

Review

by

Prof. d-r Georgi Panov Panov, MD, PhD, DSc

Faculty of Medicine

Trakia University - Stara Zagora

In connection with Order № R-109-497/02.12.2025 of the Rector of Medical University "Prof. Dr. Paraskev Stoyanov" - Varna, on the grounds of the Regulations for the Development of the Academic Staff at Medical university - Varna (27.05.2025), Decision of the Faculty Council of the Faculty of Medicine at MU - Varna (Protocol № 50/24.11.2025), and Protocol № 1 of the remote meeting of the Scientific Jury from 10.12.2025.

Regarding: Competition for obtaining the educational and scientific degree "Doctor" in the doctoral programme "Child Psychiatry" in the field of higher education 7. "Health and ports" and professional field, 7.1. "Medicine", of Dr Gabriela Valentinova Gacheva, enrolled by Order № 109-447/20.10.2020 of the Rector of Medical University - Varna.

Topic of the dissertation: "Follow-up of constant and variable characteristics in the acute phase and in remission in adolescent patients with anorexia nervosa"

Research supervisor: Prof. Petar Milchev Petrov, MD, PhD, DSc

Biographical information

Dr. Gabriela Valentinova Gacheva was born on 22.10.1994 in Varna. In 2013 she graduated from the Fifth Foreign Language High School in Varna, and in 2019 - from Medical University "Prof. Dr. Paraskev Stoyanov" - Varna. Shortly after graduation she started work at the Fourth Clinic of Child and Adolescent Psychiatry at St. Marina University Hospital – Varna and since May 2020 she has been a resident physician. Since May 2020 she has held the position of Assistant, and since November 2020 she has been enrolled as a full-time doctoral student at the Department of Psychiatry and Medical Psychology, MU - Varna. In December 2024 she acquired a specialty degree in Child Psychiatry.

Relevance of the topic and scientific rationale: The dissertation topic is highly relevant both scientifically and in terms of clinical practice. Adolescent anorexia nervosa is a clinically significant disorder with high risk of complications and relapse; therefore, follow-up of characteristics in the acute phase and remission is essential. The alarming trend toward an increase

in the frequency of occurrence of the disorder among individuals under 15 years of age further emphasizes the timeliness and significance of research on this pathology.

Additional importance of the investigated problem is proved by the fact that anorexia nervosa is characterized by complex biopsychosocial etiology and often by a chronic course, which requires a clearer distinction between indicators that are influenced during the course of treatment and those that are of a more stable nature. Indicators related to body image and symptom-specific cognitions and behaviors (for example, "Drive for Thinness," "Body Dissatisfaction," and the composite "Eating Disorder Risk") decrease significantly in remission, alongside with restoration of body mass index and reduction of overall psychological maladjustment. In contrast, constant constructs - most notably "Emotional Dysregulation" and "Overcontrol"- remain stable and in remission they have high prognostic value for BMI. In this context, monitoring patients across different phases of the disorder has not only scientific but also practical value, because it supports the early identification of risk profiles and the optimization of the long-term therapeutic plan. The significance of the topic is also determined by the need for more empirical data in the field of eating disorders in the adolescent population, in order to support clinical decisions regarding maintenance treatment, family intervention, and relapse prevention. Alongside this, studies involving patients in adolescence are of particular value, because it is precisely in this age group that the disorder intensely affects psychological maturation, identity formation, and social functioning. This necessitates the application of a multidisciplinary approach in which psychiatric, psychological, pediatric, and family-oriented care are coordinated over the long term.

The literature review is systematic and informative. It covers historical concepts, diagnostic classifications, epidemiology, etiological models, triggers, clinical presentation, and instruments for evaluation of eating disorders, allowing interpretation of the author's results in the context of contemporary knowledge. The author discusses the principal etiological models and frameworks, relevant triggers, and the clinical presentation of anorexia nervosa in adolescence, and provides an overview of the instruments used for the assessment of eating disorders. The selected and cited literature is appropriate and sufficiently comprehensive, and it enables the results of the author's own empirical analysis to be interpreted and positioned within the context of contemporary scientific knowledge and established clinical understanding.

