German Version of the Yale Food Addiction Scale

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INTRODUCTION

Excessive food consumption of a particular or several foods is often described as being addictive. Indeed, several parallels have been identified between binge-related eating disorders and substance dependence (1). For instance, (2) investigated how applicable diagnostic criteria for substance dependence are to patients with binge eating disorder and found that almost all participants could be diagnosed as addicted, when the word “substance” was substituted by “binge eating”. Recently, a questionnaire to measure food addiction was introduced (3), based on the diagnostic criteria of substance dependence. The current study presents a validated German version of this Yale Food Addiction Scale (YFAS).

METHOD

An online survey was conducted which was visited 1255 times. A total sample of \(N = 752\), predominantly students, completed the entire study (77% women). Mean age was \(M = 23.1\) years (Range = 16-45 years). Convergent validity was tested by means of correlations with other measures of dysfunctional eating behavior. Discriminant validity was evaluated by comparisons with related, but discrete constructs (alcohol consumption, impulsivity, behavioral inhibition/activation system). A hierarchical regression analysis was calculated with YFAS and other questionnaires as predictors of binges to capture incremental validity.

RESULTS

Food addiction could be diagnosed in 8.8 % of the sample. Women (10.2 %) were more often diagnosed as being food addicted than men (4.1 %; \(\chi^2(1) = 5.96, p < .05\)). The amount of food addiction symptoms was correlated with body-mass-index (BMI; \(r = .24, p < .001\)). Accordingly, the number of diagnoses differed between weight categories (Fig. 1; \(\chi^2(3) = 40.3, p < .001\)). Factor analysis suggested a one-factorial solution with satisfying internal consistency (Cronbach’s \(\alpha = .81\)). Correlations were medium-to-high between YFAS and other measures of dysfunctional eating behavior and small or non-existent between YFAS and related constructs (Tab. 1).

YFAS was a significant predictor of binge eating frequency, explaining additional 6.4 % of variance (\(\beta = .3, p < .001\)), in addition to emotional eating and the Eating Attitudes Test (which had \(R^2 = .24\) both together).

CONCLUSION

Results revealed that the YFAS measures food addiction as a one-dimensional construct. Medium-to-high correlations with other measures of dysfunctional eating behavior suggest good convergent validity. However, food addiction is a distinct construct as can be seen in unique contributions to the prediction of binge eating. Approximately 9 % of our sample could be diagnosed as food addicted. The prevalence was increased in women and obese patients.

REFERENCES


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Correlations with questionnaires

<table>
<thead>
<tr>
<th>Symptoms\textsuperscript{a}</th>
<th>Diagnosis\textsuperscript{b}</th>
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</thead>
<tbody>
<tr>
<td>Eating Attitudes Test</td>
<td>0.51*</td>
</tr>
<tr>
<td>Emotional Eating</td>
<td>0.58*</td>
</tr>
<tr>
<td>External Eating</td>
<td>0.45*</td>
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<tr>
<td>Restrictive Eating</td>
<td>0.21*</td>
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<tr>
<td>Barratt Impulsiveness Scale</td>
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<tr>
<td>Behavioral Inhibition System</td>
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<tr>
<td>Behavioral Activation System</td>
<td>ns</td>
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<tr>
<td>Alcohol Use Disorders Identification Test</td>
<td>ns</td>
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</tbody>
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Tab. 1. Convergent and discriminant validity of the YFAS.\textsuperscript{a} Pearson-correlations, \textsuperscript{b} Biserial correlations
\textsuperscript{a} Subscales of the Dutch Eating Behavior Questionnaire
\textsuperscript{b} Correlations are significant, \(p < .001\)

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