

Binge Eating: Breaking the Cycle A self-help guide towards recovery





Binge Eating: Breaking the Cycle A self-help guide towards recovery

With sincere thanks

Bodywhys is hugely indebted to Janie Loubser, former volunteer, and to all those who shared with us the stories of their struggle with, and recovery from, Binge Eating Disorder.

We also wish to thank all those who assisted in the writing and editing of this booklet.

This project was funded by National Office for Suicide Prevention (NOSP)

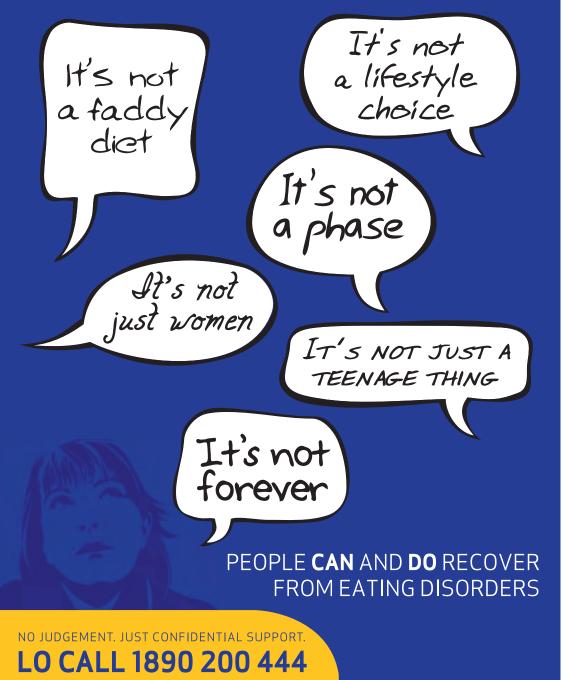


© Think Bodywhys Ltd. (2015)

This is the second edition of *Binge Eating: Breaking the Cycle*. If you have used this book either as a source of information or as a recovery tool, we would be very happy to hear your feedback. You can send your feedback to Bodywhys, PO Box 105, Blackrock, Co. Dublin, or via email **info@bodywhys.ie**

While every effort has been made to ensure that the information contained in this booklet is accurate, no legal responsibility is accepted by the authors or Bodywhys for any errors or omissions.

Contents Page No. Introduction 1 1. Binge Eating Disorder 3 What is Binge Eating Disorder? 3 What causes Binge Eating Disorder? 6 Treatment and support 10 2. Making Your Decision To Take Back Control 15 3. Self-help Section 17 How to use the self-help section 17 17 Keeping a food diary Devising a meal plan 22 Skills for developing healthy eating 23 26 Stop dieting 4. Coping With Change 29 29 Changing your thought patterns Coping with difficult feelings 29 Thoughts on body image 30 5. Looking After Yourself 33 Looking after your physical health 33 Looking after your emotional health 35 36 Dealing with difficulties 6. Helpful Resources 37 7. References 39 8. Blank Food Diary 41



Email Support : **alex@bodywhys.ie**

P.O. Box 105, Blackrock, Co. Dublin **T** +3531 283 4963 **E** info@bodywhys.ie

BODYWHYS.ie The Eating Disorders Association of Ireland

Introduction

When Bodywhys – The Eating Disorders Association of Ireland, was first established in 1995, it provided support primarily to people affected by Anorexia Nervosa and Bulimia Nervosa. In recent years, a significant number of the people who have contacted Bodywhys have requested information and support in their struggle to overcome Binge Eating Disorder or compulsive overeating. Many callers to the Bodywhys helpline, and to our email support service, report having lived with their disorder in isolation for many years. They want as much information as possible about how to achieve freedom from what they often experience as an enslavement or addiction to food. Many people are looking for practical suggestions for regaining control over their behaviours. They feel ready to begin to engage with the process of change and want to know where to start. *Binge Eating: Breaking the Cycle* is a response to the needs expressed by the people who have accessed our services.

Although the booklet was initially meant to address the lack of information and practical guidance available to people with Binge Eating Disorder, many of the strategies offered in the self-help section of the booklet may also be of great use to people caught up in the binge-purge cycle that characterises Bulimia Nervosa and that can also exist in Anorexia Nervosa.

In an eating disorder, food is not used to nourish the body. It is used to manage emotional needs. Eating to meet psychological needs in this way is often referred to as emotional eating. Food can be used to comfort, to self soothe, to regulate mood, as a means of coping with unmanageable feelings. Food can be used to manage emotional distress in an effort to feel better. Many people use food in this way, to a degree. Many people eat too much at some point in their life. They may restrict their eating as a means of numbing upsetting feelings, or to distract from an emotional state that they don't want, or feel unable to cope with. Eating is used as a coping mechanism. This becomes problematic when it becomes a habit, an automatic, or 'go to' behaviour, that turns into a compulsion underpinned by a sense of a loss of control.

Recovery from an eating disorder always requires attention to both the physical and the psychological aspects of the disorder. Treatment programmes with a focus on diet alone are unlikely to be effective in the long term unless the psychological reasons and the emotional needs that underlie the behaviour are also addressed.

Introduction (continued)

Low self-esteem is one of the major risk factors common to all eating disorders and the building of self-esteem is not only crucial in the prevention of eating disorders, but is also central to recovery. A return to health will also involve looking closely at the stressors in our lives and recognising that we can make choices to reduce these.

Reclaiming our capacity for choice is perhaps the greatest indicator of the return to a healthier self. With adequate support and good levels of motivation, some people will manage to recover without the help of professionals. Many others will require the assistance of professionals to guide them towards recovery.

Binge Eating: Breaking the Cycle is a self-help booklet designed both as an information resource and as a practical tool to help you to acquire greater insight into what you are experiencing and to empower you to make choices that will facilitate change. It may help you to gain a better understanding of how your thoughts, beliefs, feelings and behaviours are interconnected and influence each other. This may provide you with a sense of greater control over your life.

The booklet can be used with or without the guidance of a healthcare professional. It does not replace the need for medical assessment. It is not designed as an alternative to professional support, nor does it offer any quick or easy solutions. Recovery will take time and commitment.

Living with an eating disorder requires a vast amount of emotional, mental and physical energy. Overcoming an eating disorder will mean learning how to start to channel this energy in ways that will enhance, rather than diminish, your capacity to enjoy life to the full.

There are now many resources available to people who want to gain a better understanding of eating disorders and how to recover from them. Rather than provide an extensive list of resources, we have included information that will signpost you to helpful resources on page 37 of the booklet.

1. Binge Eating Disorder

What is Binge Eating Disorder?

Many people overeat from time to time, and many people often feel they have eaten more than they should have. Some people, however, feel distressed by their overeating. They feel out of control and binge on food in order to manage their negative mood or other feelings. There is a powerful craving for food which is experienced as overwhelming. They eat what most people would think is an unusually large amount of food.

