

Binge eating and drinking among alcoholics at night clubs in Dar es Salaam, Tanzania

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ABSTRACT

This study was done among alcoholics at night clubs in Dar es Salaam, Tanzania to specifically identify characteristics of binge eating and drinking, pinpoint binge eating episodes during binge drinking, and describe the awareness of the effects of binge eating during binge drinking. longitudinal design, participatory observations, conversational interviews and phenomenological analysis were used to collect and analyse data obtained from a population of 30 alcoholics, 12 waiters and 4 cooks, who were obtained using purposive sampling technique. The results reveal that binge eating is characterized by eating ugali or chips with 0.5 kg of fried chicken, pork, or beef, eating fried bananas with 1 bowl of chicken or beef soup, and eating only 0.5kg to 1 kg of fried chicken, pork or beef. They also reveal that binge drinking is characterized by drinking 3 to 5 bottles of beers within 30 to 60 minutes, 1 to 2 bottles of wine or a mixture of spirits and soda within 60 to 120 minutes, 1.5litres of water within 5 to 15 minutes after feeling exhausted and continue to drink alcohol, and

pausing 20 to 30 minutes by laying the head on the table for a short sleep and continue to drink after awaking. They further reveal that binge eating during binge drinking takes place more than 3 times within an interval of 1 to 1.5 hours. They finally reveal that alcoholics are aware that binge eating during binge drinking leads to obesity and overweight, money squandering, sleeping complications, blood sugar level increase, cardiovascular dysfunctions and cancers. It is therefore concluded that alcoholics at night clubs are hazardously engaging in binge eating and drinking while having basic knowledge of their detrimental effects. The study also advices government authorities to establish means of controlling food and alcohol services to sustain alcoholics' health.

Keywords: *Alcoholics, binge eating, binge drinking, DSM-5, liquor drinks, Dar es Salaam, Tanzania*

INTRODUCTION

Binge eating is simply understood as excessive intake of food than nutritiously expected and often taken by many people. DSM-5 describes binge eating as one of the disordered eating behaviors that is clinically identified with criteria such as recurrent eating huge portion of food due to loss of eating control, and eating when not feeling hungry and often becoming uncomfortably full (American Psychiatric Association [APA], 2013). However, ever since it is an eating disorder pathology, its prevailing

condition is dimensionally diagnosed as mild when occurring 1-3 times per week, as moderate when occurring 4-7 times per week, as severe when occurring 8-13 times per week, and extreme when occurring 14+ times per week (American Psychiatric Association [APA], 2013).

Binge drinking is also understood as excessive consumption of alcoholic substances such as beer, wine, and spirits that makes blood alcohol concentration (BAC) to reach $\geq 0.08\%$ and deteriorates soberness and self-control (National Institute on Alcohol Abuse and Alcoholism [NIAAA], 2021). Records show that beers having 4% to 5.5% of alcohol, spirits having 35% to 40% of alcohol, and wines having 7% to 18% of alcohol are the most used substances among alcoholics who do binge drinking (World Health Organization [WHO], 2018). Its prevalence varies across the globe and mostly identified among adolescents and young adults with antisocial and substance abuse behaviors and alcohol use disorder. Its onset is reported to be determined by the history of alcohol drinking in the family, pressure from peers, prolonged alcohol use and high level of alcohol tolerance, a desire of securing social camaraderie, and a sense tension reduction (Kuntsche, Rehm & Gmel, 2004).

The distribution of binge drinking is estimated in a ratio of 1.8 among 59.9% of current drinkers in Europe and 2.9 among 32.2% of current drinkers in Africa (World Health Organization [WHO], 2018). A cross-sectional study done in Asia, Latin

America, and Caribbean concluded that about 17.7% of university students who were wealthier and coming from upper middle or high income countries had practiced binge drinking (Peltzer & Pengpid, 2018). Another National Income Dynamics Study done in South Africa reported that about 43.0% of male and females aged 25-34 years had spent a lot of time drinking over the weekend, thus identified with binge drinking (Vellios & Van Walbeek, 2018). Another cross-sectional study done among 3,265 alcohol users aged 24-65 years in Mozambique reported that about 40% practiced binge drinking on weekends (Padrão et al., 2011) due to depression, marital status and food insecurity (Wainberg et al., 2018). Elsewhere like in Kenya, Uganda and Tanzania, binge drinking is reported to prevail when adolescent and adult alcoholics attend ceremonies and outgoing parties, come from work in between 5pm to 11pm, or go for weekend vacations in clubs or bars which sell alcohol in promotion and less-cost bundles (Odenije, 2006; Willis, 2006; Birech et al., 2013; Wills, 2014; Mugane, 2023).

