



CONCLUSIONS

- Individuals with EDs admitted to RT who identify as LGBTQ+ had significantly higher scores on the PCL-5 as well as significantly higher prevalence rates (63%) of presumptive current PTSD when compared to cisgender heterosexual individuals (45%).
- The LGBTQ+ group also reported greater severity of ED, depressive, and trait anxiety symptoms.
- These findings add to the literature calling for the development, implementation, and assessment of integrated treatment protocols for ED-PTSD+.
- In addition, trauma-informed treatment approaches that address the specific needs of LGBTQ+ individuals indicated.