

# ARE YOU IDENTIFYING HYPERPHAGIA IN YOUR PATIENTS?

**Hyperphagia is a pathological, insatiable hunger that is differentiated from other overeating behaviors and disorders by its severity and persistence<sup>1</sup>**

## Occasional overeating<sup>2</sup>

Eating beyond a feeling of satiety at a special occasion or celebratory meal (eg, Thanksgiving)

## Hedonic overeating<sup>3</sup>

Eating beyond metabolic requirements based on the expectation of pleasure from consuming foods

## Binge eating<sup>4</sup>

Consumption of a large amount of food with loss of control

## Hyperphagia<sup>1,5</sup> (Pathological, insatiable hunger)

- Long time to satiation
- Shorter duration of satiation
- Prolonged feeling of hunger
- Severe preoccupation with food and distress if denied food

## Hyperphagia is a common feature in patients with Bardet-Biedl syndrome (BBS)<sup>6</sup>

Hyperphagia and obesity due to BBS are caused by an impairment in the melanocortin-4 receptor (MC4R) pathway. The MC4R pathway is a key signaling pathway that regulates hunger, satiety, and energy expenditure. If left untreated or unmanaged, hyperphagia and obesity can intensify physical and mental challenges for patients and caregivers.<sup>1,5-7</sup>

**According to 2023 AAP guidelines, managing hyperphagia can be challenging and may require the use of pharmacotherapy<sup>5</sup>**

[Click here to learn about a treatment that targets a root cause of hyperphagia and obesity in patients with BBS](#)

# KEY QUESTIONS TO HELP IDENTIFY HYPERPHAGIA IN YOUR PATIENTS

The behaviors associated with hyperphagia can vary among patients. Knowing the right questions to ask can help you determine if your patient has hyperphagia and assess the impact it has on their life<sup>8</sup>

To differentiate hyperphagia from general hunger and other overeating behaviors, ask if the patient experiences most of these behaviors on a consistent basis:

- Tries to negotiate or argue for more food than provided
- Eats extremely quickly
- Sneaks or takes food without permission
- Asks for more food after they have just finished a meal or snack
- Feels hungry after they have just eaten
- Eats food that has been dropped or discarded by someone else
- Hides what they are eating, or hides how much they are eating from others

To assess the impact of hyperphagia on your patient's life, ask if their overeating behaviors consistently have a negative effect on:

<b>Sleep</b>	Wakes up during the night feeling hungry
<b>Mood or emotions</b>	Feels anxious, depressed, or stressed because of their hunger
<b>School or work</b>	Has difficulty paying attention or completing tasks because of their hunger
<b>Leisure or recreational activities</b>	Stops what they are doing to ask for food or has trouble participating in activities to request food
<b>Relationships with family and friends</b>	Has uncomfortable or strained interactions with their caregiver or others because of their hunger

Use these questions to assess your patients' hyperphagia over time, even after treatment is introduced

**References:** 1. Heymsfield SB et al. *Obesity (Silver Spring)*. 2014;22(suppl 1):S1-S17. doi:10.1002/oby.20646. 2. Haqq AM et al. *Child Obes*. 2021;17(4):229-240. 3. Espel-Huynh HM et al. *Obes Sci Pract*. 2018;4(3):238-249. doi:10.1002/osp4.161. 4. Hayes JF et al. *Curr Obes Rep*. 2018;7(3):235-246. 5. Hample SE et al. *Pediatrics*. 2023;151(2):e202206064. doi:10.1542/peds.2022-060640. 6. Eneli I et al. *Appl Clin Genet*. 2019;12:87-93. 7. Cuda SE et al. *Obesity Pillars*. 2022;1:100010. doi:10.1016/j.obpill.2022.100010. 8. Sherafat-Kazemzadeh R et al. *Pediatr Obes*. 2013;8(5):e64-e67. doi:10.1111/j.2047-6310.2013.00182.x.