Common Treatment for Binge Eating Disorder Shows Mixed Results

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Patients taking a commonly used stimulant for the treatment of binge eating disorder experienced mixed results, according to Rutgers Health researchers.

"Binge eating disorder is the most common eating disorder in the United States, yet there is no drug specifically developed for the condition that affects people of all racial and ethnic groups," said Abanoub Armanious, a master of science student at Rutgers School of Public Health and lead author of the study.

Lisdexamfetamine, marketed as Vyvanse, first received approval from the Food and Drug Administration for the treatment of ADHD, "but its ability to also reduce the frequency of binge eating episodes led to its approval for binge eating disorder," said Morgan James, assistant professor of psychiatry, member of the Rutgers Addiction Research Center at the Brain Health Institute, and senior author of the study. It is now the only approved medication for moderate to severe binge eating disorder in adult patients.

The study, published in Psychiatry Research Communications, explores the subjective experiences of individuals with binge eating disorder and prescribed lisdexamfetamine. Although many taking the medication reported reduced binge episodes and improved appetite control, others experienced significant side effects and inconsistent efficacy results.

Binge eating disorder is characterized by recurrent binge eating episodes accompanied by a loss of control over how much one eats, and is often comorbid with depression, anxiety and obesity-related health issues such as Type 2 diabetes. Although clinical trials have demonstrated the effectiveness of lisdexamfetamine in reducing binge eating episodes in some patients, patient-centered qualitative data on its use had previously been lacking, according to researchers.

"The repositioning of this drug from an ADHD medication to a treatment for binge eating disorder highlights a critical gap in the treatment landscape, as no drug has been specifically developed and FDA-approved for binge eating disorder, despite the disorder's widespread prevalence both in the U.S. and globally," Armanious said. "The need for targeted treatment options for binge eating disorder remains a significant, unmet challenge in mental health care."

Researchers conducted a thematic analysis of 111 anonymous reviews submitted by self-identified patients with binge eating disorder on Drugs.com, an independent drug information platform. Researchers then examined the relationship between patients' subjective perceptions of lisdexamfetamine and their ratings of the drug's efficacy, revealing how personal experiences with the drug's timing, side effects, and overall impact influenced these evaluations.

"Our findings revealed that higher perceived efficacy was associated with improved focus and fewer side effects, while lower ratings were linked to concerns about diminishing therapeutic effects, insomnia, and afternoon energy loss," Armanious said.

Key challenges with lisdexamfetamine highlighted in the study include:

Many patients experienced their highest binge risk at night, while lisdexamfetamine's appetite-suppressing effects typically wear off by evening, creating vulnerability for nighttime binge episodes.

The "crash" experienced as lisdexamfetamine wears off can leave patients feeling fatigued, irritable or mentally foggy.

Some patients self-adjusted their dosage timing, taking lisdexamfetamine closer to their binging hours, but this often resulted in insomnia and other sleep disturbances.

Armanious said the study's findings underscore the need for a more nuanced understanding of lisdexamfetamine's effects on patients with binge eating disorder.

The development of new medications with an improved side effect profile is a major focus of ongoing work in the James Laboratory.