

Quels liens entre la psychologie, la consommation alimentaire et le statut pondéral?

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L'obésité et la consommation alimentaire

L'obésité est un problème majeur de santé publique



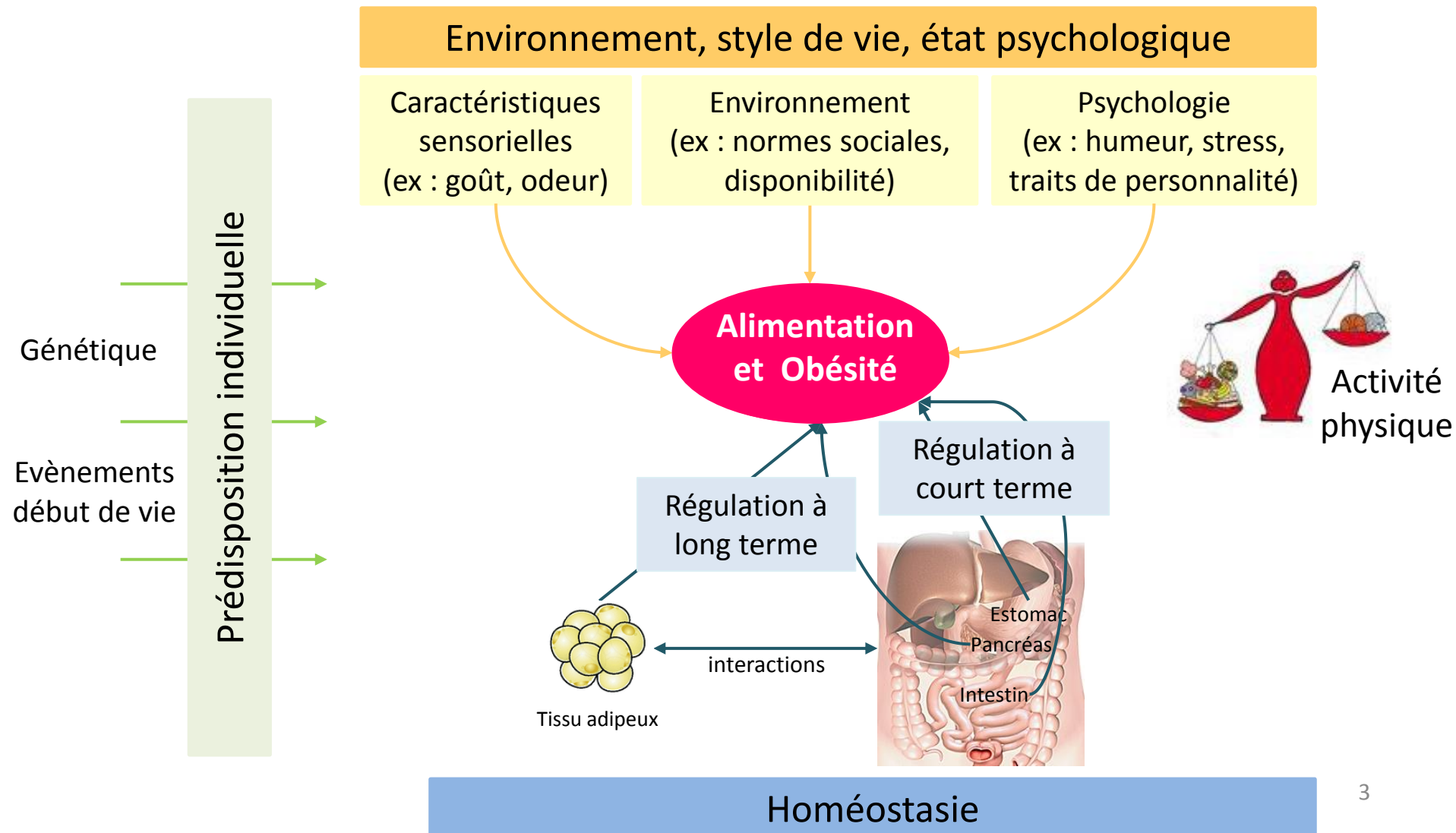
En France, 49% des adultes (+18 ans) - en surpoids ou obèses *ENNS, 2006*

