



# How to Stop Binge Eating

## 6 Steps to Freedom

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# Welcome!



“

*Tell me, what is it you plan to do with  
your one wild and precious life?*

-Mary Oliver



# Today's Goals

## Understand

- What is Binge Eating and Binge Eating Disorder?
- The Relevance of Weight Stigma
- Theories of Etiology
- Treatments that Work

## Apply

- 6 Steps to Freedom from Binge Eating
- Plan for Relapse Prevention
- Prepare for Success



# What is Binge Eating Disorder?

# Most common, least known eating disorder



Recurrent periods  
of eating definitely  
more than others  
would in similar  
circumstances  
in 1-2 hours

- at least  
once weekly  
for three  
months

Perceived loss  
of control over  
eating

Between 6-12 million  
people in the U.S.  
meet criteria at some  
point in their lives  
(on average)

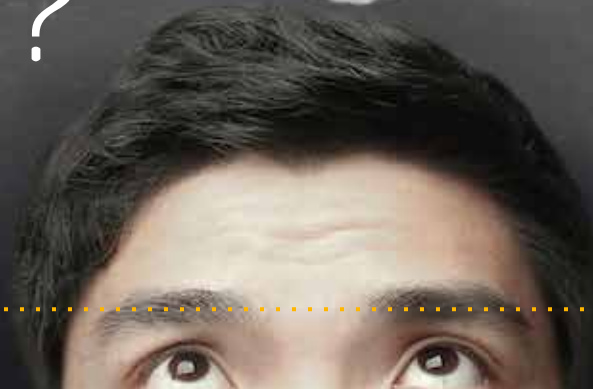
DSM-5, APA, 2013; Gaudiani, 2019.



# At least **3** associated symptoms:

- Eating more quickly than normal
  - Eating to discomfort
  - Eating large amounts of food when not hungry
  - Eating alone due to embarrassment
  - Distress following binge episode
- **Lack of compensatory behaviors**

What  
else do  
you need  
to know?



# What you **need** to know:

- Associated with significant stigma
- Can occur at any weight
- Later onset (mid 20s)
- Medical risks





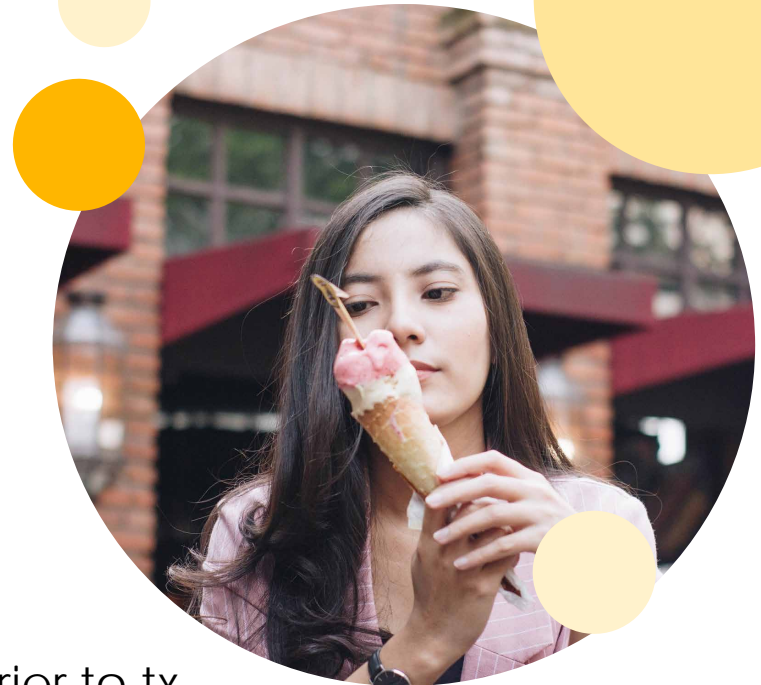
# What you **need** to know:

- Does not require overvaluation of weight & shape
  - Is more common among dieting individuals
  - Presence is related to worse prognosis
- Less gender discrepancy



# What you **need** to know:

- Potential barriers to treatment in clinical settings
  - Physicians
  - Therapists
  - Clients/patients
- Often overlooked by clinicians
- Fear of stigma is most common barrier to tx



# Poll

Approximately  $\frac{1}{2}$  of Americans  
are in larger bodies

False: 2/3



# Poll



The Health at Every Size movement is based on the evidence and philosophy showing that people of all shapes and sizes can be healthy and fit.

**True:** this model supports a shift away from health and onto health parameters such as blood pressure, heart rate, blood sugar level etc. This is the philosophy that I support.

# Poll

Weight stigma may be the last  
“acceptable bias.”

**True:** less studied but more acceptable and  
severe than racism, sexism and other forms of bias



# Poll



Participants with the highest level of food insecurity (i.e., adults who reported having hungry children in their household) also endorsed significantly less risk for binge eating because food was so highly valued.

**False:** participants with the highest level of food insecurity endorsed significantly higher levels of binge eating

# Poll



All experts who treat eating disorders agree it is important for clients to be weighed weekly and confront the number to decrease anxiety that may arise from avoidance.

**False:** some providers believe clients should be blind weighed, others believe it is important not to weigh clients. There is vigorous debate on this issue. It is important to address how you will handle weights and weighing in treatment as a client and as a provider.



# Weight Stigma...

is a vicious cycle...

