

## **TCA - Trouble du comportement alimentaire : addictions, poids extrêmes**

Rapport Hcéres

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# HCERES

High Council for the Evaluation of Research  
and Higher Education

Research units

HCERES report on research unit:

Troubles du comportement alimentaire : Addictions &  
Poids Extrêmes

TAPE

Under the supervision of the following  
institutions :

Université Jean Monnet Saint-Etienne - UJM

# HCERES

High Council for the Evaluation of Research  
and Higher Education

Research units

*In the name of HCERES,<sup>1</sup>*

Didier HOUSSIN, president

*In the name of the experts committee,<sup>2</sup>*

Bernard VIALETES, chairman of the committee

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Under the decree No.2014-1365 dated 14 november 2014,

<sup>1</sup> The president of HCERES "countersigns the evaluation reports set up by the experts committees and signed by their chairman." (Article 8, paragraph 5)

<sup>2</sup> The evaluation reports "are signed by the chairman of the expert committee". (Article 11, paragraph 2)

# Evaluation report

This report is the result of the evaluation by the experts committee, the composition of which is specified below.

The assessments contained herein are the expression of an independent and collegial deliberation of the committee.

Unit name:	Troubles du comportement alimentaire, Addictions & Poids Extrêmes
Unit acronym:	TAPE
Label requested:	MESR, EA universitaire
Present no.:	
Name of Director (2014-2015):	
Name of Project Leader (2016-2020):	Mr Bogdan GALUSCA

## Expert committee members

Chair:	Mr Bernard VIALETES, University Aix-Marseille
Experts:	Mr Jean-Louis NANDRINO, University of Lille 3 (representative of the CNU)
	Mr Ruben NOGUEIRAS, University Santiago de Compostela, Spain

### Scientific delegate representing the HCERES:

Mr Jean GIRARD

### Representatives of the unit's supervising institutions and bodies:

Ms Aurélie CHANNET, Affaires médicales, CHU St-Etienne

Mr Christophe DESRAYNAUD (representative of the Doctoral School SIS n°488)

Mr Didier LE BARS, CERMEP, Lyon

Mr Youcef OUERDANE, University Jean Monnet, St-Etienne

# 1 • Introduction

## History and geographical location of the unit:

This research unit is presently created *de novo* and hosted in the University Jean Monnet of Saint-Etienne. The team is mainly constituted of clinicians in either Nutrition, Endocrinology or Psychiatry issued from three different research units:

- Laboratoire Epsilon (EA 4556) located in Montpellier but with a subbranch residing in Saint-Etienne (PU-PH: 2, PH: 1, Psychologists: 2);
- *Laboratoire de Physiologie de l'exercice* (EA 4338), Saint-Etienne (PU-PH: 2, MCU-PH: 1, CCA:1) ;
- UMR 7289, *Institut des Neurosciences de la Timone* (Marseille) (PU-PH: 1).

The location of the unit is the university premises of the Department of Endocrinology and Metabolism in the *Hopital Nord* of the CHU of Saint-Etienne.

## Management team

Mr Bogdan GALUSCA

## HCERES nomenclature

SVE1\_L4

## Unit workforce

Unit workforce	Number as at 30/06/2014	Number as at 01/01/2016
<b>N1:</b> Permanent professors and similar positions	7	5
<b>N2:</b> Permanent researchers from Institutions and similar positions		
<b>N3:</b> Other permanent staff (without research duties)	2	2
<b>N4:</b> Other professors (Emeritus Professor, on-contract Professor, etc.)		
<b>N5:</b> Other researchers from Institutions (Emeritus Research Director, Postdoctoral students, visitors, etc.)		
<b>N6:</b> Other contractual staff (without research duties)	3	3
<b>TOTAL N1 to N6</b>	<b>12</b>	<b>10</b>

Unit workforce	Number as at 30/06/2014	Number as at 01/01/2016
Doctoral students	3	
Theses defended	4	
Postdoctoral students having spent at least 12 months in the unit		
Number of Research Supervisor Qualifications (HDR) taken	7	
Qualified research supervisors (with an HDR) or similar positions		

## 2 • Overall assessment of the unit

### Global assessment of the unit

The global assessment of the unit is good.