The dissertation is structured around two interrelated **aims** of high clinical relevance. The first aim is focused on monitoring and analyzing constant and variable psychological characteristics in adolescent patients with anorexia nervosa, both in the active phase of the disorder and in remission, through the application of the standardized self-report instrument EDI-3. The second aim is directed toward substantiating the importance of personalized therapeutic strategies, in which, after restoration of clinical indicators, the therapeutic focus shifts toward long-term psychotherapeutic work on emotional regulation and personality patterns that sustain vulnerability. This dual aim framework provides an integrated interpretative basis and allows the findings to be considered not only cross-sectionally, but also from the perspective of longer-term clinical follow-up and relapse-related risk.

The **objectives** are logically derived from the goals and implemented consistently through relevant indicators, a standardized instrument, and appropriate statistical methods. A conceptually strong aspect of the dissertation is that recovery is not examined solely through the prism of somatic stabilization, but is conceptualized as a complex and multidimensional process in which certain

psychological vulnerabilities may persist even after clinical improvement. Precisely this perspective adds practical value to the research design and facilitates a direct link between the obtained results and decision-making in real clinical practice.

Design, contingent and methodology: The study included a total of 45 adolescent participants, distributed into groups according to clinical phase: 27 patients in the active phase and 18 patients in remission. The research was carried out in both clinical and outpatient settings during the period from October 2020 to October 2024. The **standardized self-report questionnaire EDI-3** (Eating Disorder Inventory-3) was used as the assessment instrument; it is appropriate to the stated aims and allows a comprehensive evaluation of eating-related, emotional, and personality-related parameters. Completion of the questionnaire was facilitated by its self-report format. The methodology was applied correctly and in accordance with the research design. The obtained data were analyzed systematically and interpreted within a clinical context. Statistical processing was performed using the SPSS through descriptive statistics, the independent-samples t-test, and analysis of variance. The approach is consistent with the stated research aims. Approval was obtained from the Research Ethics Committee at Medical University of Varna.

Results and discussion: The results indicate the clinically expected direction of change in somatic indicators with restoration of nutritional status and substantially higher values of the body mass index in the remission group compared with the acute phase. The reported mean body mass index values (approximately 14.98 in the active phase versus 19.33–19.34 in remission) verify that the study genuinely captures therapeutic change and that the groups are differentiated according to a clinically valid criterion. This result demonstrates internal consistency among the design, participant selection, and the obtained empirical data.

A particularly important contribution is the evaluation of psychological dynamics using the EDI-3, which demonstrates a pronounced decrease in overall symptom burden as patients move from the active phase to remission. The stated mean values of the total score ($M = 147.67$ in the acute phase versus $M = 96.56$ in remission) support the conclusion that remission is not defined solely by anthropometric recovery, but also includes reduction across a broad spectrum of cognitive and emotional-behavioral indicators characteristic of the eating disorder.

The results are discussed with the necessary caution regarding the psychometric instrument and the specific characteristics of the sample. It is acknowledged that the clinical group is homogeneous (including only patients with anorexia nervosa), and that the Bulgarian version of the EDI-3 lacks standardization for an adolescent clinical population in an identical format; for this reason, analysis of raw scores was used. This methodological transparency increases the credibility of the conclusions and demonstrates a research approach in which limitations are not concealed, but are incorporated as part of the scientific argumentation.

A central focus of the study is the differentiation between variable and stable characteristics. The comparative analysis substantiates that part of the indicators (the psychological characteristics) are treatment-sensitive and improve in remission, whereas other psychological constructs retain relative stability and may function as mechanisms maintaining vulnerability. In the concluding section, this is formulated clearly through emphasis on emotional dysregulation and overcontrol as factors that remain clinically significant even after somatic stabilization.

