

The title: *Eating disorders and experiencing violence among children and adolescents*

Abstract

Eating disorders (EDs) are serious and debilitating psychiatric disorders and cover a broad range of subtypes including anorexia nervosa, binge eating disorders,

bulimia nervosa, and other specified eating and feeding disorders (previously known as not otherwise specified eating and feeding disorders). These EDs tend to have onset

in childhood or adolescent life, and those suffering from these disordered behaviors experience long-lasting morbidity associated with it, including recurrent hospital admissions.

There is an active link between child abuse and eating disorders, emotional child abuse being the important subtype of CA and has a strong comorbid psychopathological relationship

with EDs, including AN. Child abuse, which includes sexual, physical and emotional abuse, child physical and emotional neglect, and child maltreatment, is a serious social problem

globally. Child abuse and neglect can cause dysregulation in behaviors both externally and internally leading to serious psychological health issues. Literature cross-sectional studies

have confirmed that every type of childhood maltreatment (CM) experience is associated with EDs with a dose-dependent effect between CM load and symptoms severity.

In this line, recent studies corroborated the association between CM and EDs from multiple levels of analyses. In particular, decreased gray matter volumes and altered

connectivity between brain regions were detected in maltreated people with EDs when compared to both no maltreated individuals and healthy peers.

The functioning of the hypothalamus–pituitary–adrenal axis was impaired in terms of cortisol awakening response and cortisol response to an acute social stress in acute or recovered

maltreated ED individuals. Experimental and review findings have suggested that CM may confer a higher vulnerability to develop ED symptoms in response to traumatic events

in adulthood. This evidence contributed to the possibility of identifying a *maltreated ecophenotype* also in people with EDs as in other psychiatric disorders.

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