Recently, researchers, health professionals and clinicians have acknowledged that binge eating is a distinct eating disorder, namely Binge Eating Disorder (BED). ^{1, 2, 3, 4, 5} The better known eating disorder, Bulimia Nervosa involves recurrent episodes of binge eating followed by compensatory purging through exercise, self-induced vomiting and/or the use of laxatives. The significant difference between Bulimia Nervosa and Binge Eating Disorder is that with BED, there is no immediate attempt to counter the binge through purging, exercise or other methods.

As with other eating disorders, there are physical and psychological implications for individuals affected by Binge Eating Disorder.^{6,7} Intense levels of suppressing food related thoughts can heighten concerns in relation to weight, eating and eating psychopathology, including for some individuals with BED.⁸

Binge Eating Disorder has a lifetime prevalence rate of 3.5% amongst women and 2.0% amongst men respectively.⁹ Men and women who binge eat experience comparable levels of clinical impairment¹⁰ and some individuals with BED are also affected by obesity.^{11,12,13}

According to the American Psychiatric Association (APA),¹⁴ Binge Eating Disorder is defined as:

'Recurring episodes of eating significantly more food in a short period of time than most people would eat under similar circumstances, with episodes marked by feelings of lack of control. Someone with Binge Eating Disorder may eat too quickly, even when he or she is not hungry. The person may have feelings of guilt, embarrassment, or disgust and may binge eat alone to hide the behaviour. This disorder is associated with marked distress and occurs, on average, at least once a week over three months'

Diagnostic and Statistical Manual of Mental Disorders (DSM) criteria Binge Eating Disorder: DSM-V¹⁵

Core Features:

Recurrent episodes of binge eating which are not followed by compensatory behaviours, hence the person gains considerable amounts of weight

Diagnostic Criteria:

Recurrent episodes of binge eating. An episode of binge eating is characterised by the following:

- Eating, in a discrete period of time (for example, within any 2 hour period), an amount of food that is definitely larger than most people would eat in a similar period of time under similar circumstances.
- A sense of lack of control over eating during the episode (for example, feeling that one cannot stop eating or control what or how much one is eating).
- The binge episodes are associated with three (or more) of the following:
- Eating much more rapidly than normal
- Eating until feeling uncomfortably full
- Eating large amounts of food when not feeling physically hungry
- Eating alone because of being embarrassed by how much one is eating
- Feeling disgusted with oneself, depressed, or very guilty after overeating
- Marked distress regarding binge eating is present
- Binge eating occurs, on average, at least once a week for 3 months
- The binge eating is not associated with the recurrent use of inappropriate compensatory behaviours as in Bulimia Nervosa, and does not occur exclusively during the course of Bulimia Nervosa or Anorexia Nervosa.

Impact of Binge Eating Disorder

As with other eating disorders, some people may not fit the exact criteria for a formal diagnosis, but they may recognise, in the aforementioned criteria, patterns of behaviour and emotional states that correspond to what they are experiencing.

Binges almost always occur in secret and an appearance of 'normal' eating is often maintained in front of others. The food that is eaten is usually filling and high in calories. It tends to be food that people regard as fattening and which they are attempting to exclude from their diet. Often, the food is consumed very quickly. It is seldom tasted or enjoyed and the person is constantly thinking about what to eat next. While in Binge Eating Disorder there is no purging, namely getting rid of the food to prevent weight gain, or to attempt to reverse feelings such as a lack of control, guilt and shame, there may be sporadic fasts or repetitive diets and often feelings of shame or self-hatred surface after a binge. Body weight may vary from normal to mild, moderate, or severe obesity.

A person affected by Binge Eating Disorder may find themselves trapped in a cycle of dieting, binging, self-recrimination and self-loathing. They can feel particularly isolated which can contribute to the prolonging of their experience. It is also important to recognise that a 'binge' can have a subjective meaning. A person may feel like they binge when they eat something they hadn't planned, when they eat more than they had intended, or when they feel out of control when eating. It is important to understand that when a person says they 'binge' this may not necessarily mean they have eaten a large amount of food, but something about the way, or what they have eaten, feels out of control. The eating disorder thoughts may leave a person feeling overwhelmed and they may feel unable to cope without bingeing.

Most binges can be divided into four stages:

Tension Build-up

There are various factors that lead to a tension build-up. During the tension build-up you may probably experience an unsettled feeling. You might feel that something is wrong or that something is bothering you. You may not know exactly what is causing you to feel this way. Yet, you know that it is slowly, but surely getting to you. Soon the tension will reach a point that demands relief and this initiates the next stage.

Tension Release

Binge eating releases tension and reduces anxiety. The bingeing can blot out thinking and feeling, or provide a source of distraction from problems and negative feelings. However, this sense of relief is short lived and is soon replaced by exhaustion, often called the 'binge hangover'.

Post-binge

This is the time when the symptoms of the 'hangover' predominate. Symptoms may include headaches, nausea, diarrhoea, lethargy and fatigue.

New Beginning

Renewed resolutions and hope characterise this brief stage. At this point you may, for example, vow not to eat anything the next day or decide to go on a strict diet.

What causes Binge Eating Disorder?

The development of an eating disorder is best understood in terms of the interaction of a number of factors. Psychological, physical, socio-cultural and familial factors all play a part in the establishment of disordered eating. It is important to remember that the causes of eating disorders are many and can vary considerably from one individual to another.

When trying to understand the causes of Binge Eating Disorder, it is helpful to divide the various factors into those which make people vulnerable to the disorder. Predisposing factors, those which play a part in bringing on the disorder. Precipitating factors, those which, once the disorder has become established, maintain it and prevent a person from recovering spontaneously. Namely, perpetuating factors.

Predisposing Factors

Psychological factors

- Low self-esteem, poor body image
- Depression, anxiety, anger, loneliness
- Feelings of ineffectiveness and/or a lack of control over life
- Perfectionist tendencies and thought patterns
- Difficulty expressing emotions and feelings in daily life

Socio-cultural factors

- Narrow definitions of beauty that include only women and men of specific body weights and shapes
- Cultural norms that value people on the basis of physical appearance, and not inner qualities

Familial factors

- Genetic factors
- Familial disharmony, which can cause insecurity and emotional distress
- Familial problems around conflict management and negotiation of needs
- Traumatic experiences such as sexual, physical and/or emotional abuse
- Parental preoccupation or concerns around own weight and body image
- Loss of a significant family member through death, separation, illness or alcoholism

Certain psychological characteristics appear to make people more vulnerable to developing BED. Low self-esteem, depression and feelings of ineffectiveness or powerlessness often precede the onset of eating problems. These feelings can be related to, although not always, traumatic experiences. Difficulty expressing emotions and feelings may lead people to turn to food to deal with this.

Often, a person who develops an eating disorder has a tendency to think of the world in 'all or nothing' terms. They can tend to set extremely high and rigid standards in terms of personal, academic or other areas of achievement. There is also a tendency towards being strongly self-critical. It may not be obvious that the person has low self-esteem, or doesn't have confidence and as such, it can be difficult to understand why an eating disorder develops.