The discussion of the results is conducted in the context of contemporary literature and is directed toward the clinical applicability of the established associations. The thesis holds that, following normalization of somatic indicators, the therapeutic focus should shift toward longer-term psychotherapeutic work targeting enduring personality-regulatory mechanisms, which do not change to the same extent as somatic and behavioral symptoms. This conclusion corresponds to contemporary principles of personalized psychiatric care. In summary, the section “Results and Discussion” is developed in accordance with the aims of the dissertation.

Limitations and shortcomings: Certain methodological limitations should be acknowledged, as they are relevant to precise interpretation of the results and to the extent of their generalization. First, the study was implemented in a single-center clinical environment and on a relatively limited contingent, which reduces the possibility of extrapolation to broader populations with different social and clinical profiles. From the presentation of the design, the impression remains that not all patients in remission were initially assessed in the active phase and actually followed over time as the same individuals. The use of raw scores from the psychometric instrument in this specific sample is an understandable methodological decision, but it should also be considered as a factor requiring caution in comparisons with other populations and in broader-scope interpretations. The stated limitations have the character of constructive reviewer remarks and outline logical directions for further development of the research: a prospective design with individual follow-up from the acute phase to remission, multicenter recruitment of the contingent, and a longer time horizon. It is precisely in such a perspective that the contributions of the present work can be further validated and expanded. In addition, the need to build a connection between therapeutic interventions and the guidelines that the described study results provide can also be discussed. For example, how they can be used as prognostic factors or as markers for selecting a therapeutic strategy. I strongly hope that work in this direction will continue in the coming years.

Contributions and practical value: The dissertation has clear scientific and applied merits. It presents empirical data on the psychological profile of adolescents with anorexia nervosa in different clinical states, differentiates indicators of variable nature from relatively stable characteristics, and defends the necessity for prolonged psychotherapeutic interventions after normalization of somatic indicators. The results are important for optimization of treatment strategies and for relapse prevention. The presented data demonstrates consistent improvement in remission with in terms of overall symptomatology, while simultaneously highlighting stable psychological constructs that require long-term therapeutic commitment. This two-layer interpretation - simultaneous recognition of therapeutic progress and identification of residual vulnerability - defines the scientific and practical value of the study and makes the results applicable to planning follow-up, rehabilitation, and relapse prevention in adolescents with anorexia nervosa.

Seven **conclusions** have been formulated; they correspond to the stated aim and objectives, are derived from the results and discussion, and are presented clearly.

The submitted dissertation consists of 142 pages, distributed across 8 chapters and a bibliography, and includes 31 tables, 3 figures, and 2 graphics. A total of 454 literature sources are cited, 5 of which are in Cyrillic and 449 in Latin script. The dissertation is structured in accordance with the adopted scheme: contents, introduction, literature review, aims and objectives, study contingent and research methodology, results and discussion, summary of findings, conclusion and

bibliography. Publications on the dissertation topic in Bulgarian scientific journals are presented, as well as participation in scientific forums. The abstract accurately reflects the structure, aims, and main conclusions of the dissertation.

In conclusion: The dissertation submitted by Dr. Gabriela Valentinova Gacheva on "Follow-up of constant and variable characteristics in the acute phase and in remission in adolescent patients with anorexia nervosa," meets the requirements for awarding the educational and scientific degree "Doctor" under the Law for Development of the Academic Staff in the Republic of Bulgaria, its implementing regulations, and the Regulations of MU - Varna. I provide a positive assessment and propose that the Scientific Jury award Dr. Gacheva the educational and scientific degree "Doctor" in Medicine in the doctoral programme "Child Psychiatry".



Заличено на основание чл. 5,
§1, б. „В“ от Регламент (ЕС)
2016/679

1

Date:

09.02.2026

Written by:

Prof. d-r Georgi Panov, MD, PhD, DSc