Following consistency in binge drinking along countries with high prevalence of alcohol consumption, including Tanzania, it is noticed that most alcoholics do binge eating before and after starting to drink alcohol (Franko et al., 2005). For instance, a systematic review and meta-analysis study done by Bogusz et al. (2021) has found that 19.9% of alcoholics with alcohol use disorder were associated with binge eating episodes before and during drinking

moments. Amongst, male who seem to spend a lot of time in drinking are the most binge eaters than female (Heidelberg & Correia, 2009; Khaylis et al., 2009; Harrop & Marlatt, 2010). However, there seem to be little information that unveil how binge eating looks like during longtime use of alcohol among alcoholics. This goes hand in hand with identification of characteristics and episodes of binge eating during longtime use of alcohol. It further seems that a lot of studies on eating patterns of alcohol users have generally talked about and shown adolescents and young adults in our communities as most studied population, neglecting alcoholics in night clubs who are likely subjected to binge eating and binge drinking due to spending considerable-long hours in drinking. Therefore, due to such concerns, this study was worthy to address the information gap so as to inform alcoholic users and authorities on detrimental aspects of binge eating and drinking and not compromise their wellbeing by controlling both alcohol supply and consumption at night clubs.

The study specifically sought to:

1. Identify characteristics of binge eating and binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania
2. Pinpoint binge eating episodes during binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania
3. Describe the awareness of the effects of binge eating during binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania

RESEARCH METHODOLOGY

Research Design

This study employed longitudinal design to understand how binge eating and drinking is manifested among alcoholics at night clubs in Dar es-Salaam. The design helped to carry out a study for about 4 months so as to collect detailed information about binge eating and drinking experience, describe the order of their occurrence in relation to time changes and dynamics of alcoholics' behaviors, and make comparison between the earlier and the late binge eating and drinking circumstances to understand the whole processes and reality (Anstey & Hofer, 2004). This was possible through accessing respondent alcoholics, waiters and cooks repeatedly while conversing about binge eating and drinking experience and observing necessary aspects which helped to answer the objectives.

Area of the Study

The study was carried out in 7 most popular night clubs by the name of Dance Club & Bar at Mpakani, Chikaz Pub & Night Club at Kimara Stop over, Kitambaa Cheupe Lounge at Sinza, Grand Nolasco Night Clubs at Kigamboni, Mi Casa Lounge at Ubungu, New Ibungu Bar & Lounge at Mabibo, and KB Bar & Night Club at Tegeta-Kibaoni located in 5 administrative districts of Dar es Salaam, Tanzania. These night clubs were purposively involved in the study because they customarily host live-band shows and famous musicians' concerts on weekends, thus accessed by different people who eat and

drink while watching the live performances. They were also involved in the study because on weekends they do sell foods and alcohol at less cost and bundle-promotions, thus accessed by most alcoholics who likely eat and drinking in a nonstop manner. So, due to such reasons, they were physically visited by the researcher on weekend days for the study.

Population and Sampling

Alcoholics who spent more than 5 hours drinking alcohol, waiters and cooks at the kitchen participated as respondents of the study. Alcoholics who spent such drinking hours were involved so as to narrate their experience and motives toward recurrent eating certain portion of food [bingeing] when drinking alcohol for so long. They also participated to inform whether they were aware of the effects of binge eating in the sequence of binge drinking and to what extent they thought it would affect their lives. Waiters were also involved in the study because they have been serving alcoholics with food and liquor drinks, thus able to describe the characteristics and episodes of binge eating and drinking. Cooks at the kitchen were finally involved in the study because they have been receiving food orders in bulky per individuals, thus able to describe binge eating characteristics and episodes. However, purposive sampling technique was employed to recruit 30 alcoholics, 12 waiters and 4 cooks at the kitchen, who willingly participated after meeting researcher's intention of getting respondents who are able to spend more than 5 hours eating and drinking and having abil-

ity to give detailed information about binge eating and drinking. Hence, through direct contact with the respondents, the researcher approached such a sample size because they were sought to satisfactorily answer the study objectives.