Situation nutritionnelle insatisfaisante

Repères de consommation du PNNS			% en désaccord
Fruits et légumes		au moins 5 par jour	56
Lait et produits laitiers (yaourts, fromages)		3 par jour	70
Produits sucrés		limiter la consommation	35

Malon et al, 2010

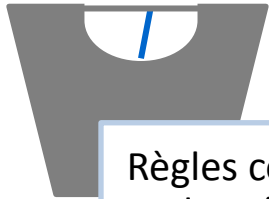
Déterminants de la consommation alimentaire et du poids



Approche psychologique du comportement alimentaire

Aspects psychologiques négatifs

Restriction cognitive



Règles cognitives
des régimes

Alimentation liée aux émotions

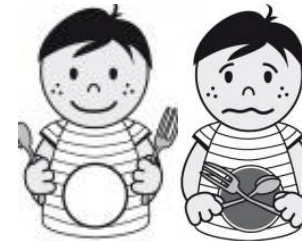


Emotions négatives



Aspects psychologiques positifs

Alimentation intuitive



Pleine conscience



Mind Full, or Mindful?

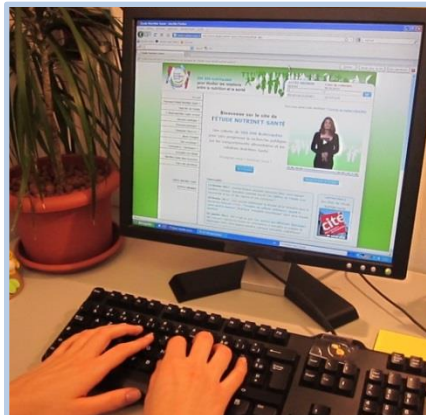
Technique de relaxation



Étude NutriNet-Santé

Etude de cohorte prospective d'observation sur Internet débutée en 2009

- Large population d'adultes (août 2015 : $\approx 159\,000$ inclus)
- Recueil données :



Alimentaires
(3 enregistrements de 24h)

Anthropométriques

Activité physique

Sociodémographiques
économiques

Questionnaires
spécifiques mensuels

Kit d'inclusion
répété tous les ans

Optionnels

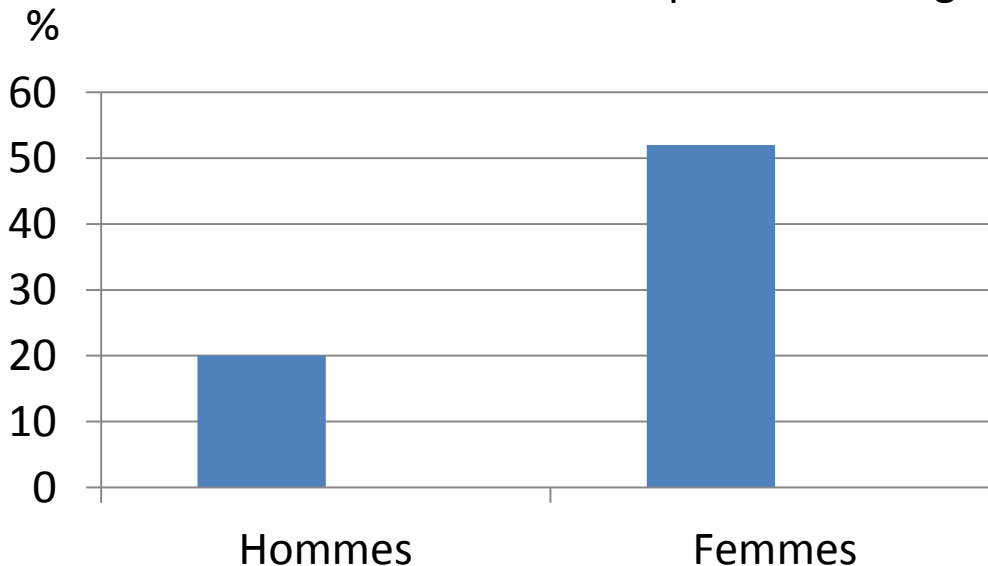


Etudes de ce travail : mesures transversales

Alimentation liée aux émotions et consommation alimentaire/poids



« Quand je me sens
anxieux (se)/triste..., je me
surprends à manger. »