The research unit is the outcome of a long-term collaboration between endocrinologists and psychiatrists in the care of patients suffering from eating disorders and related addictive behaviors. This kind of collaboration allows a multidirectional approach based on a large recruitment and a very robust phenotyping of the patients which are important prerequisites in this research field.

The phenotypic definition of the “constitutive thinness syndrome” is particularly original and useful as it furnishes an original control group minimizing the participation of under nutrition as a major bias in the study of anorexia nervosa. Besides, this clinical entity is by itself a promising model to explore phenomena involved in the body energy storage and expenditure regulatory processes.

The transversal approach combines genetics, omics, functional brain imaging and therapeutic trials. These researches are particularly useful in a group of diseases of which the pathogenic mechanisms remain obscure, if not totally unknown. This lack of knowledge mostly explains why the usual therapeutic approaches are still palliative and so disappointing.

### Strengths and opportunities in relation to the context

Long term experience of collaborative clinical practice and research between endocrinologists and psychiatrists.

Rarity of research units involved in the field of eating disorders especially at the National level. This situation is partly due to the position of these diseases at the intersection of neurosciences, nutrition and metabolism and psychiatry.

Real originality due to the clinical model based on identification and characterization of the rare “Constitutive Thinness Syndrome” and recruitment of some pedigrees with a familial distribution of this phenotype.

National recognition of expertise of the group with qualitatively a rather good scientific production in ranked A-B journals in endocrinology during the last 10 years (J Clin Endocrinol Metab [3], Diabetes Care [1], Endocrinology [1]) and psychiatry as well (Psychoneuroendocrinology [2], J Psychiatry Neurosci [1], Arch Gen Psychiatry [1]). It is worthy to note that there is few research teams on this topic in France and the Saint-Etienne’s one should be considered as one of the most productive.

A large local recruitment of patients suffering from either eating disorders or constitutive thinness syndrome and a biobank of more than 3000 plasma samples stored.

The active participation to national (GIR AFDAS TCA) and European (CostB6, INTACT) networks even if some of these programs are closed since few years.

Allocation of public and private funding: inter-regional PHRC (2009, 2012, 2014), Nestlé Institute of Health Sciences and pharmaceutical industry.

The recent recruitment of a PU-PH in psychiatry from Marseille (Mr Eric FAKRA) with a large experience of functional brain imaging.

An access to CERMEP imaging center (GIE, Economic Interest Group, of which Saint-Etienne Hospital is member) in Lyon.

### Weaknesses and threats related to the context

The absence of full time researcher is critical as the real time for research of every participant of the team does not exceed 50% and even could be less (especially for clinicians).

A very weak scientific logistic as the team is mainly depending upon other structures located outside for the totality of the projects: biochemical and molecular biology in several laboratories, functional brain imaging in the regional platform “CERMEP”, etc.

Absence of geographic unity of the research unit risking to impair the exchanges between various researchers. The opening of a "Reference Center on Eating Disorders" inside the Hospital should welcome academic premises to facilitate the scientific life of the unit.

The projects are probably too numerous for the available research time of the team. There is some gap between neuropsychologic investigations and the search for an explanation of the resistance of the subjects with a constitutive thinness syndrome to gain weight.

Although a good publication rate in high ranked journal (A or B rank) was observed during the 10 last years, a tendency toward softening characterized the last 5 years. The annual rate of publications in referenced journals during this period was rather low (2014: 3, 2013: 2, 2012: 3, 2011: 4, 2010:3, 2009: 6) for 7 permanent professors in the team.

### Recommendations

To avoid thematic dispersion, the activity should be centered upon the most federative and/or fruitful projects: mainly functional brain imaging and constitutive thinness syndrome. The others aspects (embodied cognition, transcranial magnetic stimulation, pathological gambling, ect.) should be considered as complementary or ancillary projects of the preceeding ones.

The rapid recruitment of permanent researchers is mandatory. But it is also important to increase the time dedicated to research in seniors of the team and students as well. Presence of full time researchers could offer a better guidance to the students. The asserted support of university should be concretized by both providing academic spaces and possibility to recruit full time scientists (post-doctorate researchers, engineers, ect.). In this context, the ratio of PIs vs PhD students/postdocs is unbalanced (more HDR than PhD students and postdocs together), and thus the support of the university to obtain fellowships would be recommended.

Efforts are needed to improve the quality and the rate of scientific publication.