

# FOOD *for* THOUGHT

SUMMER 2016

# Eating Disorders and Mindful Eating

Supporting Recovery  
with Compassion  
and Collaboration

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## About The Center for Mindful Eating:

### Our Mission:

The mission of The Center for Mindful Eating, also known as TCME, is to help people achieve a balanced, respectful, healthy and joyful relationship with food and eating. By providing an easily accessible source of information and opportunities to interact via the web and in other ways, we seek to train and encourage professionals who can then foster this capacity in others.

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## About this issue:

# Exploring Mindfulness & Eating Disorders



**Claudia Vega**

*MD, M.S.*

As health care professionals working in the field of Mindful Eating, we may feel challenged when working with someone who is facing the complexities of an eating disorder.

And while we may have the best intentions, we could inadvertently harm them by not fully empathizing when it comes to the shades and silences of their suffering.

In this issue of Food for Thought, Dr. Kari Anderson identifies at which stages in the therapy process it is most effective to introduce Mindful Eating to patients battling an eating disorder. The timing of a mindfulness and mindful eating approach is very important and will largely depend on where the patient is in his or her physical and emotional healing process.

We hear from Caroline Baerten,

RD, about her experience of introducing mindful eating to her clients. She thoughtfully encourages us to remember our own embodiment of compassion and understanding, as this is the mirror that will help our patients soften their relationship with themselves and their bodies.

I contribute to this issue with our educational handout, providing guidance for patients and their families on how to identify a potential eating disorder.

We encourage you to read this issue with openness and curiosity. Perhaps you can discover how mindful eating can be of help to anyone with weight and body issues, not just those with classified eating disorders. When more of us approach food and eating with mindfulness, compassion and understanding, the more we will enjoy and love who we are -- and the less likely we will be to inadvertently harm others.

#### **Claudia Vega, MD**

*The Center for Mindful Eating,  
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# The Role of Mindful Eating in the Treatment of Eating Disorders



**Kari Anderson**

*DBH, LCMHC, CEDS*

Mindfulness, simply stated, is awareness in the present moment, without judgment. Mindful eating is mindfulness applied to eating behavior. Who wouldn't benefit from such a practice?

The key to the effectiveness of mindfulness when treating eating disorders is the level of readiness for such an intervention. Eating disorders fall along a continuum of behaviors, and although there is a common thread among them, there are significant differences from one end to the other end of the continuum. For example, anorexia, in many ways, presents as "opposite" to binge eating disorder and therefore the treatment needs to be different, at least in the early stages of the healing.

In general, those with binge eating disorder have less acuity and should be

introduced to mindful eating early as a means of helping heal the relationship with food and eating pathology. On the other side of the continuum, those with anorexia have physical treatment goals that come before addressing eating pathology.

## Treating Eating Disorders

Eating disorders can be seen as an adaptive behavior that becomes a disorder. They are very logical, once you understand the neurobiology, socio-cultural pressures and the self-regulatory response to stress that drives the behavior. From a basic needs level, Self Determination Theory simply explains disordered eating as a way to thwart or substitute needs. It can be extremely effective, until it's not. Ultimately, an eating disorder creates more problems than it solves. Therefore, the sooner an ED sufferer learns to meet their true needs, the better.

Cognitive behavioral therapy (CBT) has been the gold standard treatment for

eating disorders because it addresses the thoughts and emotions that lead to the behavior. Unfortunately, traditional CBT has shown only to be half as effective as it could be, largely due to the strong motivation needed in the treatment of eating disorders. The "resistance" that is often seen in this population is very responsive to an adapted form of CBT, originally developed for borderline personality disorder, called Dialectical Behavioral Therapy (DBT).

DBT was the first mainstream use of mindfulness to treat eating disorders. It shows a much higher effectiveness rate for those with binge eating and bulimia disorders than does traditional CBT. The therapy addresses patient resistance, while offering solutions that positively influence regulation and stress management for those who turn to food for exactly those purposes. Several mindfulness-based therapies have since emerged, known as Third Wave Cognitive Behavioral Therapies

*continued on page 4*

## role of mindful eating

*Continued from Page 3*

(ACT, MBCT, MBSR, MB-EAT and the like). Surprisingly, treatment resistant anorexia also can respond to Acceptance and Commitment Therapy, (ACT), partly because it focuses on core values, not just thoughts and emotions. Regardless of the form of mindfulness-based treatment, the primary advantage lies in disengaging the stress reaction and anxiety that blocks the ability to change.

