

Addicted to tanning? Research looks at correlation between OCD, body dysmorphia and tanning addiction

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They keep tanning, even after turning a deep brown and experiencing some of the negative consequences. Skin cancer is among the most common, preventable types of the disease, yet many continue to tan to excess.

Research from Lisham Ashrafioun, a Bowling Green State University Ph.D. student in psychology, and Dr. Erin Bonar, an assistant professor of psychiatry at the University of Michigan Addiction Research Center and a BGSU alumna, shows that some who engage in excessive [tanning](#) may also be suffering from obsessive-compulsive (OCD) and body dysmorphic disorders (BDD). Ashrafioun and Bonar also looked at whether tanning should be classified as an addiction.

Their paper, "Tanning Addiction and Psychopathology: Further Evaluation of Anxiety Disorders and Substance Abuse," is currently in press in the *Journal of the American Academy of Dermatology* and will be published later this year.

"While more research is needed regarding to idea of tanning as an addiction, this study suggests that some people who tan also experience mental health symptoms that warrant further assessment," said Bonar. "Although tanning behavior could be separate and distinct from these concerns, it's possible that the symptoms of OCD or BDD are contributing to the tanning in some way. For these people, prevention

messages and [public health campaigns](#) may not be as helpful, but further assessment and treatment could be."

Respondents who answered yes to at least three of the eight criteria on the Tanning-DSM were considered tanning dependent. The Tanning-DSM is a modified version of [substance abuse](#) criteria provided by the 4th Edition of the Diagnostic and Statistical Manual of Mental Disorders.

Those who answered yes to two of the four questions on the tanning-specific version of the CAGE alcohol screener were considered to have problematic tanning.

Out of 533 tanning BGSU students who took the questionnaire, 31 percent met the criteria for tanning dependence and 12 percent for problematic tanning.

In further analysis, being female and screening positive for body dysmorphic disorder and OCD were significantly associated with tanning dependence. In the model for problematic tanning, only screening positive for obsessive-compulsive disorder was significantly related.

"It may be that some individuals in our sample engage in excessive tanning because of obsessive thoughts about, or the compulsion to tan, or because tanning is a strategy for relaxation to decrease OCD symptoms," explained Ashrafioun. "If problem tanning is conceptualized as an addictive disorder, obsessions and compulsions about tanning may instead represent craving to tan."

The odds of meeting the screening criteria for problematic tanning and tanning dependence was strongest for participants who tanned at least nine times in the past 30 days.

"We have tanning addiction in the title, but we don't jump to the conclusion automatically that tanning is and can be an addiction," Ashrafioun said. "We're saying that we shouldn't necessarily rule this out especially if people are tanning excessively, even if they aren't experiencing any OCD or [body dysmorphic disorder](#). Because of this problem we should look at the potential for tanning addiction more."

The researchers did admit to several limitations with their study. The rates of positive screens for OCD and BDD in this sample differed from those reported in other college samples and were higher than national prevalence estimates for either disorder. In addition, they note that the Tanning-CAGE and Tanning-DSM may overestimate the rates of problematic tanning and tanning dependence that they found. However, they say future research should evaluate relationships between excessive tanning and formal clinical diagnosis of each of these conditions.

"We see this as more potential evidence and firepower for continuing to research the conceptualizing of excessive tanning as an addiction," Ashrafioun said. "Previously, clinicians educated patients on the harms of tanning. It's probably more than that – most people know there are harms, but they continue to do it. We need to be more focused on intervention than just telling people it's bad for them."

"Trying to help people whether they be dermatologists or [primary care physicians](#) to use a screen like this will help them determine if they should assess individuals further to see if they have a bigger problem with tanning."

Provided by Bowling Green State University

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