Social factors also play a role in making a person vulnerable to developing an eating disorder. In Western societies particularly, media and societal pressures glorify thinness and place value on obtaining the 'perfect' body. Thinness is equated with success, desirability, popularity and happiness. It also becomes associated with control, discipline and effectiveness. Parents who have issues with weight and body image can, often unconsciously, transmit these concerns to their children.

Precipitating Factors

Dieting

The single most important precipitating factor in binge eating is a period of dieting. Here, a combination of physical and psychological factors might be involved. When your body is in starvation, it will give you strong cravings for food because it is not getting enough nutrition. Psychologically, dieting and preoccupations with food may raise the risk of loss of control. This happens when a minor slip from a person's stringent diet causes them to abandon the diet completely and to overeat instead.

Stress

Some people lose control over eating after a period of stress. Many people start bingeing in response to feelings of anger and/or anxiety. Almost any difficulty that causes self-doubt or concern can manifest itself as a feeling of anxiety which a person may then attempt to alleviate with food.

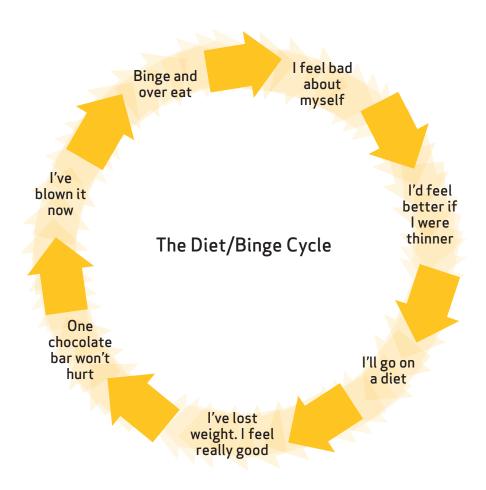
Social Pressure

For some people, a social situation or experience can bring on the binge eating. A history of being teased about being your body or appearance, or not fitting in, can provoke disturbed eating habits as a way of coping with negative comments. Peer pressure, where friends go on a diet and a person joins in to conform, can also act as a trigger.



Perpetuating Factors

People with BED are often stuck in a vicious cycle of dieting and bingeing. Underlying this is a profound lack of self-esteem. This leads vulnerable people to be extremely concerned about their shape and weight, about how they are viewed by others, and can drive them to go on strict diets. The dieting then encourages overeating through both physiological and psychological mechanisms. The bingeing causes guilt and to compensate, people diet again. **The only way to break this cycle is to stop dieting**.



9

Understanding what made you vulnerable and brought on your binge eating can be very difficult. To achieve long-lasting sustainable change, it will be important for you to understand and address the underlying factors that have contributed to your eating disorder. However, it is important to know that it is not necessary to understand these underlying factors in order for you to regain control over your eating in the short term. By focussing on the factors that are maintaining the binge eating, it is possible to change your eating habits. The self-help section of this booklet will therefore focus on these factors. Once you have gained control over your eating, the underlying factors often become a lot clearer and it will be easier to deal with them.

This is not to say that underlying issues should not be dealt with. To achieve longlasting sustainable change, this is often necessary. However, to give a person some clarity and sense of control to do this, it can be important to feel that you can regain some control over your eating.

Remember that recovery is about reclaiming control of your life and that includes making choices about your journey forward. You can ask to be part of every decision along the way. Reaching out for support and guidance does not take away from you the right to set your own pace and map your own route. Your recovery journey is about taking your power back, reclaiming it from the disorder that has come to control you. Health professionals with a good knowledge of eating disorders can understand how important this is for you and can work with you at achieving this.

Treatment and Support

Your binge eating may probably not go away on its own and you may need some form of help. Some people will be able to recover by means of self-help. Others may need some form of professional intervention and support.

As with all eating disorders, getting help can feel very threatening because it can involve moving out of your emotional comfort zone. Up until now, you have been using your bingeing to cope with unmanageable feelings, to keep you feeling 'safe'. You know that keeping yourself 'safe' in this way is not making you happy and is impacting on your life in negative ways.

Reaching out for help, whether from a trusted family member or friend, a confidential helpline service or a health professional, often represents the first courageous step towards giving up bingeing. If your motivation to overcome your bingeing is not strong enough, you may find yourself in two minds about getting help.

Self-help

Self-help is often a good place to start because you will be educating yourself about your eating disorder. Some self-help methods are designed to help you to bring the unconscious thoughts and beliefs that fuel your feelings and your behaviour into your conscious awareness. The more you are in a position to observe your behaviours and what is fuelling them, the more control you will be able to gain over them. Selfhelp can involve following a self-help manual either on your own or with guidance from a professional. Some people find that they need the structure of a group (either a support group or a therapy group) or more supervised treatment to recover fully.

Self-help can be a useful intervention for Binge Eating Disorder.^{16,17} Some people choose to work collaboratively with a health professional and combine the use of a self-help manual with regular guidance and support sessions.¹⁸ The choice of professional can depend very much on an individual's needs and preferences.

If you have opted to explore self-help, and find you cannot make sufficient progress on your own, you will probably need to access further help. Below is an outline of some of the options open to you.

Your Family Doctor

A trusted general practitioner (GP) can be a very important source of support. Eating disorders have both physical and psychological consequences and a GP can assess the state of both your physical and psychological health and help you to determine your support and treatment needs. If necessary, he/she can provide you with ongoing monitoring and/or a referral to another professional. A visit to the GP can also provide a helpful reality check and boost your motivation to recover.

Understandably, many people have concerns around speaking to a GP about their relationship with food. They may have fears, feelings of embarrassment or they may fear being judged and that they may not be taken seriously. They may feel ashamed and undeserving of help, that their problem is 'not bad enough'. It may help if you can write down your fears and be open about them to your GP.

If you feel this might be difficult, identify someone that you can talk to about these fears. This may be a close family member, friend, or confidential support from Bodywhys. Accepting that your fears are valid and normal, and voicing your fears to someone who understands, can go a long way towards diminishing them and freeing you up to move forward.

Working with a Dietitian

This involves seeing a registered dietitian who can help you to correct food myths and design meal plans that will support your efforts to restore healthy and enjoyable eating. A dietitian can also provide guidance and support if you are following a selfhelp manual and help you to gain a better understanding of the relationship between your eating patterns, your emotions and your behaviour. If you decide to keep a food diary, it may become a useful recovery tool to bring along to sessions. There is a sample food diary in the self-help section of this booklet.

Family Therapy

An eating disorder affects not only the person with the eating disorder but also has a significant impact on family members and partners. Family meetings offer guidance, exploration and advice as to how to support someone who binge eats towards recovery. Family members can be helped to increase their awareness of what recovery involves and to set realistic expectations. They can also be helped to develop an understanding of what hinders and what supports recovery.

When the person within a family has an eating disorder this affects everyone. Family therapy can be very helpful in encouraging members to communicate, learn to support each other, and express emotions more openly and appropriately. Where there has been trauma in the family such as bereavement, separation, divorce, serious illness, or abuse, family therapy can provide a safe space where the trauma can be addressed. Family therapy also provides an opportunity for family members to look at their family dynamics and to explore how these might be maintaining the eating disorder. They can then be guided to make helpful changes that will ultimately benefit the entire family.