## Mindful Eating in the Treatment of Eating Disorders

Humans are hard wired to react to stress, whether real or perceived, by fighting, fleeing or freezing. Many people turn to food to relieve stress, as eating can emotionally and physically calm us down by activating the “rest and digest” processes of the body.

Whether we have a hyperactive stress response or not, there are lots of things that stress us out. But today’s dieting culture, judgmental and body-biased environments, and “no pain, no gain” exercise trends put tremendous stress on our bodies emotionally and physically. Together, they reinforce the cycle of turning to food to self-regulate.

Any therapies that can disengage the fear response and allow for our parasympathetic nervous system to help us find homeostasis will decrease the reactivity and impulsive nature around food.

One aspect of mindfulness that is tailor made for eating disorders is that it helps manage the thoughts that lead to judgment. The “without judgment” part of the definition of mindfulness is essential because it diminishes our emotional reactions toward ourselves and others, keeping us out of an escalated state. The emerging trend of self-compassion is spawned from mindfulness theory. Nothing is more powerful than being able to disengage the judgmental mind and embrace yourself in the safety of self-



nurturing. This repairs the breached bond necessary to relax into safety and begin to trust in humankind. The focus of being present in the moment disengages the fear of the future (worry) and regret of the past. When our mind is filled with the past and the future, our stress response is activated where, unless you are in a cage with a tiger, the present moment should be void of stress.

Mindful eating means awareness in the present moment without judgment before, during and after eating. It can heal eating pathology by introducing a healthy relationship with food, meeting needs of autonomy and competency with food. It simply is the best model for long-term sustainability of healing from an eating disorder because it counters the rigid rule-driven behaviors propelled by the internalized thin ideal found in most eating disorders.

Mindful eating in the treatment of eating disorders can get tricky, however. A number of adaptive eating behaviors become automated by the brain and other complex feedback loops that regulate hunger and fullness. Regardless of why the initial behavior was developed, the body creates neuropathways and physiological adjustments that can override the basics of mindful eating. Interventions, such as refeeding protocols or meal structure corrections, may be necessary to restore the brain and physical health to a state where mindful eating can be effective.

For example, in the case of anorexia, allowing one to “wait for hunger” may result in further starvation. A person who binge eats has a diminished feedback mechanism to signal fullness; without a model as to what is “normal” eating, a binge-restrict cycle may be perpetuated. Lastly, there are more important treatment interventions prior to the introduction of mindful eating, mainly those who are not weight restored or are engaged in active purging behaviors. Physical stabilization is of highest priority.

The treatment of eating disorders requires specialized care. If there is any question as to whether a client has an eating disorder, they must be referred to a Certified Eating Disorder Specialist (CEDS) or someone with similar training and experience. Not only should a mindful eating professional refer their clients with eating disorders to a network of professionals -- such as psychologists and registered dietitians trained to treat eating disorders -- eating disorder professionals who lack training in mindful eating must first understand that mindfulness is not merely a technique, but a full embodiment of a non-judgmental, open and compassionate awareness of their clients.

## The Big Picture

Practicing mindfulness addresses the need to disengage the stress response and create safe environments. At some point in their journey, everyone healing from an eating disorder can benefit from a mindful practice and from mindful eating. The point at which one introduces mindfulness is largely determined by where a person is on the continuum of behaviors and their level of physical and emotional healing.

*Dr. Kari Anderson has been treating eating disorders for 25 years, with particular emphasis on Binge Eating Disorder. She is the Executive Director for Green Mountain at Fox Run and Chief Clinical Director for the newly opened Women’s Center for Binge and Emotional Eating in Ludlow, Vermont. Her website is: [www.fitwoman.com](http://www.fitwoman.com)*

# From Anorexic Eating Behavior to Binge Eating

*How to Introduce Mindful Eating to Your Patients who Display Disturbed Eating Behaviors*



**Caroline Baerten**  
MA, RD

## Stages of Change

Prochaska and DiClemente have developed a model that explains the six stages of change, which are very useful in identifying the “readiness” of the patient to bring change in their lives.

People in the pre-contemplation stage are hard to treat because there is no intrinsic motivation to change. It is only in the next stages where people begin to recognize that their behavior is problematic. At that point, a mindful eating program can be effective.

## Inner Resilience

Besides identifying the stages of change, mindful eating teachers need to understand the psychopathology behind every kind of disturbed eating behavior.

If the patient lacks inner resilience as well as an outer supportive social network, it would not be appropriate to focus on the eating behavior aspects of the mindful eating program. In these cases, general mindfulness exercises are advised.