Les femmes
mangent plus
sous le coup de
l'émotion que les
hommes

Alimentation liée aux émotions et consommation alimentaire/poids



Emotions négatives

« Quand je me sens anxieux (se)/triste..., je me surprends à manger. »

Consommation plus importante

*Femmes: 1,5-1,8 fois plus
Hommes: 1,3 fois plus*

Surpoids plus important

*Femmes: 2,5-5 fois plus
Hommes: 2,5 fois plus*



Gâteaux, biscuits, pâtisseries, chocolat...

Camilleri et al., J Nutr 2014



Poids

Péneau et al., AJCN, 2013

Alimentation liée aux émotions et consommation alimentaire/poids

The Journal of Nutrition. First published ahead of print May 21, 2014 as doi: 10.3945/jn.114.193777.

The Journal of Nutrition
Nutritional Epidemiology

The Associations between Emotional Eating and Consumption of Energy-Dense Snack Foods Are Modified by Sex and Depressive Symptomatology^{1,2}

Géraldine M. Canlier,^{1,3} Caroline Méjean,³ Emmanuelle Kesse-Guyot,³ Valentin A. Andreeva,³ France Bellisle,^{3,4} Serge Hercberg,^{3,5} and Sandrine Péneau^{1,2}

¹Paris 13 University, Sorbonne Paris Cité, Epidemiology and Biostatistics Research Group, National Epidemiology Research Team (ERES), 11515 National Institute of Health and Medical Research, 11512 National Institute for Agricultural Research, National Conservatory of Arts and Crafts, Paris 7 and 13 Universities, Bobigny, France; ²Nutrition Epidemiology and Surveillance Unit, French Institute for Health Surveillance, Paris 13 University, Sorbonne Paris Cité, Bobigny, France; and ³Public Health Department, Hecmar Hospital, Bobigny, France

Abstract

In recent years, emotional eating (EmE) has invited substantial research interest as an important psychological determinant of food intake and overweight. However, little is known about factors that might modulate its relations with dietary habits.

This objective was to examine the associations between EmE and food consumption in a French adult population. A 3-way interaction of EmE with sex and depressive symptoms was assessed by using either the Three-Factor Eating Questionnaire (TFEQ; 8–12) or the Dutch Eating Behavior Questionnaire (DEBQ; 16, 17), which are major health issues because of their potential roles in the development of obesity or eating disorders (18, 19). Despite the potential importance of EmE regarding obesity prevention, there are still limited data to allow the identification of groups at greater risk of overweight in association with EmE, which would permit the design of more focused public health prevention strategies.

AJCN. First published ahead of print April 10, 2013 as doi: 10.3945/ajcn.112.054916.

Sex and dieting modify the association between emotional eating and weight status^{1–3}

Sandrine Péneau, Estelle Mérand, Caroline Méjean, France Bellisle, and Serge Hercberg

ABSTRACT

Background: Unlike other psychological correlates of weight status, emotional eating (EmE) has received relatively limited attention in the literature.

Objectives: We aimed to examine the association between the EmE score and weight status and the influence of sex and dieting on this association.

Design: A total of 8580 men and 27,061 women aged ≥18 y who participated in the NutriNet-Santé cohort study were selected in this cross-sectional analysis. Self-reported weight and height, EmE scores of the revised 21-item version of the Three-Factor Eating Questionnaire, and dieting status data were collected. The relation between EmE and weight status was estimated by using multiple linear and logistic regression models adjusted for sociodemographic and lifestyle factors. Interactions of EmE with sex and dieting history were assessed.

Results: Median EmE scores were greater in women than in men and in former or current dieters than in subjects without a history of dieting. Strong associations appeared between the EmE score and weight status in most categories of sex × dieting status. The strongest associations between EmE and weight status were observed in women, particularly in never dieters (body mass index slope (95% CI): 2.61 (2.43, 2.78); overweight OR (95% CI): 5.06 (4.24, 6.05)). **Conclusions:** These observations support the existence of an association between EmE and weight status. The effect modification of sex and dieting on the EmE score and on the association of the EmE score with weight status should be taken into account in obesity prevention. *Am J Clin Nutr* doi: 10.3945/ajcn.112.054916.