Individual Psychotherapy and Counselling

Some people affected by an eating disorder choose to seek the support of a trained psychotherapist or counsellor. This form of support may be suggested by a GP. ¹⁹ Psychotherapy and counselling are often referred to as the 'talking therapies',or 'talking treatment'. Counselling is a process in which a person is supported to explore their difficulties and to work towards change. Working with a therapist can help you to learn about your feelings and develop new strategies for coping. Psychotherapy can involve identifying the interpersonal problems that have led to the development and maintenance of the binge eating. A psychotherapist may use a combination of approaches in their work in order to provide you with optimum support.

Psychotherapy and counselling is not about giving advice or prescribing solutions to problems. It is about empowering an individual to make choices that are in line with their needs and that will enable them to live more resourcefully and achieve a greater sense of well being.

This is a process that can take time. The length of time needed to feel some benefit can vary for each individual. It can also depend on the type of psychotherapeutic or counselling approach that is used.

Finding the right treatment and support to suit your needs is important. If you don't get the help you need when you first seek treatment or support, don't let this put you off. Keep trying until you find something that works for you.

Don't be afraid to ask the practitioner about their background, qualifications, therapeutic experience with eating disorders and the cost of attending the service.

See also the Bodywhys leaflet: Choosing a Counsellor or Psychotherapist



2. Making your decision to take back control

Overcoming difficulties with eating can be very challenging. In order for you to really change your eating habits, you will need to be sure that your motivation levels are high. It could be helpful to ask yourself why you want to change your eating habits and to write down your reasons.

My reasons for changing my eating habits

There are many reasons for changing. Think of what it could be like for you if you did manage to change your eating habits. You can work towards reducing and eventually stopping binge eating. You may able to return to eating ordinary meals at ordinary times. You can become free of the shame and guilt you often feel after binge eating. There can be no more need for secrecy about your eating habits. Your relationships with others can improve and become less strained. Your social life can be more enjoyable. Anxieties around intimacy can decrease. Food and eating can stop dominating your life and you become less intensely concerned about your weight and shape. Both your physical and your emotional health can improve. Your self-esteem can increase. You can feel less burdened by negative thinking and negative emotions. You can gain a sense of freedom.

Whatever your particular reasons for wishing to change, it is important to emphasise the value of being well motivated. **Change may not be possible without a good level of motivation**. You may find it helpful to read the whole booklet to help you assess how motivated you are to undertake what is involved in changing. If you feel that perhaps you are not yet motivated enough and recognise that you do not yet feel that the benefits of changing outweigh the benefits of remaining as you are, you may need to enlist **help** to work on your motivation levels.

Try writing out a **list** of what you feel you have to gain by remaining as you are and another of what you will gain from recovery. Be as honest with yourself as you can about what you really want for yourself and work at tipping the balance in favour of recovery. Ask yourself to what extent the eating disorder thoughts are determining what you put on your list of reasons. What might you say to these thoughts? How might you make changes to them? Do not force yourself towards readiness for change. It is really important that you accept and acknowledge where you are at this point in time rather than trying to force yourself towards readiness to change. **An acceptance of where you are now is the only place from which you can make a decision to move forward**. It is also important that you have the necessary **supports** in place to do this work. Once you have made the decision to change you will need to decide what kind of support you need. Do you need someone who can play an active part or do you just need general support from the people you know? Support can come from your family, a friend and colleagues in the workplace. Where you choose to look for support will depend very much on your individual circumstances. Whatever you decide, try to be open, honest and direct with others about your support needs.

Once you have read through the entire booklet and have an idea of what is required for change, **you can decide on the day you are going to start**. It will also be worthwhile considering whether now would be the right time to start. If you are going away on holiday soon or if you are in the middle of a relationship breakdown, exams, or any other stressful situation, now might not be the right time.

Make sure that you feel comfortable with the guidelines in the booklet and that you **feel ready to commit** to them. If not, it may be best if you postponed starting until the time is right and you feel you can make the necessary commitment. On the other hand, unless there is a serious reason for not starting now, try to commit yourself to beginning at a definite time in the near future.

If not now, when?



3. Self-help

How to use the self-help section

Up to now, this booklet has provided you with general information about binge eating. What follows are self-help suggestions consisting of basic elements that could help you regain control over your eating. The aim is to provide you with guidelines so that you can take the first steps to help yourself. You will need to read through the entire self-help section to get an idea of what it entails and to help you decide whether you are ready to undertake the journey.

Once you start following the guidelines, you might find some of them very helpful and others less so. As you become more aware of your eating and how you relate to food, you will realise which of the guidelines meet your needs. The key is to apply and adapt the guidelines so that they work for you. Through a process of trial and error you will be able to design your own self-help programme with the help of the guidelines provided. You may also have identified other strategies that have been helpful to you in the past or you may have come across self-help guidelines and resources elsewhere that suit your needs. Do not feel that you have to limit yourself to what is suggested in this booklet.

Keeping a Food Diary

If you are going to begin to change your eating habits, then it is important that you know exactly how you are eating at the moment. One way of doing this is by keeping a detailed daily record of when you eat, what you eat, whether you felt what you ate was excessive, whether you felt out of control, and other details that might be relevant to modifying and reorganising your eating habits. At first you might find it very difficult to keep a diary as it will confront you with your eating problems. You may feel very tempted to stop writing your diary after you have had a binge. However, for you to begin to change, it is necessary that you do become aware of exactly what is happening with your eating. Don't be discouraged. You will soon realise that keeping a food diary is actually helping you with this process. If you find it very distressing, now might be the time to enlist some support or seek help from a professional.

There is a blank food diary form at the back of the booklet which you can photocopy for your own use.

General Guidelines

- Use a standard form, sample at back of booklet
- Use a separate sheet for each day
- Record everything you eat, not just the things you feel happy about.
- Record things when they are happening. Don't wait until the end of the day, as this could make it inaccurate.

Food Diary - Specific Guidelines

- In the first column record the time at which you eat
- In the second column record all the food and liquid that you consume during the day. Be reasonably specific. For example: small bowl of cereal; two chocolate bars.
- In the third column state where you ate
- The fourth column is for recording why you ate at that specific time. What kind of hunger made you eat at that time? Were you physically hungry, body hunger? Was it in response to a craving, mouth hunger? Was it out of habit? Or was it time to eat something, such as lunch, according to your meal plan?
- In the fifth column, indicate if the food was eaten during a binge. Do this by placing an asterisk (*) in this column next to any item of food which you felt at the time was excessive and which you wished you had not eaten
- The sixth column is for recording how you felt at the time you ate. It could include everyday events like having had an argument with your partner. Or it could be specifically related to your eating, such as describing how you felt after a binge, or describing the events that led to a binge. This process is crucial to your coming to understand what sort of things lead you to binge.