### **These include:**

- Basic mindful breathing exercises from mindfulness-based programs
- Mindfulness of the feet in contact with the floor while walking or standing

## Desire to Be Thin or Fear of Gaining Weight?

Mindful eating is a transformative process where instructors don't focus on weight or the numbers on the scale. In



research findings, it is known that the primary reasons for dieting are not based on a desire to be thin (“thinspiration”), but on a fear of gaining weight. If anxiety and fear are the driving forces behind an eating disorder, this might evoke feelings of compassionate understanding in the health professional.

The embodiment of compassion by the health professional has been proven to be one of the most effective mirrors to soften the critical relationship people have with themselves and their bodies.

## From Extreme Dieting to Binge Eating

It is a misconception that people with extremely restrictive eating habits never have moments of binge eating. When feelings of hunger and taste satisfaction around foods are suppressed for a long time, there is no clear awareness of when to start or stop eating. This is the domain where mindful eating may play an important role. Once a regular eating pattern is established (using the expertise of a dietitian), a tailor-made mindful eating awareness program can be designed.

## The core elements in such a program include:

- 1. Reconnecting with the body;**  
The purpose is to find stability in

neutral physical sensations such as the breath, instead of living in the “head.” Feeling that the body is a source of wisdom and pleasure.

- 2. Mindfulness of thoughts;**

By bringing awareness into the thought process, poor mindsets can be untangled, understood and finally released.

- 3. Mindfulness of emotions;**

In a mindful eating program, emotions are labeled and connected with feelings in the body. This way, their impermanent nature is experienced on a physical level.

To conclude, mindful eating is an intervention that needs to be implemented with care when there is a diagnosed eating disorder. Depending on the duration and the severity of the eating disorder, the dosage of mindfulness and mindful eating exercises needs to be adapted and balanced with other interventions, such as antidepressants, nutrition education or individual therapeutic guidance.

*Caroline Baerten (Belgium) is a mindfulness-based nutritionist/ RD, qualified chef and integrative psychotherapist. She specializes in work with disturbed eating behavior and nutrition ecology. She is a certified Mindful Eating, Conscious Living teacher (ME-CL) and a qualified Mindfulness-Based Stress Reduction (CFM, University of Massachusetts) and Mindful Self-Compassion teacher. She serves on the TCME Board. She welcomes comments on this article and can be reached at [info@me-nu.org](mailto:info@me-nu.org), more information available at [www.me-nu.org](http://www.me-nu.org).*

# Mid-summer marks a New Year for TCME



**Marsha Hudnall**

MS, RD, CD

The middle of summer in the U.S. marks the end of another busy year for The Center for Mindful Eating, fondly known as TCME. Our year is marked by our fiscal year of July 1st - June 30th

Thanks to all of you who have participated in building The Center for Mindful Eating through your participation in our webinar programs, your membership and your donations. You have helped us provide resources for furthering the practice of mindful eating, which offers so much in a world where eating struggles are becoming the norm.

In particular, thanks to TCME co-founder Megrette Fletcher, RD, MEd, CDE, for her leadership over the past two years as president of TCME. The time has come for a change, marked by the departure of long-time guiding voices of the board (who moved over to the Advisory Council, so we still have access to their wisdom), and the arrival of new board voices, who have engaged in lively conversations as we enact TCME's vision.

Megrette will be stepping down as president at our upcoming annual meeting of the Board of Directors, but she will remain on the board. -- so TCME will continue to benefit from her wisdom. Please join us in thanking her for her dedication over the years.

Megrette has been at the helm since the inception of TCME in 2006; without her, we truly would not be here today!

We'd also like to express our gratitude to Shirley Kessel, who served as our treasurer last year, and lead us through our first fundraising auction. We wish her well in her new career path helping people who suffer from chronic migraines.



**All of us at The Center for Mindful Eating are working hard to provide real benefit to our members, as well as to the public at large.**

We are delighted to welcome Sharon Theroux, Ph.D., to the TCME board. Sharon has graciously stepped in as our new treasurer. She is a licensed psychologist and board certified neuropsychologist, working in private practice with her husband in South Florida since 1995. In 2013, after discovering first hand the benefits of mindfulness, Dr. Theroux founded the South Florida Center for Mindfulness. Its mission is to educate healthcare providers and the South Florida community in mindfulness-based interventions. She also co-founded International Seminars Group, an APA-approved continuing education sponsor for psychologists and therapists. Please join us in welcoming Sharon to the TCME board of directors.