INTRODUCTION

Obesity has reached epidemic proportions throughout the world and is one of the leading public health issues in many countries (1). The influence of psychological traits on food consumption and weight control has clearly been shown. In particular, negative emotions have been associated with either an increased or a decreased food intake (2). Intense emotions tend to inhibit rather than stimulate food intake (3). Physiologic adaptations to negative emotions prepare for a fight-or-flight response including bloodstream glucose release this, in turn, suppresses feelings of hunger (4). By contrast, an increase in the motivation to eat in response to negative emotions has also been observed (5). Various mechanisms have been suggested that include impairment of cognitive eating control, emotion congruent modulation of eating, and eating to regulate emotions (5), as observed in so-called emotional eaters (6).

Obesity

Emotional eaters are likely to overeat in response to emotions rather than respond to internal safety and satiation cues. This type of behavior seems to be more frequent in overweight subjects (7). Results of the few studies that addressed emotional eating (EmE) have shown a relatively consistent positive association with weight status by using either the Three-Factor Eating Questionnaire (TFEQ; 8–12) or the Dutch Eating Behavior Questionnaire (DEBQ; 16–17). In addition, EmE is known to be associated with binge eating disorders (BEDs) (16, 17), which are major health issues because of their potential roles in the development of obesity or eating disorders (18, 19). Despite the potential importance of EmE regarding obesity prevention, there are still limited data to allow the identification of groups at greater risk of overweight in association with EmE, which would permit the design of more focused public health prevention strategies.

The literature contains conflicting results regarding a potentially different association between EmE and weight status according to sex, with a greater strength of association in women than men (12), a comparable level of association in both sexes (11), and an association in men only (10, 14) or in women only (20).

Dieting to lose weight is common in women and, to a lesser extent, in men of all ages (21). Although there are many

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⁴Abbreviations: BED, binge eating disorder; EmE, emotional eating; TFEQ, Three-Factor Eating Questionnaire; TFEQ-R21, revised 21-item Three-Factor Eating Questionnaire.
Received November 14, 2012. Accepted for publication February 26, 2013. doi: 10.3945/ajcn.112.054916.

10 avril 2013

Manger sous le coup de l'émotion est associé à un risque de surpoids plus important

Interview : *Télématin* (24/07/13), *Sud Radio* (11/04/13), 12/13 *France 3 Ile de France* (10/04/13)

Article associé : *huffington post* (06/05/13),

http://www.huffingtonpost.fr/sandrine-peneau/prise-de-poids-stress_b_3202133.html

Repris par : *destinationsanté.com* ; *cote d'ivoire* ;

lefigaro.fr santé ; *dossierfamilial.com* ; *doctissimo* ;

monde actu ; *lequotidiendumedecin.fr* ; *lemonde.fr*

sciences ; *santé magazine* ; *pause santé* ; *europe 1* ;

santé log ; *lapresse.ca* ; *enfant.com* ; *le*

télégramme ; *auxPtitSoins* ; *Inra sciences et impact* ;

cadureso.com ; *lepoint.fr* ; *medisite* ; *e-sante.fr*

4 juin 2014

Manger sous le coup de l'émotion est associé à une plus forte consommation d'aliments de snacking riches en calories

Repris par *RTL.be* ; *sciences&avenir santé* ;