Food Diary: My Daily Food Choices

(This is an example of the kind of things that a person starting out might record in their diary)

Time	Description & Quantity	Where	Type of Hunger	Binge?	Feelings
8:30	l apple, black coffee	kitchen	вн		I'm determini eat healthily A bit anxiou I can keep h
9:00	Low fat yoqhurt	Bedroom	ßH		Annoyed. Dia to eat so so But very hung Couldn't beat
11:00	4 slices of bread with honey	kitchen	ßH		Thought hone give me energ feel worse
11:20	2 packets of crisps I chocolate bar	Car	mн		Went out to newspaper. H buy somethin Will eat nothi rest of day
12:00	4 slices of bread with lots of cheese	kitchen	m <i>H</i>		I just had to Cheese is so
	More cheese. I pack of crackers	kitchen		*	fattening. I well go on ei
	Salami Handful of cereal Rest of crackers	kitchen		*	Lasaqne was o It was so un
	Leftover lasaque, cold, straight from fridge			*	I had the ice to make up f
	Ice cream from tub			*	lasaqne. I m I m disqusted
	4 glasses of water				myself. I'm q to sleep and about everyth I ate.

Physical hunger = Body hunger = BH Craving = Mouth hunger = MH Once you have been monitoring your eating for a week, review the week as a whole and begin to **try to identify any patterns in your eating**. It could be very helpful to continue the reviewing process and to have a fixed appointment with yourself each week for this purpose. This will provide you with valuable information which you can use to decide which techniques and methods will be helpful to you in regaining control of your eating. **You will discover your individual eating pattern** - what you eat and when you eat. **This food awareness is essential to recovery**.

The information that you record in your food diary can be very valuable information to explore during sessions with a dietitian or psychotherapist. If you do choose to share this information with someone else, it is important that you ask yourself how honest your diary is. If you find that you are tempted to modify what you are recording in your diary, ask yourself why. The very feelings that are motivating you to leave things out or to change details to make them more 'acceptable' to a potential reader are feelings that could usefully be explored in psychotherapy/counselling sessions.



Food Diary: My Daily Food Choices

(This is an example of the kind of things that a person starting out might record in their diary **four weeks** later)

Time	Description & Quantity	Where	Type of Hunger	Binge?	Feelings
9:00	Cereal, low fat yoghurt, apple	kitchen	ВН		Enjoyed this
11:00	l slice toast and cottage cheese	kitchen	вн		Wasn't that hu but wanted to with my meal j
13:00	Chicken salad. Pasta	Dining room	ВН		I'm happy with food choices Nervous about to friend's in afternoon. It birthday. Ther so many sueet
16:00	Coffee. Piece of cheesecake. 4 biscuits	Friend's place	mн		This went ok. a bit quilty. B didn't lose co Will have some light for dinne
19:00	Grilled Fish. 2 small new potatoes. Salad.	TV room	ВН		
22:00	Apple	TV room			Not a bad da Wish I could s thinking about all the time ex though I m un from the beha Finding discipl all so hard. So anxious I wor able to keep

Physical hunger = Body hunger = BH Craving = Mouth hunger = MH

e

Devising a Meal Plan

The most important task you can do to reduce cravings and tackle binges is to eat regularly and not go far more than 3 hours without eating something. This single change can have a significant effect.

Going without food for long periods in order to lose weight can feel self-defeating. It takes no account of how food is metabolised in the body for optimum health. Your metabolic rate is the rate at which your body processes food and converts it into fuel. Alternating between restricting your food intake and bingeing plays havoc with your metabolism. Repeatedly decreasing your calorie intake will encourage your body to go into conservation mode and will slow down your metabolism. When your metabolism slows, your body cannot function properly. Restoring healthy patterns of eating will be crucial to rehabilitating your metabolism.

Your binges set you up to restrict your food intake, and your diets set you up to binge. You are trapped in a cycle. Following an eating routine or meal plan in which meals or snacks occur every 2-3 hours can be very helpful in preventing binges. When you have finished a meal or snack, look at the clock and count forward two and a half hours. This will ensure that you know exactly when your next meal is scheduled. Knowing that you will eat again soon will help keep you calm and reduce the urge to binge. If you do find yourself tempted to binge, try to remind yourself that each time you can hold off until your next scheduled meal you will be helping yourself to break the defeating cycle that has been dominating your life. You will be adding to the store of positive energy that brings you closer to your goal.

When designing your meal plan, you can still think along the lines of breakfast, lunch and dinner, adding two snacks and something light before you go to bed. For someone who has always been trying not to eat, eating this regularly can be a frightening and daunting task. The point of all this is to replace the pattern of alternating between not eating at all and overeating, with a pattern of regular eating. Remember that this is a caring process and by eating regularly you are looking after yourself.

Your food diary and your meal plan can be used together. Reviewing your food diary will help you determine whether your meal plan is effective and whether you need to make changes.

An example of a meal plan

Time	Meal	Description
8:30	Breakfast	Bowl of cereal, milk, piece of fruit, black coffee
11:00	Snack	Cream crackers with cottage cheese
13:00	Lunch	Baked potato with tuna salad, yoghurt, coffee
16:00	Snack	Cereal bar or packet of snacks
19:00	Dinner	Grilled chicken breast, rice, vegetables
	Bedtime	Slice of brack and glass of milk

You will find a blank form for meal plans at the back of this booklet which you can photocopy for your own use.

Skills for developing healthy eating

Think of this change, not as another diet, but as a fundamental life change. Diets are often a source of frustration and can maintain the feeling of being trapped in an eating disorder cycle. Remember, this is not about finding the 'right' diet. It is about you developing your sense of self that is not based on food or weight.

It is important that you choose food that you are happy with for your meals and snacks. This means that it should be food that you feel comfortable eating and which will not lead you to binge.

In the early stages you might find yourself turning to low-calorie or diet food. This is not necessarily a problem, provided you are getting enough to eat. Remember that you are trying to move away from the idea of eating to control weight. Base your changes on creating health rather than on losing weight. When creating health is the aim of your food choices, you will find that, in time, the food you want the most is the food that makes you feel the best. What you eat at each meal will affect your energy levels and mood. If you are keeping a food diary and reviewing it regularly, all the information you need will be available to you to help you determine the changes you need to make. Guidance from a dietitian can be very helpful if you are finding it difficult to identify patterns or to recognise triggers. Important factors such as the regulation of blood sugar levels are quite complex and vary from one individual to another.

It is a good idea to create boundaries for your meals. Planning meals and snacks in advance is one way of doing this. Another is to decide before you begin a meal exactly how much you are going to have and to put the food on a plate. You should then leave the food preparation area. A useful strategy then is to identify one item such as a piece of fruit that will be the 'full stop' to the meal. This ensures that the meal has a pre-planned end.

Planning in advance also allows you to shop more mindfully for your food and not to overstock foods that may tempt you to binge. If it helps, don't shop for the full week at once. Notice the strategies that support your efforts to take back control and use them to your advantage.

Take it one day at a time. You know you could eat what you want, but for today you are choosing to eat food at regular intervals. Initially, you may not be eating in response to your natural hunger. This is something that you will be able to get back to over time.