## Highlights of the past year

One of our top highlights from this past year was launching our first Fundraising Auction at which we raised more than \$6,000 to help support the programs we offer each year. Our next

auction is planned for November 2016 - if you are interested in volunteering to help us, we very welcome your ideas, support and donations. Last year we offered a wonderful array of books on mindful eating, travel opportunities, discounted training programs and more.

We also organized and held an International Mindful Eating Day, which attracted more than 500 participants. We invited our members to create videos to share with the world about why they love mindful eating both personally and professionally. Many thanks to Fiona Sutherland and Megrette Fletcher for spearheading this event! We are very much looking forward to the 2nd Annual International Mindful Eating Day coming in January 2017.

The members of the board have worked with our advisory board and a handful of TCME members to write and publish a series of Position Statements on healthy eating, meditation, sustainable food systems, food security, and healthy weights. These position statements help provide a guiding philosophy for our work as mindful eating professionals. The most recent statement on weight concerns is currently undergoing revision, with the valuable help of a committee of TCME members, including Fiona Sutherland, Camerin Ross, Andrea Lieberstein, Cuca Azinovic, Janet Joseph and Marsha Hudnall. We hope to share this statement with you in our next issue of *Food for Thought*, Fall 2016.

Join us in celebrating our 10-year anniversary! All of us at The Center for Mindful Eating are working hard to provide real benefit to our members, as well as to the public at large. We can't do that without your support. Please consider becoming a supporting member, or making a donation to help us continue to provide these services. Warmest Wishes from all of us at The Center for Mindful Eating.

# Eating Disorders: A Guide to Share with Clients, Patients and Relatives



**Claudia Vega**

MD, M.S.

Eating disorders (ED), such as anorexia, bulimia and binge eating, are caused by a number of different biological, genetic and environmental factors. These are chronic, and often life-threatening mental illnesses. They are not a lifestyle preference. ED's have the highest mortality rate of all psychiatric illnesses. Although ED's are most prevalent among female teenagers, they are now becoming more common among older women, children and men.

Because of their progressive nature, early ED recognition is critical. Unfortunately, the signs are often subtle, making diagnosis difficult (and sometimes delaying it for years). Further, treatment is expensive and hard to obtain, as there are not enough specialized clinics. That is why education and early detection can help diminish the suffering ED's can cause.

Prevention programs aim to reduce the risk factors of people who express significant dissatisfaction with their bodies -- or who base their self-esteem on appearance -- by promoting self-esteem based on talent, accomplishments and character. They promote healthy eating instead of dieting, and discourage the idea that a particular body size leads to happiness and success.

## How can I know if a person is at risk for an Eating Disorder?

Early detection and prompt

treatment of an ED are associated with a better prognosis. For this reason, it is important to know what to look for. Some ED symptoms are well known, such as an obsession with body weight, restrictive eating or a compulsion to count calories. Other signs are subtler, like sensitivity to cold.

## Some signs that may indicate an Eating Disorder

The following signs and symptoms may indicate that a person is developing, or is at risk of developing, an Eating Disorder. (Keep in mind, a true diagnosis can only be made by specially-trained health professionals.)

### Physical signs:

- Dramatic weight loss, constant weight fluctuation or obesity
- Hair loss, the appearance of fine body hair and dry skin
- Damage to tooth enamel, swollen cheeks
- Constant vomiting
- Lethargy, fatigue, fainting or dizziness

### Psychological signs:

- Low self esteem, depression, anxiety, irritability
- Increased preoccupation with appearance, weight and body shape
- Fear of losing control of eating and gaining weight
- Anxiety around meals

### Behavioral signs:

- Constant dieting or counting calories, skipping meals
- Rituals around eating (cutting food

into tiny morsels or arranging food in certain patterns). These rituals can be an attempt to disguise eating less.

- Deceptive eating behaviors (secretly eating, secretly throwing food away, lying about the amount of food consumed)
- Binge eating, constantly seeking food for comfort
- Frequent trips to the restroom after meals; use of laxatives or excessive exercise
- Change in clothing style to hide weight loss or weight gain

If you identify some or several of these signs in a friend or relative, please consider talking with them, kindly and compassionately. You may want to suggest he or she seek professional help. If you are that person, please do not be afraid to seek assistance. You deserve to be healthy and safe.

Family and friends are the biggest support for patients with ED. As such an ally, it is necessary to be mindful and compassionate. Judgmental speech can only add to their suffering.