doctissimo ; *santéblog* ; *i-diététique.com*

Alimentation intuitive et consommation alimentaire/poids

Alimentation intuitive

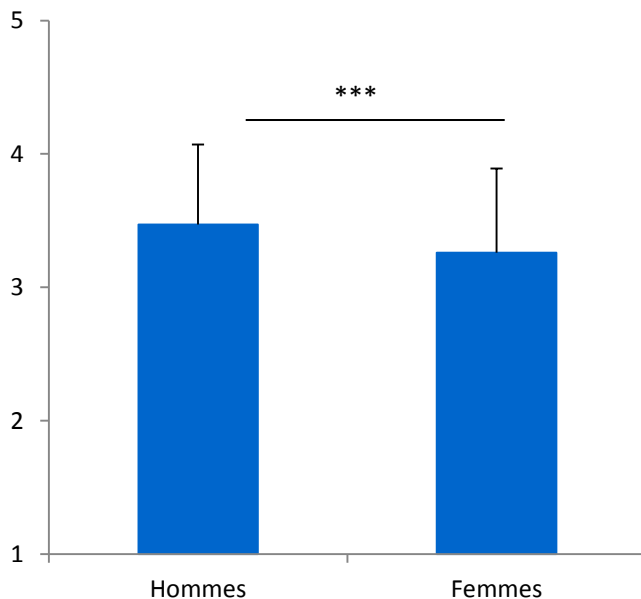


- Faim et satiété
- Plutôt que les émotions
- Sans interdits

Je fais confiance à mon corps pour qu'il me dise quand manger.

Je trouve d'autres façons de gérer le stress et l'anxiété qu'en mangeant.

Je ne suis pas de règles alimentaires ou régimes qui me dictent quoi, quand et/ou en quelle quantité manger.



Les hommes ont
une alimentation
plus intuitive que
les femmes

Alimentation liée aux émotions et consommation alimentaire/poids

Alimentation intuitive



- Faim et satiété
- Plutôt que les émotions
- Sans interdits

Résultats contrastés pour l'alimentation

*Obésité moins importante
Hommes & Femmes:
environ 2 fois moins*



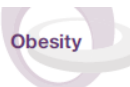
Alimentation



Poids

Alimentation intuitive et consommation alimentaire/poids

Original Article
EPIDEMIOLOGY/GENETICS



Intuitive Eating is Inversely Associated with Body Weight Status in the General Population-Based NutriNet-Santé Study

Géraldine M. Camilleri¹, Caroline Méjean¹, France Bellisle², Valentina A. Andreeva¹, Emmanuelle Kesse-Guyot¹, Serge Hercberg^{1,2}, and Sandrine Péneau¹

Objective: To examine the relationship between intuitive eating (IE), which includes eating in response to hunger and satiety cues rather than emotional cues and without having forbidden foods, and weight status in a large sample of adults.

Methods: A total of 11,774 men and 40,389 women aged ≥ 18 years participating in the NutriNet-Santé cohort were included in this cross-sectional analysis. Self-reported weight and height were collected as well as IE levels using the validated French version of the Intuitive Eating Scale-2. The association between IE and weight status was assessed using multinomial logistic regression models.

Results: A higher IE score was strongly associated with lower odds of overweight or obesity in both men and women. The strongest associations were observed in women for both overweight [quartile 4 vs. 1 of IE: odds ratio, 95% confidence interval: (0.19, 0.17-0.20)] and obesity (0.09, 0.08-0.10). Associations in men were as follows: for overweight (0.43, 0.38-0.48) and obesity (0.14, 0.11-0.18).

Conclusions: IE is inversely associated with overweight and obesity which supports its importance. Although no causality can be inferred from the reported associations, these data suggest that IE might be relevant for obesity prevention and treatment.

Obesity (2016) 00, 00-00. doi:10.1002/oby.21440

Introduction

The high prevalence of overweight and obesity worldwide represents a major socioeconomic and health burden owing to numerous related comorbidities (1). One's psychological traits, including both affective and cognitive components, can influence eating habits and weight control not only in people with overweight and obesity but also in normal-weight individuals. For instance, some individuals are likely to overeat in response to negative emotions, which can potentially lead to weight gain (2). Cognitive restraint can also adversely affect eating and body weight (3). However, little is known about adaptive eating behaviors which are positively related to well-being (4). These behaviors are more than just an absence of unhealthy eating practices or eating disorders (4). For instance, some individuals who may not exhibit excessive preoccupation with food, binge eating, or cognitive restriction might nonetheless not follow their hunger and satiety signals. A study conducted in men and women with obesity reported that hunger was a reason to start eating in only one in five eating occasions (5). Therefore, further study of these aspects may expand our understanding of the interaction among individual factors, eating behaviors, and weight control.

