

This thesis explores the epidemiology and risk factors of eating disorders. It focuses on the impact of the political and cultural changes that occurred in the Czech Republic in the early 1990s.

The term eating disorders includes mental illnesses characterized by disturbances in eating behaviour: anorexia nervosa, bulimia nervosa and various eating disorders not otherwise specified.

It appears that the incidence of anorexia nervosa was increasing until the 1970s and remains stable since. The incidence of bulimia nervosa was rising until the end of the 1990s. However, the data come from the western countries only. The epidemiological data from the Central and Eastern Europe region remain sparse.

Eating disorders have multifactorial aetiology; which includes the recently emerging factors related to migration and acculturation.

Therefore, we hypothesised that the prevalence and incidence of eating disorders in the Czech Republic rose in the 1990s and that factors associated with migration experiences may play a role in the development and maintenance of eating disorders.

This thesis contains three different papers exploring different aspects of this hypothesis.

The first paper shows that the number of hospital admissions for eating disorders in females aged 10-39 quadrupled between 1981 and 2001, and remained high till 2005. The second paper concentrates on the first admissions for anorexia nervosa, as an approximation of an incidence of this condition: The rate of first-time admissions for anorexia nervosa in females aged 10-39 increased from 4.5/100,000 in 1994 to a maximum of 7.5/100,000 in 1999 and remained stable till 2005. The third paper, an in-depth qualitative exploration of factors associated with migration experiences, revealed three trajectories connecting eating disorders and living abroad, including weight gain associated with later development of an eating disorder; development or worsening of an eating disorder when abroad; and stay abroad as an attempt to escape the illness. Possible risk factors related to such sojourns include

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different food and eating habits; negative emotions; and illness as attempt to achieve something valuable.

In conclusion, temporal association of an increase in admissions for eating disorders is consistent with an aetiological role of a 'westernised' environment. The increase in first-time admissions for anorexia nervosa contrasts with the reports of stable incidence from the western countries and suggests that risk of anorexia nervosa is culture-dependent. One of the many factors that may be instrumental in such increase may be sojourns abroad; the importance of this phenomenon needs to be estimated in an epidemiological study.