### References:

- DSM-V
- National Eating Disorders Association
- Academy for Eating Disorders

*Dr. Vega is a pediatrician, Mindfulness Based-Nutritionist and Psychotherapist, specializing in disordered eating and weight issues with children and adolescents and their families. She serves on the TCME board. She leads Mindful Eating workshops and retreats for children, teenagers and adults. Her website is: [www.nutrintegra.com](http://www.nutrintegra.com)*

# COMMUNITY WISDOM:

We invited our members to share their experiences of supporting eating disorder clients' recovery with mindful eating.

Do you recall a mindful eating moment when you were able to shift from negative thoughts or judgments to a more spacious, kind, or neutral perspective?

"It was 1993, and Ellyn Satter [an RD] was a keynote speaker at the Washington State Dietetic Association. I was totally flabbergasted when she stated "people should not diet." Basically, all the RD's in the audience were also shocked that she would suggest such heresy. Fast forward about ten years, and I arrived at the same conclusion. The shift was slow, but sure."  
~ *Ainhoa Campo, Psychologist, Pamplona, Spain*

"I was criticizing myself for some of my food decisions during a meal. I took a moment to pause and I remembered I did not need to be judgmental about my food choices. My food choices at that moment were based on what I needed at that moment."  
~ *Julie Drzewieck, MS, RD, CDE, Huntsville, AL USA*

"This happened for me in the 1980's while working with the Women's Therapy Centre Institute in New York. I stopped fighting my body and my appetite, and I worked to accept both."  
~ *Cara Goubault, Psychologist, Lorient, France*

How do you know when a client with an eating disorder is ready to benefit from mindful eating?

"When patients state they are sick and tired of dieting and are not sure if they are eating enough or too much."  
~ *Pam McGovern, Certified Health Coach, Effingham, NH USA*

"They stop focusing on just the food and are able to identify how they feel."  
~ *Janet Milner, RDN, LDN, Wilkes Barre, PA USA*

"When I tell them: On this path you might laugh and you might cry; it can take time and I cannot promise that you will lose weight. However, if after x number of sessions you feel more balanced and in control of your life, would that be

enough? If they say yes, then we go ahead. I got this idea from Char Wilkins and I found that it really works."  
~ *Karen Koenig, LCSW, M.Ed. Sarasota, FL USA*

"When it feels like taking away the restrictive framework for eating is something that can be explored in therapy. Anorexic patients often can't recognize hunger and satiety easily, and bulimic patients can be very frightened."  
~ *Cara Goubault, French Psychologist, Lorient, France*

What are some ways that you help your clients practice mindful awareness so that they are able to more skillfully respond (instead of react) to difficult thoughts and emotions?

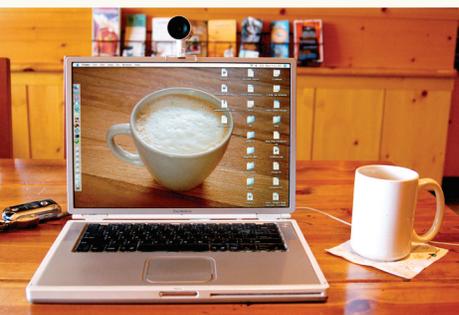
"[By keeping] an emotional food journal; logging not only what they ate, but when, the circumstances/surroundings and how they felt before and after. In the moment, the client may not understand what drives the decisions they make and end up feeling negatively towards themselves for not making the best decision. Looking back at the journal can frame the external circumstances which led to their behavior. It can help them craft a plan to deal with those circumstances."  
~ *Pam McGovern, Certified Health Coach, Effingham, NH USA*

"Visualization of self in an anticipated setting, such a home meal with family members, work environments, and so on."  
~ *Janet Milner, RDN, LDN, Wilkes Barre, PA USA*

"Breathwork, journaling, mantras and affirmations."  
~ *Meg Ramstad, MSN, ARNP, Port Orange, FL*

"I use a train analogy. If you're waiting in a train station to go somewhere, you don't get on every train that passes by, only the one that will take you to your destination. Equally, if a thought is judgmental, you don't want to attach to it because it's not taking you where you want to go emotionally or mentally."  
~ *Karen Koenig, LCSW, M.Ed. Sarasota, FL USA*

"We practice purposefully observing the thoughts without judging a few times a day. Even set the alarm on the phone, if it is difficult to remember. We also practice not going harshly against ourselves when we do something we consider wrong, like overeating."  
~ *Ainhoa Campo, Psychologist, Pamplona, Spain*



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Learn more about becoming a member of The Center for Mindful Eating at: [thecenterformindfuleating.org/join-us](http://thecenterformindfuleating.org/join-us)