One type of adaptive behavior—called intuitive eating (IE)—is defined as generally eating in response to physiological hunger and satiety signals, not external and/or emotional cues, together with low overall preoccupation with food (6,7). Many factors in our industrialized environment might impair our biological regulation mechanisms, including food saliency and attractiveness (8), increased energy density and portion sizes (9), parental feeding practices early in life (10), and a multitude of energy-restrictive diets (11). Food preoccupation, beliefs, and rational control of food intake seem also overstressed, especially in Western societies, possibly due in part to the ubiquitous thinness ideal (11).

Weight loss programs based on energy restriction continue to flourish despite evidence of their limited benefits in the long term and the associated psychological and physiological adverse effects (11,12). As a result, interest in health-oriented non-dieting approaches based on an IE model has increased during the past decade. Randomized controlled trials in populations with overweight and obesity promoting IE have demonstrated weight maintenance (13,14) or weight loss (15). In turn, cross-sectional studies have assessed the link between IE and body weight in population-based

7 Avril 2016

Article Inserm actualités « Ecouter sa faim peut aider à être mince »

Interview : RTL (18/04/16)

Repris par : Radio canada ; Ouest France ; Santé magazine ; Pourquoi docteur ; Femme actuelle ; La dépêche ; Medisite ; Top santé

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Funding agencies: The NutriNet-Santé study is supported by the following institutions: French Ministry of Health (DGES), Institut de Veille Sanitaire (InVS), Institut National de la Prévention et de l'Éducation pour la Santé (INPES), Institut National de la Santé et de la Recherche Médicale (INSERM), Institut National de la Recherche Agronomique (INRA), Conservatoire National des Arts et Métiers (CNAM), and Paris 13 University.

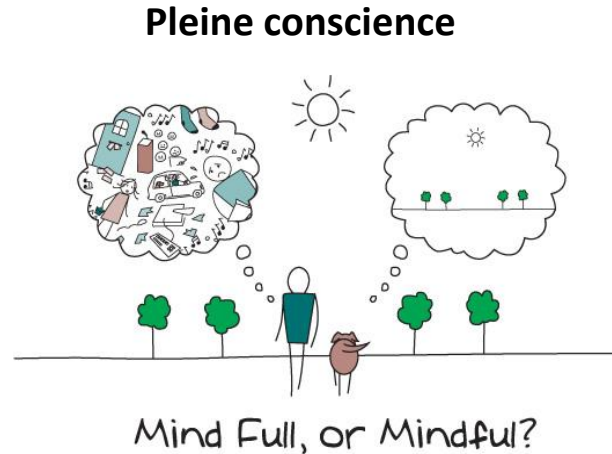
Disclosure: The authors declare no conflict of interest.

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Pleine conscience et poids

Conscience qui émerge par l'attention portée :

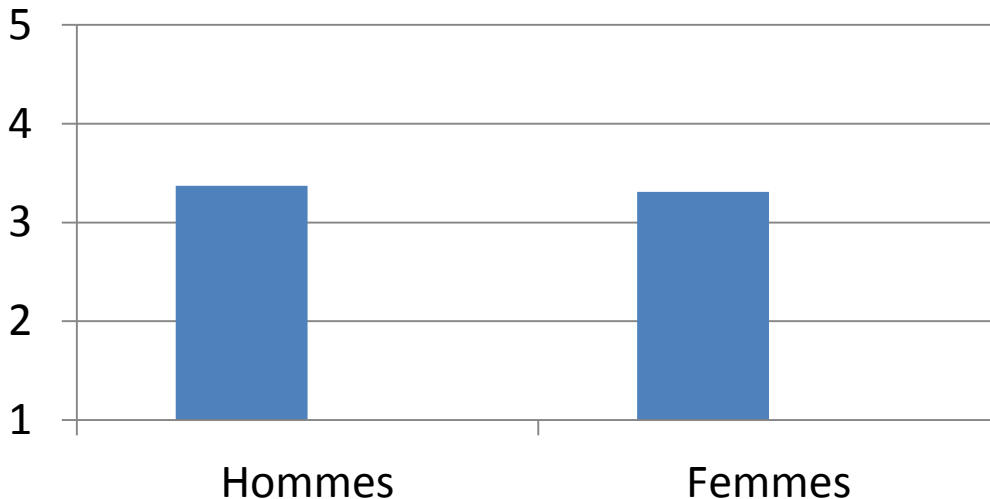
- Volontairement
- Dans le moment présent
- Sans jugement



Je remarque les odeurs et les arômes des choses.