Identifying 'triggering times' when you are vulnerable to bingeing is important. Looking back at your food diary can help you to identify what your triggers to binge are. For example, being alone, or the weekend. Make a list of alternative activities that you can do at those times to reduce the possibility of bingeing; calling a friend or going for a walk, completing a manageable task that you have been putting off. Having a lot of unstructured time alone, resulting in boredom, can also trigger a binge. This often happens during holidays. Having a list of activities in place and structuring your time more effectively will help you cope.

It's important to feel comfortably satisfied at the end of your meal. If you have overestimated the amount of food you need, and you find yourself becoming full towards the end of the meal, it is important that you allow yourself to leave food on the plate. Learn to throw the excess food away.

Make sure that you take time to notice how the food tastes and feels in your mouth. All this can help to make you feel more satisfied while you are eating. Be sensible with alcohol. Many people find it very difficult to control their eating after they have been drinking. Also, for some people, having a hangover can be a trigger for bingeing.

When you start with your commitment to planned eating, don't worry if you find that your mind is totally preoccupied with food, with what you are going to eat and when. Try not to let this distress you or discourage you. This is quite normal and only lasts a short while until you become used to your new structure. Gradually you will go through the day able to implement your meal plan without giving it further thought. Try to stick to the decisions that you have made in advance. If you still feel hungry after you have ended your meal, you need to ask yourself about the amount you have eaten. It is important not to let the eating disorder thoughts dictate how much you eat. Being honest with yourself is the key. It is also important to think about your energy expenditure that day. It may be that you need a bit more or it may be that you are OK to wait for your snack. If you change your eating plan because of eating disorder thoughts your eating will become disorganised again. Listening to yourself, staying connected to yourself, by sticking to your plan will help ensure that the disordered eating doesn't take over again. If you find that you are consistently feeling hungry after eating you may need to adapt your plan for the following days. Reviewing your food diary at the end of each day will help you to figure out what changes you need to make.

The people around you may not always be helpful when you are trying to change your eating habits. Let people know what you need from them. If you can, tell your family about your plans right from the start. If you are presented with gifts of chocolate or other treats 'to cheer you up' try to find a way of letting people know that this is not helpful to you. If you have children you might feel that it will be impossible for you to follow a meal plan. It need not be. This could be an opportunity to introduce healthy eating habits that will benefit the whole family. It could be helpful to discuss the changes you want to make with them, instead of just changing everything without them understanding why. Ensure that they feel they will still have choices. Flexibility rather than rigidity will help the family to work together.

Since your aim is to eat healthy meals at regular times, there is no reason why the whole family cannot eat the same food. This will help you eliminate your desire to diet. Eating with others will also help you create boundaries for your meals and maintain a healthy relationship with food. Plan your meals well in advance. This will ensure that you have the food that you need in the house and you won't have to make any last minute changes, which might trigger a binge. Decide which meals you are going to have with your family and decide on a dish that you will be comfortable eating with them. In the beginning, you might find it difficult to eat the same food as your family. Gradually, you can work this into your meal plan.

Dieting is a significant precipitating factor in BED. It also plays a major role in maintaining the eating disorder. Understanding and dealing with all the causes of your binge eating can be very difficult. It is however possible for you to understand and deal with dieting as a cause of your binge eating. BED follows a predictable pattern of diet/binge cycles, and the only way to break this cycle is to stop dieting. No one else can convince you to stop dieting. If you have been dieting most of your life, the very thought of stopping may be terrifying. You may fear that if you stop, you may lose control and binge. You need to allow yourself to accept that these binge/diet cycles exist in your life. Try to think of how the cycles affect your life. If you can acknowledge that dieting is causing you to binge, it will be easier for you to let go of it.

If you gradually replace your pattern of dieting and binge eating with regular meals, you are unlikely to gain weight. If you do experience some changes in body weight, try not to panic. Once you begin to eat regularly and healthily, you will be able to achieve a healthy weight that is comfortable for you.

If you are keeping a food diary, by now you may be able to identify times where a binge follows a period of restriction. If not, it might help to consider the following for the next few weeks.

- Notice when you are restricting yourself
- How long does it take you to reach for food for comfort?
- What things do you say to yourself when you are reaching for the food?
- Is there a point where the guilt kicks in?
- What kind of things do you say to yourself then?
- Do you have the urge to diet again?

If exploring your feelings around dieting and bingeing is causing you distress or making you resistant to progress, then it may be helpful to share these feelings with someone who has a good understanding of the process you are going through – this could be a trusted family member or friend, a psychotherapist/counsellor or other professional.

Sometimes, fear of gaining weight will stop a person from giving up dieting. You could also approach it from another angle. Stop dieting for a while. A few weeks, if possible, and see what happens. Try to follow a meal plan based on the guidelines set out in this booklet. This will help you not to diet as you will be eating regular meals.

Remember to keep a food diary. See whether there have been any improvements in your eating habits. It will also be easier for you to identify other factors that cause you to binge, since you have eliminated dieting. There may be times when you physically feel bigger or smaller, but it is crucial not to respond to these feelings by restricting food. This will likely bring you back into the diet and binge cycle.

Remember, this is an eating disorder. It is not all about food, but about what you are feeling. Sometimes, when we are experiencing difficult feelings, they can make us feel uncomfortable physically. Remember that, physically, you won't change hugely either way by stopping dieting for a time.



4. Coping With Change

Changing your thought patterns

Your concerns about your weight and shape form the basis of your desire to diet. Changing your behaviour patterns can help you to stop dieting, but in order for this to have long lasting effects, it is important that you challenge and change your thought patterns as well.

Your thoughts and beliefs influence everything you feel about yourself and everything you do. It is likely that how you feel about your weight and shape is closely related to how you feel about yourself. If you lose weight, you probably feel you are a better person. If you gain weight, you feel like a failure and you believe that people will like you less. Neither of these feelings represents the truth. In reality, you are essentially the same person irrespective of body weight, even though you may not feel like the same person.

Building new thought patterns to establish a more positive image of yourself is integral to sustaining recovery.

Stay alert to negative self-talk, or your inner critic. When the self-critical voice pops up, it will help if you have a strategy for turning the negative thoughts into positive ones. When you find yourself being self-critical, stop and pay yourself a compliment, find something positive and affirming to say about yourself. When you treat yourself better, your body and mind become stronger and you will be more likely to overcome your unhealthy eating habits. Remember that your thoughts and feelings are intimately connected to your physical health.

Coping with difficult feelings

Uncomfortable feelings often trigger a binge. Eating numbs out feelings and distracts attention from problems. Facing up to and tackling your emotions head on is a valuable strategy to cope with this kind of bingeing. This may involve confronting a colleague, discussing an unpleasant topic with your partner, or setting boundaries for your child. Whatever it is, dealing with the situation and naming what is happening rather than avoiding it is more likely to resolve the problem and may also relieve the urge to eat.

thought, then it is probably irrational. Try to replace the thought with a rational one. For example, when you are stuck in traffic and you find yourself thinking how stupid you were for taking this route, try to realise that all the people around you took the same route and that this thought is therefore irrational.