Data Collection, Analysis and Presentation

Participatory observations and conversational interviews were used to capture respondents' views and experiences regarding continual eating huge portion of food and alcohol drinking, together with observable events relevant to binge eating and binge drinking. The obtained information and observable aspects were recorded in researcher's phone notepad for referencing during data analysis. Phenomenological analysis was thereafter run to first categorize respondents' views and opinions and thereafter contextualize answers based on the study objectives. This was through revising the highlighted points as shared by the respondents, sketching meanings and understanding in correspondence to specific objectives, and conceptualizing the sketched meanings and understanding to reflect the prevailing context. Finally, the data are presented in tabular form, showing highlighted points that are well elaborated within corresponding paragraphs.

Ethical Considerations

Ever since studies like these are subjective to vulnerable situations, the researcher had to adhere to known professional, research

and religious ethical standards for his safety and those being studied. Throughout participatory observations, the researcher had to physically position himself without imposing doubts to studied population or disclosing any kind of conflict of interest that would alter the provision of services to the customers. He also established friendship with the respondents before initiating conversations by winning their trust and showing intention of wanting information for personal understanding. During data recording, the researcher used the notepad of his phone to jot down viewpoints as where observed and shared by respondents, so as to not disturb the comfort of the customers who would be biased after knowing that they are being studied. Therefore, the study was successful because the researcher tried to maintain soberness by not getting drunk or misbehaving anyhow.

RESULTS

This section presents the results analysed from observable aspects and answers given

by the respondents. The presentation of the results is based on specific objectives of the study as indicated in subsequent tables.

Study Objective 1: To identify the characteristics of binge eating and drinking among alcoholics at night clubs in Dar es Salaam, Tanzania

The first objective of this study sought to identify the characteristics of binge eating and drinking among alcoholics at night clubs in Dar es Salaam, Tanzania. To answer this objective, the researcher had to observe eating and drinking patterns of the alcoholics who spent more than 5 hours drinking and converse with waiters and waitresses and cooks at the kitchen, so as to provide data that inform the kind and proportion of binge eating and drinking as presented in subsequent Table 1 and 2.

Table 1. Characteristics of Binge Eating among Alcoholics at Night Clubs in Dar es Salaam

S/N	Characteristic	Duration
1	Eating 1 to 2 plates of ugali and half (0.5) kg of fried beef	Within 8 to 15 minutes
2	Consuming 1 bowl of beef or chicken soup and fried bananas	Within 5 to 9 minutes
3	Eating 1 to 2 plates of chips and half (0.5) kg of fried beef	Within 7 to 10 minutes
4	Eating only 0.5 or 1 kg of fried chicken, pork or beef	Within 7 to 12 minutes

Source: Field Data (2024)

The results in Table 1 indicate that binge eating among alcoholics in night clubs take place in multidimensional aspects. As a matter of fact, it is true that most alcoholics are common

consumers of foods reach in carbohydrate, fat/lipids and protein. The results show that they often consume ugali which is an African food that is made by mixing maize flour or other cereals like wheat and boiled water, thus believed to contain carbohydrate and used to energize the body. They also show that alcoholics often consume boiled or fried cow or goat beef, pork or chicken because they are aware that such foods contain protein and lipid supplements, thus helpful in body repairing after binge drinking.

Based on the results in Table 1, it seems that alcoholics in night clubs do consume such foods because they are nutritious and helpful in maintaining their health statuses. However, they seem to excessively

consume such foods within short period of time without considering how they will detrimentally affect their physiological wellbeing, instead, they mostly consume to prevent hunger during drinking. Therefore, due to such results, it is likely that alcoholics who do binge eating in night clubs do violate dietary principles and quicken digestion complications.