Je fais des choses sans y prêter attention

Je pose des jugements quant à savoir si mes pensées sont bonnes ou mauvaises.

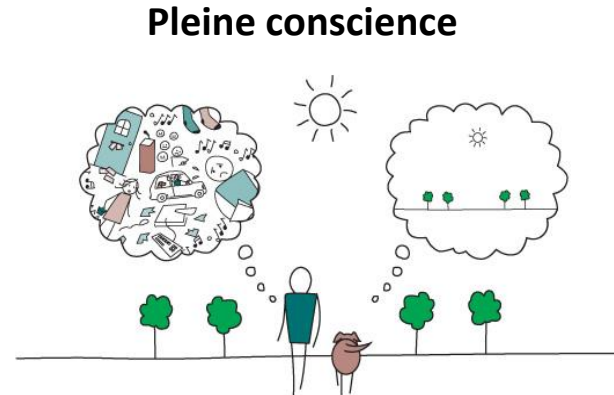


Peu de différence
homme femme
en terme de
pleine conscience

Pleine conscience et poids

Conscience qui émerge par l'attention portée :

- Volontairement
- Dans le moment présent
- Sans jugement



Mind Full, or Mindful?



Obésité moins importante
Hommes: 20% de moins
Femmes: 30% de moins



Poids

Pleine conscience et poids



RESEARCH ARTICLE

Association between Mindfulness and Weight Status in a General Population from the NutriNet-Santé Study

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Data Availability Statement: All relevant data are within the paper and its Supporting Information files.

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Abstract

Background

Mindfulness is defined as non-judgmental awareness of the present moment. There is some evidence of the efficacy of mindfulness-based interventions in weight loss. However, this psychological concept has only been rarely explored in observational studies, and no study to date has examined the association between dispositional mindfulness and weight status in a large population-based sample.

Objective

We aimed to examine the relationship between mindfulness scores and weight status in a large sample of the adult general population in France.

Design and Methods

A total of 14,400 men and 49,228 women aged ≥ 18 y participating in the NutriNet-Santé study were included in this cross-sectional analysis. We collected mindfulness data using the Five Facet Mindfulness Questionnaire as well as self-reported weight and height. The association between weight status and dispositional mindfulness, as well as its subscales (observing, describing, acting with awareness, non-judging and non-reactivity), was assessed using multinomial logistic regression models adjusted for socio-demographic and lifestyle factors.

Results

Women with higher dispositional mindfulness scores were less likely to be overweight (excluding obesity) (OR quartile 4 vs. 1 = 0.84, 95% CI: 0.79–0.90) and obese (OR quartile 4 vs. 1 = 0.71, 95% CI: 0.65–0.78). In addition, overall, in this group, all subscales were inversely associated with weight status, with the strongest association found for the

Techniques de relaxation et poids

Technique de relaxation



- 36% ont déjà pratiqué techniques de relaxation
- 14% pratiquent encore actuellement (dont 8% régulièrement)

Techniques de relaxation	%
Méditation	7,6
Yoga	4,8
Sophrologie	2,4
Qi-gong	1,6
Tai-chi	1,3
Autre	1,6
Aucune	86,3

Techniques de relaxation et poids

Technique de relaxation



- 36% ont déjà pratiqué techniques de relaxation
- 14% pratiquent encore actuellement (dont 8% régulièrement)



*Surpoids et obésité moins important:
2 fois inférieur pour une
pratique régulière*



Poids

UNDER EMBARGO UNTIL DECEMBER 3, 2015 12:01 AM ET

Mind–Body Practice and Body Weight Status in a Large Population-Based Sample of Adults

Géraldine M. Camilleri, PhD,¹ Caroline Méjean, PhD,¹ France Bellisle, PhD,¹
Serge Hercberg, MD, PhD,^{1,2} Sandrine Péneau, PhD¹

Introduction: In industrialized countries characterized by a high prevalence of obesity and chronic stress, mind–body practices such as yoga or meditation may facilitate body weight control. However, virtually no data are available to ascertain whether practicing mind–body techniques is associated with weight status. The purpose of this study is to examine the relationship between the practice of mind–body techniques and weight status in a large population-based sample of adults.

