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Body dysmorphic disorder: a pilot project for prevention and effective management

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Background. Body dysmorphic disorder (BDD) is a condition characterized by excessive and obsessive concern over one or more perceived defects in physical appearance, often not observable or minimally evident to others. Epidemiological studies estimate that the prevalence of BDD in the general population ranges from 1.7% to 2.9%, and particularly in specific clinical contexts: dermatology 6.4-11.9%; plastic surgery 5.7-7% esthetic medicine over 20%. The signs and symptoms are represented by repeated inspection in the mirror or avoidance of it, excessive recourse to esthetic and/or surgical treatments, social anxiety, psycho-emotional withdrawal, suicidal ideation. The objective of the study was to evaluate the perception of body image in a sample of adolescents.

Materials and Methods. 300 BDD questionnaires were administered to a sample of students attending the first and second years of secondary high schools.

Results. From the analysis of the questionnaires, it emerged that 53.8% of the respondents are concerned about their physical appearance and 49.3% would like to think less about the flaws they find in their bodies. 22.5% declare that their physical appearance influences and hinders their social and relational activities. To the question of how I see myself in the future, 33.4% respond with an esthetic description, and of these, 3% respond: "I won't make it because I'll kill myself." Among the many comments about one's physical appearance and character profile, most are derogatory and highly self-critical, with the exception of some narcissists for defense. The conviction and need to be and/or appear "normal" emerge, along with the hope that "others see me well" or "it would be enough if they could see me." The fear and certainty of being strange, of not being liked, but also the hope of improving over time, of advancing in their careers, having stable relationships, and building a family, of becoming more responsible and managing to love themselves more. Some have taken refuge behind ironic responses and witty remarks, others have deliberately chosen to deviate from the topic, and still others have used clichés and sayings. Yet, the percentage of young people who have expressed anxiety, self-harming thoughts, and depressive tendencies in black and white has proven to be significant, in line with the current emergency of increasingly severe psychopathologies in the preadolescent age group.

Conclusions. This pilot study highlighted a high frequency of symptoms related to BDD and altered body image perception in the adolescent population. BDD is often underdiagnosed and underestimated in healthcare facilities. It is essential that mental health professionals, dermatologists, plastic surgeons, and other healthcare providers are aware of the suicide risk associated with BDD: an accurate and timely assessment can prevent fatal outcomes. Prevention represents an essential tool in the framing and management of BDD. Early recognition, operator training, and a multidisciplinary approach are essential to avoid harmful procedures and promote effective and lasting management of the disorder. Early screening in esthetic, surgical, and dermatological settings (international BDD questionnaire), patient education on body image, realistic limits of esthetic treatments, and training interventions in school environments can represent valid tools for early diagnosis and management of the disorder. Family education and social support to avoid dysfunctional reinforcement.

References. 1. Ahmadpanah M, Arji M, Arji J, Haghighi M, Jahangard L, Sadeghi Bahmani D, Brand S. SocioculturalAttitudestowardsAppearance, Self-Esteem and Symptoms of Body-Dysmorphic Disorders among Young Adults. Int J Environ Res Public Health. 2019 Oct 31;16(21):4236. doi: 10.3390/ijerph16214236. PMID: 31683731; PMCID: PMC6862198. 2. Veale D, Gledhill LJ, Christodoulou P, Hodsoll J. Body dysmorphic disorder in different settings: A systematic review and estimatedweightedprevalence. Body Image. 2016 Sep;18:168-86. doi: 10.1016/j.bodyim.2016.07.003. Epub 2016 Aug 4. PMID: 27498379. 3. Jassi A, Krebs G. Body Dysmorphic Disorder. Psychiatr Clin North Am. 2023 Mar;46(1):197-209. doi: 10.1016/j.psc.2022.10.005. Epub 2022 Dec 26. PMID: 36740353.