Table 2. Characteristics of Binge Drinking among Alcoholics at Night Clubs in Dar es Salaam

S/N	Characteristic	Duration
1	Ordering and drinking 3 to 5 bottles of beers (330 or 500mls)	Within 30 to 60 minutes
2	Ordering and drinking 1 to 2 bottles of 750mls of wine or spirits, ice bogs and soda for mixing a drink	Within 60 to 120 minutes
3	Drinking a bottle of water of 1.5litres after feeling exhausted and continue to drink alcohol	Within 5 to 15 minutes
4	Pause by laying the head on the table for a short sleep and continue to drink after awaking	Within 20 to 30 minutes

Source: Field Data (2024)

The results in Table 2 indicate that binge drinking among alcoholics in night clubs take place

in multidimensional aspects. Based on the results, it seems alcoholics have developed tendency of nonstop drinking within a short period of time, thus wanting to have a lot of bottles on the table so that they may not waste time or pause to quench their drinking thirsty. It also seems that most alcoholics

in night clubs drink a lot of bottles of beer having alcohol of about 4% to 5.5% or spirits of about 35% to 40% and wines of about 7% to 18% so as to quickly get drunk and depress themselves. It furthermore seems that alcoholics in night clubs are alcohol addicts and have high level of alcohol

tolerance, so by all means they have to drink such quantity to satisfy themselves. It finally seems that most alcoholics in night clubs are substance abusers, thus binge drinking is common and habitual.

On the other hand, based on the results in Table 2, it seems excessive drinking tend to make alcoholics to feel uncomfortable [others feeling nausea] or lose their self-consciousness, thus finding means such as drinking cold water or sleeping shortly by placing their heads on the table to cool themselves and gain self-control. Therefore, due to such results, it is likely that alcoholics in night clubs do heavily intoxicate themselves despite taking other compensatory measures to reduce alcohol concentration when get drunk.

Study Objective 2: To pinpoint binge eating episodes during binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania

The second objective of this study sought to pinpoint binge eating episodes during binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania. To address this objective, the researcher had to observe how alcoholics were ordering and supplied with foods for their consumption. The researcher also conversed with the cooks at the kitchen, and waiters and waitresses who were serving the alcoholics, thus able to capture information which stipulates how binge drinking among alcoholics in night clubs takes place as presented in subsequent Table 3.

Table 3. Binge Eating Episodes during Binge Drinking among Alcoholics at Night Clubs in Dar es Salaam

S/N	Event	Duration
1	Eating once before beginning to drink	In between 8:30 pm to 9:45 pm
2	Eating 1 to 2 times during drinking	In between 12:00 am to 1:30 am (Midnight)
3	Eating once before stopping to drink	In between 2:30 am to 3:30 am

Source: Field Data (2024)

The results in Table 3 indicate that alcoholics in night clubs eat more than 3 times per the night spent for drinking. They also indicate that within an interval of 1 to 1.5 hours [60 to 90 minutes] alcoholics order and eat foods then continue to drink alcohol. Such results imply that consumed alcohol is acidic and corrosive substance that quickly

decomposes food supplements in the stomach, thus hungeriness is inevitable in the presence of binge drinking. They also imply that alcoholics in night clubs do not consider excessive eating at night as associated with lack of sleep, which influences them to continue drinking and eating whenever feeling hungry. Therefore, due to such

results, it is possible that alcoholics in night clubs are the most bingers of food and alcohol substances during sleeping hours.

Study Objective 3: To describe the awareness of the effects of binge eating during binge drinking among alcoholics at night clubs in Dar es Salaam, Tanzania

The third objective of this study sought to describe the awareness of the effects of binge eating during binge drinking among at night clubs in Dar es Salaam, Tanzania. To answer it, alcoholics who spent more than 5 hours drinking and eating conversed with the researcher so as to understand how aware are they about the effects of binge eating during binge drinking as presented in subsequent Table 4.

Table 4. Awareness of the Effects of Binge Eating during Binge Drinking among Alcoholics at Night Clubs in Dar es Salaam

S/N	Issues aware of	Reason
1	Risky to overweight and obesity	Consumption of fats and starch
2	Habitual to binge eating at night	Frequencies of bingeing per spent nights
3	Money squandering	Costs spent in buying food
4	Sleeping complications	Failure to breath when overeaten and drunk

Source: Field Data (2024)

The results in Table 4 indicate that alcoholics in night clubs are somehow aware that binge eating is detrimental to their physiological wellbeing. They acknowledge that excessive consumption of carbohydrate and lipid foods increases the level of body fats, thus promoting overweight and obesity due to inclined body mass index [BMI]. However, they seem to not have deep understanding about how binge eating during binge drinking affects their gastrointestinal tracts, cardiovascular systems and increases blood sugar level, which are the main determinants of ulcers, heart attacks, diabetes, kidney failure and cancers.