Methods: A total of 61,704 individuals aged ≥ 18 years participating in the NutriNet-Santé study (2009–2014) were included in this cross-sectional analysis conducted in 2014. Data on mind–body practices were collected, as well as self-reported weight and height. The association between the practice of mind–body techniques and weight status was assessed using multiple linear and multinomial logistic regression models adjusted for sociodemographic, lifestyle, and dietary factors.

Results: After adjusting for sociodemographic and lifestyle factors, regular users of mind–body techniques were less likely to be overweight (OR=0.68, 95% CI=0.63, 0.74) or obese (OR=0.55, 95% CI=0.50, 0.61) than never users. In addition, regular users had a lower BMI than never users (-3.19% , 95% CI= -3.71 , -2.68).

Conclusions: These data provide novel information about an inverse relationship between mind–body practice and weight status. If causal links were demonstrated in further prospective studies, such practice could be fostered in obesity prevention and treatment.

(Am J Prev Med 2016;■■■■-■■■) © 2016 American Journal of Preventive Medicine

Introduction

Obesity has become a major public health burden worldwide.¹ The development of overweight and obesity may be related to changes in physical activity, diet, and meal patterns² that lead to a sustained positive energy balance.³ Psychosocial aspects may also be important risk factors,⁴ such as increased chronic stress exposure in industrialized countries.⁵

Mind–body practices include meditation, yoga, sophrology, qigong, or tai chi, for example. They focus

on how emotional states, psychological stress, and mental and behavioral dispositions can affect health.⁶ Such techniques have generated growing public and research interest in recent years. They are now widespread in the U.S., where their use is well documented,^{7,8} unlike France and Europe where few data exist.⁹ They are mostly used as self-care strategies to promote well-being and health, and in particular to relieve emotional (e.g., anxiety, depression, and stress) and physical (e.g., pain) symptoms.^{7,8} These potential health benefits have been suggested by mind–body programs with different degrees of evidence of effectiveness.^{10,11,12}

Mind–body practices have been recently applied to the treatment of obesity. Several clinical trials incorporating mind–body techniques as a primary or adjunct component have suggested potential benefits in improving obesity-related eating behaviors and body weight.^{13,14,15,16,17} However, these studies often had a small sample size and varied greatly in methodologic quality.^{13,16,17,18} In addition, intervention studies

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0749-3797/16/0000-0000
<http://dx.doi.org/10.1016/j.amepre.2015.10.005>

25 novembre 2015

La pratique de techniques de relaxation est associée à un moindre risque d'être en surpoids.

*Repris par femme actuelle ; santeblog ;
pourquoidocteur*

Approche psychologique du comportement alimentaire

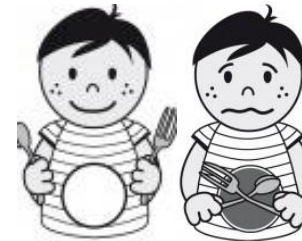
Aspects psychologiques négatifs

Alimentation liée aux émotions

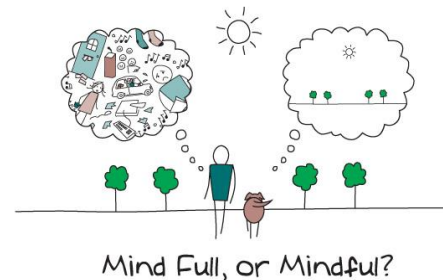


Aspects psychologiques positifs

Alimentation intuitive



Pleine conscience



Technique de relaxation



Implications

☐ Implications scientifiques

- Intérêt de l'approche « positive » dans l'étude des comportements alimentaires

☐ Implications pour la santé publique

- Prévention primaire : enrichissement des programmes de santé publique
- Prévention secondaire :
 - ✓ interventions anti-régimes
 - ✓ mise en avant des interactions entre le mental et le physique

Remerciements



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serait pas possible.

