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Introduction Several studies recently investigated how Anorexia Nervosa patients (ANp) process multimodal information. Longo (2015) hypothesized that ANp might be less reliant on visual perception of bodies than healthy controls (HC). Case et al. showed that processing of multimodal information might be disrupted in ANp. Literature lacks of studies that measure precisely and compare directly the contributions of each sensory input.

Objective To investigate the integration of visual and haptic inputs in ANp compared with HC and measure the weight of each input.

Method We used a visuo-haptic integration task with a setup adapted from Gori et al. (2008) to measure each sensory input's when judging the size of a cube according to Maximum Likelihood Estimation theory which describes the optimal multimodal integration behaviour (Ernst and Banks, 2002). Fifteen ANp and 16 HCs were recruited.

Results Regardless the group, we found considerable individual variability about the integration processes; moreover, many participants did not integrate optimally. Correlation analysis suggested that ANp rely less on visual information than HC.

Conclusions Despite using a setup previously validated with children, the observation that many HC did not integrate optimally is not in line with the results of previous studies, making it difficult the comparison with the AN group. The setup might not be adapted to adults and it needs to be improved. Our study shows for the first time how it might be possible to measure and compare directly the contribution of two different sensory modalities. This could provide precious information to deeply investigate the pathology.

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Overweight and obesity's prevalence, identification of risk factors in children and teenagers in two schools of Monteria

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The research has the intention to determinate the prevalence, risky factors of overweight and obesity in a sample of six hundred people between seven (7) and eighteen (18) years old, chosen by a simple random sampling with exclusion criteria, pathologies that affect the weight and size (diabetes paralysis; malformation or physic limitations). The data was collected through national poll of the nutritional situation and Colombia ENSIN, in the demographic and anthropometric information register and poll identification of food habits and physical activity questionnaire for children PAQ-C. The comparative analysis was made through SPSS in two determined populations by the low and medium social status criteria in the overweight and obesity variables, risky factors related with physical activity food habits and gender. It can be concluded that the population presents normal weight, prone to obesity. Based on the medium socioeconomic status, the percent of male obese teenagers is higher than the female one. Children independent of the socioeconomic status, present a higher percentage of obesity than teenagers. A high percent of population do not do physical exercise. There is no evidence of the relation between socioeconomic level and the presence of unhealthy food habits.

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Are coping strategies really different among family members of patients with eating disorders?

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Introduction Family members of patients with Eating Disorders (EDs)–in dealing with the relatives' disease–report negative feelings such as self-blame and criticism, but little is known regarding their coping strategies.

Objectives To describe coping strategies in a sample of relatives of patients with EDs using the Family Coping Questionnaire–Eating Disorder version (FCQ-ED).

Aims (1) To evaluate coping strategies in relatives of patients with EDs; (2) to describe differences in coping strategies according to type of kinship with the patient; (3) to identify correlations among socio-demographic characteristics, patients' clinical characteristic, and type of coping strategies.

Methods Relatives' coping strategies were evaluated using the FCQ-ED, a self-administered questionnaire, consisting of 32 items, grouped in 5 subscales: coercion; positive communication; collusion; seeking for information; avoidance, plus one item on seeking for spiritual help.

Results Seventy-two patients and 127 relatives were recruited. The most frequently adopted coping strategies were seeking for information, positive communication, seeking for spiritual help; the former were positively correlated with the level of education of both patients and relatives. Mothers avoided the patients less frequently than other relatives.

Discussion This is one of the first studies focused on coping strategies in families of patients with EDs showing that problem-oriented ones are used quite often. Socio-demographic characteristics and type of kinship can have an impact on the adoption of coping strategies, but further longitudinal studies are needed in order to identify other possible factors implied in their development.

Conclusions This represents an initial attempt to understand how clinical, social and personal variables can have an impact on the development of coping strategies.

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Turkish version of body attitude test: Its reliability and validity

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