

STATEMENT

By Assoc. Prof. Desislava Ignatova, MD, PhD,

from the Department of Psychiatry and Medical Psychology at the Medical University (MU) Sofia, member of a scientific jury according to Order No. R-109-497 / 02.12.2025 of the Rector of the Medical University – Varna

for the acquisition of the scientific and educational degree “Doctor”
under the doctoral programme “Child Psychiatry”, professional field 7.1 Medicine

PhD thesis topic: “Follow-up of constant and variable characteristics in the acute phase and in remission in adolescent patients with anorexia nervosa”

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Biographical data

Dr Gabriela Valentinova Gacheva was born in 1994 in the city of Varna. She graduated Medicine from the Medical University – Varna in 2019, after which she specialized in Child and adolescent psychiatry from 2019 to 2025 at the Clinic of Child and Adolescent Psychiatry at St. Marina University Hospital, Varna. From 2020 to 2025, she was a lecturer at the Medical University – Varna. At present, Dr Gabriela Valentinova Gacheva works as a child psychiatrist at the Clinic of Child and Adolescent Psychiatry at St. Marina University Hospital and continues to be a lecturer at the Medical University – Varna. Dr Gacheva is a member of the Bulgarian Medical Association, the Bulgarian Association of Child and Adolescent Psychiatry and Allied Professions, as well as international organizations such as ECNP and IACAPAP. She has excellent command in English as a foreign language.

Characteristics and evaluation of the Dissertation

The dissertation is devoted to a clinically relevant and socially significant problem - anorexia nervosa. Owing to the growing data on the increasing prevalence of eating disorders, their progressively earlier onset, and the possibility of severe course with a high risk of chronic course and lethal outcome, scientific research into the psychological characteristics related to the onset and maintenance of the disorder highly relevant.

The dissertation is **structured in accordance with the requirements** of the Regulations for the Development of the Academic Staff at the Medical University “Prof. Dr. Paraskev

Stoyanov” – Varna and includes all mandatory structural elements: introduction, literature review, aim and objectives of the study, participants and methodology, results and discussion, conclusions, summary, and references. An abstract in Bulgarian and English is also provided, structured in compliance with the regulations of MU-Varna. Two publications related to the topic of the dissertation are attached, one of which is published in a scientific journal indexed in international databases (Bulgarian Journal of Psychiatry, 2022), while the other is published in a non-indexed scientific journal.

The **literature review** demonstrates in-depth knowledge of the research problem, addressing eating disorders, and anorexia nervosa in particular, from historical, etiological, pathogenetic, and clinical perspectives. The main risk factors and triggers for the onset of the disorder are presented, along with data on clinical presentation, course, and prognosis. Various assessment instruments are discussed, and a justification is provided for the selection of the Eating Disorder Inventory – Third Edition (EDI-3), a self-report instrument designed to assess psychological characteristics and constructs associated with the development and maintenance of eating disorders.

The **aim** of the dissertation is to analyze stable and variable psychological characteristics in adolescent patients with anorexia nervosa in the active phase of the disorder and in remission, with a focus on personality traits and patterns that persist after clinical recovery and maintain the vulnerability to the disorder, with the ultimate goal of developing personalized therapeutic strategies for patients with anorexia nervosa.

The **methodology** comprises an observational cross-sectional study conducted in a clinical sample of adolescents with anorexia nervosa in the active phase (27 patients) and in remission (18 patients). The psychological characteristics are assessed using the self-report EDI-3 instrument, which includes 12 primary and 6 composite scales. Statistical analyses are performed to identify characteristics that differ between patients in the active phase and those in remission (variable characteristics), as well as those that remain relatively stable.

The **results and discussion** are presented in a single integrated section, with each result followed by a discussion placing the findings in the context of the existing scientific literature, and subsequently by the formulation of study **conclusions**. Participants in the active phase of the disorder demonstrate an early age of onset of anorexia nervosa (mean age 14 years), low body weight (mean 39.83 kg), low body mass index (mean BMI 14.98), and clinically significant cognitive and behavioral symptoms of an eating disorder. Among patients in remission, the mean age is approximately 17 years, with clinically significant improvement in body weight, desired weight, normalization of BMI, and a substantial reduction in the total EDI-3 score.

The patients in remission show lower scores on characteristics directly related to the eating disorder and body image (“drive for thinness,” “body dissatisfaction”), restrictive behavioral patterns (“overcontrol,” “asceticism”), as well as experiences of ineffectiveness and alienation (“interoceptive deficits,” “low self-esteem,” “personal alienation”). In accordance with clinical remission, lower scores are also observed on the composite scales “risk of eating disorder” and

“general psychological maladjustment.” Analysis of risk factors indicates that “drive for thinness” and “body dissatisfaction” are key to the development and maintenance of anorexia nervosa, while “emotional dysregulation” and “overcontrol” demonstrate the highest predictive value with respect to body mass index.