Based on the results presented in Table 4., it is also revealed that alcoholics in night clubs are aware that binge eating affects their financial and psychological wellbeing.

This implies that binge eating enforces alcoholics in night clubs to spend a lot of money in paying the bills of the foods they order and eat, thus likely experiencing financial constraints in the future. On the other hand, it implies that alcoholics in night clubs are aware that the more they get used to excessive eating at night, the more they internalize and it becomes their habit for lifetime. It also implies that alcoholics in night clubs are aware that excessive eating can slow digestion process and disturb respiration, thus hindering inhalation and promoting sleep-wake disorders. Therefore, due to such results, it is possible that alcoholics in night clubs do intentionally binge despite having basic knowledge of its effects.

DISCUSSION

This study has revealed that binge eating among alcoholics at night clubs in Dar es Salaam is characterized by eating 1 to 2 plates of ugali and half (0.5) kg of fried beef within 8 to 15 minutes, consuming soup of beef or chicken and fried bananas within 5 to 9 minutes, eating 1 to 2 plates of chips and half (0.5) kg of fried beef within 7 to 10 minutes, and eating only 0.5kg or 1 kg of fried chicken, pork or beef within 7 to 12 minutes. The study has also revealed that binge drinking is characterized by drinking 3 to 5 bottles of beers (330 or 500mls) within 30 to 60 minutes, drinking 1 to 2 bottles of 750mls of wine or a mixture of spirits, ice bogs and soda within 60 to 120 minutes, drinking a bottle of water of 1.5litres after feeling exhausted and continue to drink alcohol within 5 to 15 minutes, and pausing by laying the head on the table for a short sleep [usually 20 to 30 minutes] and continue to drink after awaking.

Such results are in harmony with those of Kuntsche, Rehm and Gmel (2004), Horváth et al. (2020), and Azevedo et al. (2021), which found that binge eating during heavy drinking among adolescents and young adults is considerable due to many determinant factors (National Institute on Alcohol Abuse and Alcoholism [NIAAA], 2021). Separately, binge eating during binge drinking is reported to be characterized by much eating foods with high calories and lipids within repeated moments to satisfy fear of feeling hungry and developing ulcers when drinking with empty stomach (Bahji, 2019),

while binge drinking is considered to be taking much quantity of alcohol to the level of losing soberness. For instance, studies done by White, Kraus and Swartzwelder (2006) and Alessandrini et al. (2018) have revealed that binge drinking is characterized by taking 5 glasses of alcoholic beverages [not specific either beer, wine or spirits] within a period of 2 hours. Other studies like of Patrick, Parks and Peterson (2023) have also revealed that binge drinking is characterized by drinking 2.58 bottles of alcoholic substances within an hour, and tentatively taking 7 to 9 bottles within 5.2 hours. Such characteristics are directly correlated with internal motives that drive individuals to binge and other social and environmental factors like peer pressures, adverse family issues, etc. (Babor et al., 2014; Githae, 2015). However, binge drinking in countries like Kenya is reported to take place when alcoholics meet in ceremonial gatherings or local clubs; and it goes hand in hand with reckless drinking to the extent of encountering physiological complications and losing self-control (National Agency for the Campaign Against Drug Abuse [NACADA], 2014; Rostrup et al., 2016; Eddah, 2019). Hence, due to such characteristics, it is true that binge eating and binge drinking among alcoholics in night clubs is characteristically compared to those of other recognized settings and it subjects alcoholics to vulnerable situations until death.

The study has also revealed that binge eating during binge drinking among alcoholics in night clubs is episodic, taking place more

than 3 times within an interval of 1 to 1.5 hours [60 to 90 minutes] per the night spent for drinking. For instance, it is revealed that alcoholics eat once in between 8:30 pm to 9:45 pm before beginning to drink, eat again 1 to 2 times in between 12:00 am to 1:30 am (midnight) after spending time to drink, and finally eat once in between 2:30 am to 3:30 am before stopping to drink.