Each time you feel upset, look for the thoughts that made you feel this way. Try to

work out whether they are rational or irrational. If there is no direct evidence for this

Thoughts on body image

Body image confidence is characterised by mostly positive feelings about your body shape and size. Your body is valued as a good part of you that can help you enjoy life. For people who are confident about their bodies, all foods are seen as fitting into an overall healthy diet, without a sense that some foods are 'good' and some 'bad'. Here are some suggestions to help you improve your body image:

- Your body is much more than what is visible from the outside. Reminding yourself of this will encourage you to be less focused on your appearance and more focused on your sense of wholeness.
- Remind yourself that being healthy means that you are well rested, eating well, feeling at ease and thinking clearly. Your inner 'self' and your outer 'self' reflect each other.
- Talk to yourself in the mirror. Focus on what you like and remind yourself that it is okay to like and appreciate what you see. Affirm yourself.
- Remind yourself that you don't want your body to be like that of anyone else work towards totally embracing and accepting your own body. Work towards celebrating your uniqueness.
- Take risks to challenge yourself. Think of things you normally wouldn't do and try them. For example, set aside time for a relaxing evening to take care of yourself. Care for your body by treating yourself to a massage with the money you have saved by reducing your bingeing.
- Visit somewhere you would not normally go on your own. Spend time with yourself. The first person you need to get to know and love is yourself.
- Acknowledge yourself and focus on your positive qualities and your talents. Make sure that you are not being too hard on yourself. However, don't dismiss or ignore those qualities that you don't like about yourself. Take a closer look and then think about what you can do to change them.

Ask yourself if you have developed a set of rules about how to behave or how to be as a person. Insisting on being perfect and seeing yourself as a failure if you're not may make you feel worse about yourself. Instead of striving to be perfect, strive to do your best. Tell yourself that you can't control everything, but that you can handle whatever happens. Remember that the only thing that you need to be able to deal with is what is arising in this present moment. If you can limit yourself to attending to the present moment without burdening yourself with what belongs in the past or might belong in the future, your task becomes so much easier.

Challenging and changing the way you think can be very difficult, especially when you attempt to do it on your own. Psychotherapy/counselling could be very helpful as it focuses specifically on identifying, challenging, and changing defeating thoughts and negative self-criticism.



5. Looking After Yourself

Looking after your physical health

The chances are that you feel bad about your body. Many people who are unhappy about their bodies, tend to see their bodies as separate from themselves. They may not like looking at themselves in the mirror, touching their bodies, or having someone else get physically close to them. If you don't like your body, you are likely to neglect it. There are lots of small things that you can do to get in touch with your body and even make you feel better about it such as having a massage, having your hair cut, wearing a new perfume/after shave.

Exercise can help with your feelings about your body. It is also an important part of maintaining an efficient metabolism. Incorporating exercise in your new routine can be important to sustain the changes you have made in your eating. Exercise is also a good way of dealing with stress and can help to decrease your urge to binge.

There are many forms of exercise and it is important that you choose something that fits in with your life and can become an enjoyable habit. A simple and effective form of exercise, for example, is walking. It exercises and tones all the muscles in your body. You don't have to join a gym or use complicated equipment. Here are some guidelines.

- Decide on the date that you are going to start
- Set aside specific times for your walks and write them in your meal plan
- This will motivate you and help you make walking a part of your everyday life. If possible, don't let anything interfere with these times
- If you have children, you can include them in your exercise schedule.
 On the other hand, walking alone could be a good time for you to take a break.
 Don't feel guilty about taking this time for yourself
- Walk three or four times a week for it to be effective
- Try not to let two days go by without walking
- Build up to 45 minutes of walking for it to be beneficial. Remember, however, that every little helps. If you have only ten minutes to spare - use it
- You will need a good pair of trainers/runners
- Wear comfortable clothing
- Try to stay in the moment. Take an interest in what is around you. Connect with the sounds, sights and smells as much as you can. This practice helps you to bring your awareness into the here and now.

Frequent exercise may require a regular commitment. There will be days when you are not going to feel like walking, or you may put it off due to the weather or other circumstances. To help motivate you, think about what you will get out of this commitment and write it down. Use the box below.

What I will get out of doing regular exercise?

Looking after your emotional health

Developing a holistic approach to body and mind is very important in recovery from an eating disorder. The body and mind are not separate entities.

Try to get into the habit of practising emotional self-care daily.

Learning to deal effectively with emotions involves connecting with your emotions as they arise.

Here are some steps you can take to help you to use your emotions to enhance your health:

- Identify the emotion. Name it, define and describe it as clearly as you can.
 If you are experiencing turmoil, try to remove yourself to a quiet place to help you identify what you are feeling.
- Observe the emotion in your body. Bring your full attention to it. Slow down and deepen your breathing. Allow your awareness to experience fully the physical sensations. Just be there with the emotion. This will help you not to identify with the emotion and let it overwhelm you. You will be able to distinguish between the feeling and the person, you, who is witnessing the feeling.
- Take responsibility for your feelings. How you feel is not anybody's fault. Your feelings are neither 'right' nor 'wrong'. All of us experience a whole range of feelings – anger, excitement, disappointment, joy, sadness, contentment, worthlessness, confidence and fear. Once we accept what we are feeling, it becomes easier for us to find the right response. When someone asks us to do something for them and we are already under a lot of pressure, or we simply don't want to do it, we may feel angry and be inclined to lash out. In fact, what we need to do is say 'no'. By saying 'no' we are choosing to take better care of ourselves. Once we realise that we have the power to choose how we can respond, we feel more in control and we are more likely to respond in a way that meets our real needs. It is not your responsibility to make other people feel better. Your responsibility is to take care of yourself.
- Express your feelings. You can do this in private, to yourself. Speak them aloud or write them down. Express any details and insights connected with the feeling. Describe also the feelings that you are experiencing in your body as you do this work. This is a very powerful way of releasing your emotions and allowing all the energy in your body to return to a healthy state of flow. Releasing the emotion can also be done through physical activity.
- Treat yourself to something that brings you enjoyment.

Dealing with difficulties

There will be days when you experience difficulties. If you have a set back or a slip, you might be very tempted to abandon your meal plan for the day and continue bingeing. Take charge and intervene as soon as possible. Stop and think about what is happening. You might need to leave the house and go for a walk. It will be very helpful if you have a specific person you can call or visit when you are starting to slip. Remember that when a slip occurs, it is within your power to decide that you will not continue to binge.

The important thing to do when something goes wrong is to get back to your eating plan as soon as possible. Try not to use a slip as an excuse to continue bingeing and avoid skipping your next meal to compensate for the binge. Try to eat your next meal as planned. This will be extremely difficult since you have just overeaten and you will automatically want to diet or fast, but getting back to the plan will provide you with real protection against further episodes of loss of control.