Despite achieved remission, several psychological constructs, such as “perfectionism” and “interpersonal insecurity,” do not show statistically significant differences between groups. The conclusion that normalization of body weight and BMI is not equivalent to full psychological recovery has substantial clinical and practical significance for the treatment and follow-up of adolescent patients with anorexia nervosa and supports the necessity of a comprehensive and long-term therapeutic approach that extends beyond the achievement of clinical remission.

Among the **contributions** of the study is the presentation of data on the psychological characteristics of adolescents with anorexia nervosa in the active phase and in remission within a Bulgarian clinical sample, as well as the focus on personality characteristics that maintain vulnerability to the disorder. These contributions are consistent with contemporary concepts of anorexia nervosa and represent an indisputable strength of the work.

Critical remarks

Several **methodological limitations** of the study are evident, related to its design, structure, sample size, and the statistical methods used for analysis. The sample is not clearly defined in the text: the studied participants include 27 patients in the active phase of the disorder, some of whom were followed up into remission, as well as 18 patients in remission, some originating from the follow-up group and others assessed only during remission. This heterogeneity complicates the interpretation of the results both with respect to longitudinal change (as in analyses of dependent samples) and between-group comparisons, since the remission group does not constitute a homogeneous and clearly defined sample.

A major limitation of the **statistical analyses** is the use of parametric methods for a small sample size, which is associated with a high risk of type I and type II errors, particularly in regression analyses. Therefore, interpretation of the results should be extremely cautious, and the conclusions should be regarded primarily as hypotheses for future research rather than definitive findings. As a **recommendation** for statistical analysis in small samples (typical for rare disorders), the application of non-parametric methods, exact tests (e.g., Fisher’s exact test), and sensitivity analyses (bootstrapping) would be more appropriate. To better demonstrate the clinical significance of observed differences, the presentation of effect size measures, such as Cohen’s *d*, is recommended. In cases where statistical significance cannot be demonstrated due to limited sample size but clinically meaningful differences are present, effect size estimation represents the most suitable analytical approach; the identification of a large effect size (Cohen’s *d* > 0.8) would clearly demonstrate the practical significance of the findings.

Additional limitations of the study include the use of only one self-report instrument, the absence of clinical assessment and detailed clinical information regarding the therapeutic

approaches applied, as well as the lack of a control group (healthy adolescents or patients with other psychiatric disorders). These limitations may also be viewed as **directions for future research** on the dissertation topic. Inclusion of a control group would allow clearer differentiation between personality characteristics specific to anorexia nervosa and more general features of adolescent psychopathology and development. The addition of information on therapeutic methods would contribute to more adequate clinical interpretation of the results and a more substantiated analysis of recommendations for a comprehensive therapeutic approach.

Despite the limitations, some of which are appropriately acknowledged by the author, the dissertation represents an **independent scientific study conducted by the author** with clear **clinical and practical significance** and **meets the qualitative criteria** of the Medical University of Varna for the acquisition of the PhD degree. The obtained results contribute to the accumulation of empirical data on the psychological characteristics of patients with anorexia nervosa in the active phase and in remission and provide a foundation for future research in this field.

Minimum quantitative criteria

The comparison of Dr. Gacheva's indicators with the requirements for the Minimum Scientometric Criteria of the Medical University – Varna are presented in Table 1, and demonstrates that they exceed the required minimum quantitative thresholds for the acquisition of the PhD degree.

Table 1. Comparisons on indicators as per Minimal requirements of the Medical University – Varna for PhD

Indicators:		Minimal requirements for doctoral degree PhD by MU-Varna	Dr. Gacheva
A	Indicator 1	50 points	50 points
Б	Indicator 2	-	-
В	Indicators 3 и 4	-	-
Г	Sum of or indicators 5-9	Total number of publications: 2, of which 1 with in journals indexed in scopus/web of science: Publications in journals indexed in scopus/web of science 60/n: Publications in other sources: 30/n	(Bulg. Sp. Psihiatr. 2022) - 30 т. (VFU. 2025) – 15 т. Total: 45 p.
Д	Sum of or indicators 10-12	-	-
Е	Sum of or indicators from 13 to final indicator	-	-
	Total score	80 points	95 points

Conclusion

The dissertation submitted for evaluation **meets the qualitative and quantitative criteria** of the Medical University – Varna for the award of the **educational and scientific degree “Doctor”**. Therefore, I give my **positive assessment** of the dissertation for the acquisition of the degree “Doctor” under the doctoral programme “Child Psychiatry” in the field of higher education 7. Health and Sports and professional field 7.1 Medicine by **Dr Gabriela Valentinova Gacheva**.

03.02.2026

Sofia

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