Such results are contrary to those of Giles et al. (2006) and Pompili and Laghi (2020), which found that alcohol users in colleges have tendency of restricting to eat foods with calories when going to drink due to fear of gaining weight and control their drinking patterns. Those who take advantage of eating much food calories when going for a drink were reported to spend much time drinking throughout the day or night (Dunn, Larimer & Neighbors, 2002). However, it is likely that binge eating among alcoholics in night clubs is episodic due to several reasons and circumstances. For instance, most alcoholics in night clubs have developed tendency of episodically eating foods due to self-perceptions, availability of advertised food services and custom of taking heavy meal before beginning to drink or when feeling hungry during drinking. Hence, that is why they inevitably do binge eating more than 3 times per spent night.

The study finally revealed that alcoholics in night clubs are somehow aware that binge eating during binge drinking is detrimental to their physiological and psychological wellbeing, and prompts financial constraints

due to money squandering when paying bills. As a matter of fact, the results show that alcoholics in night clubs seem to either binge intentionally despite having basic knowledge of its effects or lack comprehensible understanding of how binge eating at night is hazardous to their health, as it may affect their gastrointestinal tracts and cardiovascular systems, increase blood sugar level, and disturb respiration and promote sleep-wake disorders.

Such understanding is substantiated by similar studies that reveal how excessive eating and drinking alcohol affects the livelihoods, psychological and physiological wellbeing of the users and abusers. For instance, the study done by Striegel-Moore and Franko (2008) concluded that excessive eating during heavy drinking is major determinant of obesity and overweight among alcoholics due to high consumption of fats and starch obtained in palatable foods like beef, chips, chicken, etc. It is also reported that excessive eating fried and salty foods such as beefs or chickens during alcohol drinking leads to heart attacks and kidney failure because salt tends to lessen kidney's ability to remove fluids, thus causing it to be diluted in bloodstream and prompting the heart to pump harder (Victor Chang Cardiac Research Institute, 2022). Other studies have also revealed that excessive eating during binge drinking tends to empower alcoholics to continue drinking alcohol, thus spending a lot of money in paying food expenses and bills (Yanover & Thompson, 2008a; Yanover & Thompson,

2008b; Pettersen, Rosenvinge, & Ytterhus, 2008). However, current studies caution alcohol users to moderate their drinking patterns because binge drinking is associated with poor sleeping quality in lifetime, thus the more they become awake during binge drinking is the more they internalize and get used to late sleeps (Helaakoski et al., 2022). Therefore, it is true that the awareness of the effects of binge eating during binge drinking among alcoholics in night clubs is corresponding to scientific discoveries and reports.

CONCLUSION

Based on the results revealed in this study, it is revealed that alcoholics in night clubs do mostly eat foods rich in carbohydrate, fats/lipids and protein in a portion of 1 to 2 plates of ugali or chips with about 0.5kg to 1kg of fried chicken, pork and beef of goat or cow. Their binge eating behavior has influenced most of them to eat once in between 8:30 pm to 9:45 pm before beginning to drink, eat again 1 to 2 times in between 12:00 am to 1:30 am (midnight) after spending time to drink, and finally eat once in between 2:30 am to 3:30 am before stopping to drink. It is also revealed that alcoholics in night clubs drink a lot of bottles of beer having alcohol of about 4% to 5.5% or spirits of about 35% to 40% and wines of about 7% to 18% so as to not waste time or pause when quenching their drinking thirsty, and quickly get drunk by depressing themselves. It is further revealed that the awareness of the effects of binge eating during binge drinking is optimal to caution alcoholics from physiolog-

ical and psychological problems, instead, most of them neglect and become subjected to vulnerability and loss. Therefore, due to such facts, it is concluded that alcoholics at night clubs are hazardously engaging in binge eating and drinking while having basic knowledge of their detrimental effects. However, it is recommended that both local and central government authorities should establish means that will instruct food service provision and optimally control alcohol distribution and consumption in night clubs. This will sustain alcoholics' health and prevent future loss like death due to overconsumption of alcohol.

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CONFLICT OF INTEREST

This work is free from conflict of interest.

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