What you can do is to replace a filling item with something lighter. Be careful not to replace a whole meal with, for example, an apple. You should still have a proper meal. If a slip causes you to become overwhelmed by fear, or anxiety, or feelings of self-recrimination and self-loathing, seek support as soon as you can to help you deal with your feelings. Know that these feelings are normal and that you will be able to move beyond them. If you are attending a counsellor or psychotherapist, bringing what you have experienced into your next session will give you something very concrete and very valuable to work on. Try not to let disappointment in yourself, or the belief that your therapist will be disappointed in you, prevent you from sharing valuable information about what you are experiencing. Try to imagine yourself as the witness to your slip. View it objectively as part of how things are evolving and moving. Above all, try to view it as a simple fact and attach no judgement to it. Learning not to judge yourself is essential to developing and maintaining a more positive and accepting attitude towards yourself – one of the most important building blocks of self-esteem.

Slips or setbacks of any kind are an important part of recovery and should always be regarded as learning experiences. Have a close look at how it actually came about. There will always be a reason. Did you eat enough at your previous meal? Was it caused by stress or anxiety?

Can you identify an event or interaction that triggered it? The more carefully you think about it, the more you will learn from it. Talking to someone will be very helpful at this point. This will put things in perspective. If this is not the first time it has happened, try to remember what helped you to deal with it the last time.

Remember that in life, experience is your greatest teacher. Try to view any setbacks positively, as signals to help you identify how best to move forward. In this way, you can transform even a setback into a motivating factor instead of letting it defeat you and draw you back into the negative thinking from which you have been working so hard to break free. Remember that you are aiming to reduce the number of times you binge. You are not aiming to never binge again. This means that a slip is only that - a slip. You have not failed in your attempt to binge less. You are not back to square one. Remind yourself of the days when you have been able not to binge. You have been successful in the past and you will be successful again.

REMEMBER, YOU DON'T HAVE TO DO THIS ALONE USE YOUR SUPPORTS

6. Helpful Resources

Bodywhys Services

Bodywhys Helpline: Lo Call 1890 200 444

Email Support Service: alex@bodywhys.ie

For details of **online support group meetings**, and **face-to-face support groups**, visit **www.bodywhys.ie**



SeeMySelf is an online psycho-education programme designed for young people aged 15-24 and focuses on issues such as self-esteem, body image and, media and culture. For more details visit **www.bodywhys.ie**

For details on **treatment providers** in your area visit **Bodywhys Directory of Service Providers**, www.bodywhys.ie

For lists of helpful books and websites, visit www.bodywhys.ie

Additional Resources

Overeaters Anonymous: support groups based on the 12 step model of recovery. For more information, visit **www.overeatersanonymous.ie**

Aware: national voluntary organisation providing support through depression. For more information visit **www.aware.ie**

Pieta House: offers a specialised treatment programme for people who have suicidal ideation or who participate in self-harming behaviours. For more information visit **www.pieta.ie**

OCD Ireland: national organisation for people with Obsessive Compulsive Disorder (OCD). For more information visit **www.ocdireland.org**

Yourmentalhealth.ie: a website dedicated to providing information about mental health, supporting yourself and others, and information about support services that are available. This website is supported by the Health Service Executive (www.yourmentalhealth.ie)

7. References

- ¹ Fairburn, C.G. & Cooper, Z. (2011) Eating disorders, DSM-5 and clinical reality. *British Journal of Psychiatry*, 198(1), 8-10.
- ² Call, C., Walsh, B.T. & Attia, E. (2013) From DSM-IV to DSM-5: changes to eating disorder diagnoses. *Current Opinion in Psychiatry*, *26*(6), 532-536.
- ³ Mond, J.M. (2013) Classification of bulimic-type eating disorders: from DSM-IV to DSM-5. *Journal of Eating Disorders*, 1:33.
- ⁴ Tanofsky-Kraff, M., et al. (2013) Binge eating disorder: The next generation of research. *International Journal of Eating Disorders*, 46(3), 193-207.
- ⁵ Myers, L.L. & Wiman, A.M. (2014) Binge eating disorder: A review of a new DSM diagnosis. *Research on Social Work Practice*, 24(1), 86-95.
- ⁶ Yager, J. (2008) Binge eating disorder: The search for better treatments. *The American Journal of Psychiatry*, 165(1), 4-6.
- ⁷ Kessler, R.C. et al. (2013) The prevalence and correlates of Binge Eating Disorder in the world health organization world mental health surveys. *Biological Psychiatry*, 73(9), 904-914.
- ⁸ Barnes, R.D. *et al.* (2013) Examining the relationship between food thought suppression and Binge Eating Disorder. *Comprehensive Psychiatry*, 54(7), 1077-1081.
- ⁹ Hudson, J.I. *et al.* (2007) The prevalence and correlates of eating disorders in the National Comorbidity Survey Replication. *Biological Psychiatry*, 61(3), 348-58.
- ¹⁰ Striegel, R.H. *et al.* (2012) Why men should be included in research on binge eating: Results from a comparison of psychosocial impairment in men and women. *International Journal of Eating Disorders*, 45(2), 233-240.
- ¹¹ Striegel-Moore, R.H. *et al.* (2001) Comparison of Binge Eating Disorder and Bulimia Nervosa in a community sample. *International Journal of Eating Disorders*, 29(2), 157-165.
- ¹² Villarejo, C. et al. (2012) Lifetime obesity in patients with eating disorders: Increasing prevalence, clinical and personality correlates. European Eating Disorders Review, 20(3), 250-254.
- ¹³ Masheb, R.M., White, M.A. & Grilo, C.M. (2013) Substantial weight gains are common prior to treatmentseeking in obese patients with Binge Eating Disorder. *Comprehensive Psychiatry*, 54(7), 880-884.
- ¹⁴ APA (2013a) Feeding and Eating Disorders. American Psychiatric Association.
- ¹⁵ APA (2013b) Desk reference to the diagnostic criteria for DSM-V. American Psychiatric Association.
- ¹⁶ Wilson, G.T. et al. (2010) Psychological treatments of Binge Eating Disorder. Archives of General Psychiatry, 67(1), 94-101.
- ¹⁷ Beintner, I., Jacobi, C. & Schmidt, U.H. (2014) Participation and outcome in manualized self-help for Bulimia Nervosa and Binge Eating Disorder - A systematic review and metaregression analysis. *Clinical Psychology Review*, 34(2), 158-176.
- ¹⁸ Vella-Zarb, R.A. et al. (2014) A Randomized controlled trial of motivational interviewing+self-help versus psychoeducation+self-help for binge eating. *International Journal of Eating Disorders*, 48(3), 328-332.
- ¹⁹ NICE (2004) Eating disorders: Anorexia Nervosa, Bulimia Nervosa and related eating disorders. London: National Institute for Health and Care Excellence.

8. Blank Food Diary

Time	Description & Quantity	Where	Type of Hunger	Binge?	Feelings

Meal Plan

Notes

Time	Meal	Description





LoCall Helpline 1890 200 444

P.O. Box 105, Blackrock, Co. Dublin T +353 1 283 4963 E info@bodywhys.ie www.bodywhys.ie