& **NOT** a beneficial  
public health tool





Weight gain / Weight-based stigma



Stress



Increased Eating & Increased Cortisol



Weight Gain



# Coping



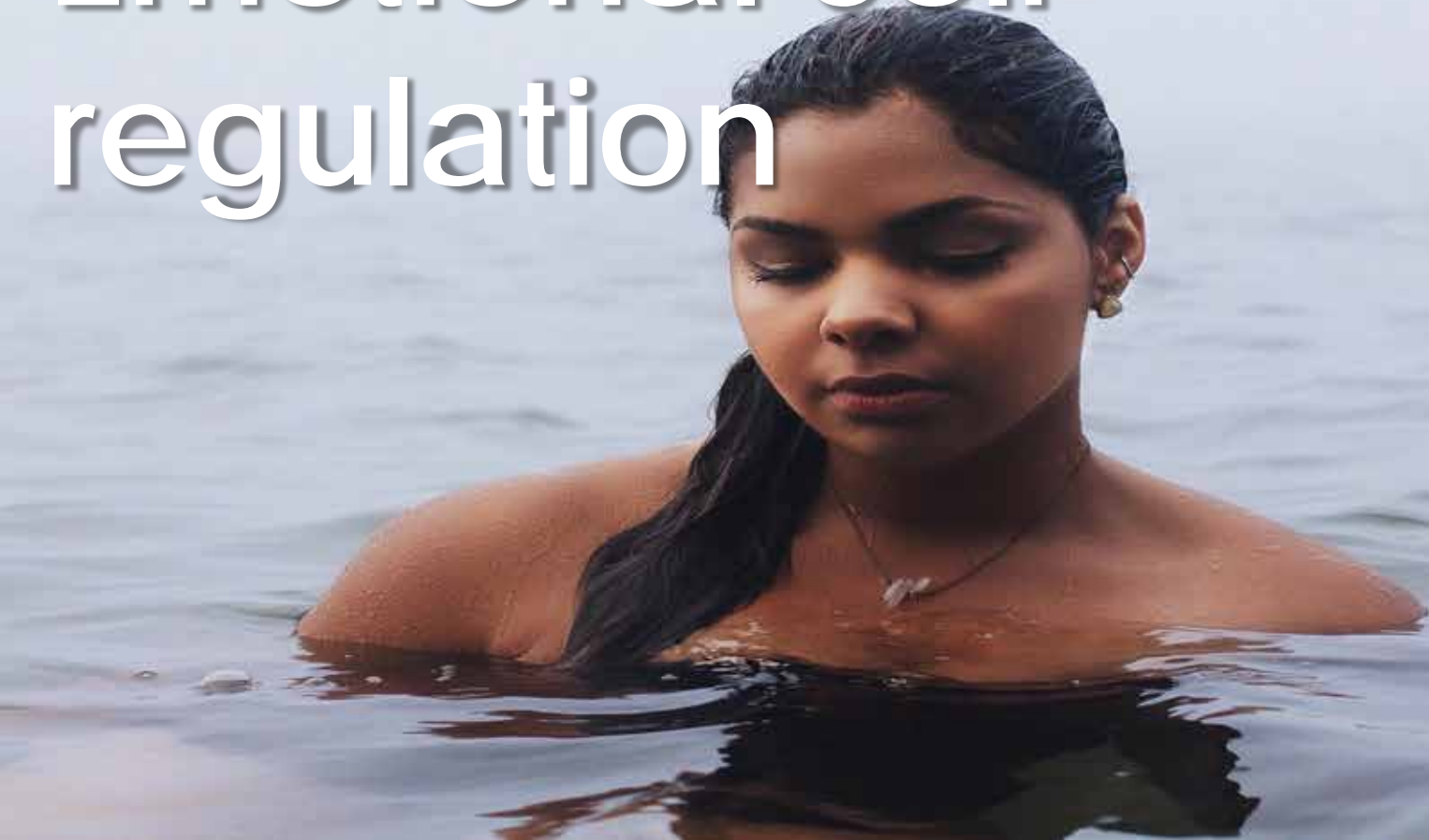
# Dieting





# Psychological Distress

# Emotional Self-regulation

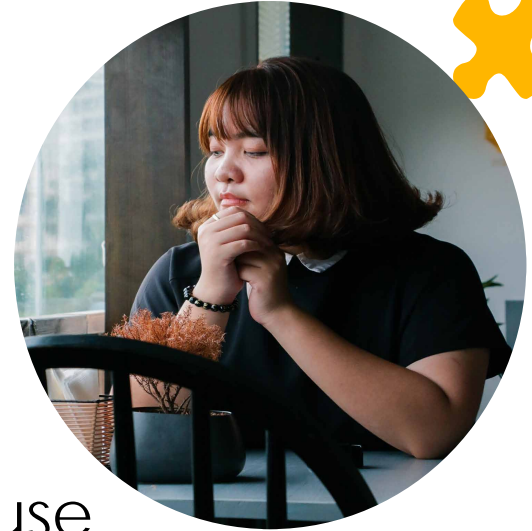


# Cortisol Levels and Body Stores Fat



- Have the conversation with your patients, clients, and doctors
- Health at Every Size Philosophy
- “I ask my patients in larger bodies what words would you like me to use to refer to your size when needed?”

**Jennifer Gaudiani, M.D.** An internal medical physician - a specialist in the medical complications of eating disorders (Sick Enough 2019)





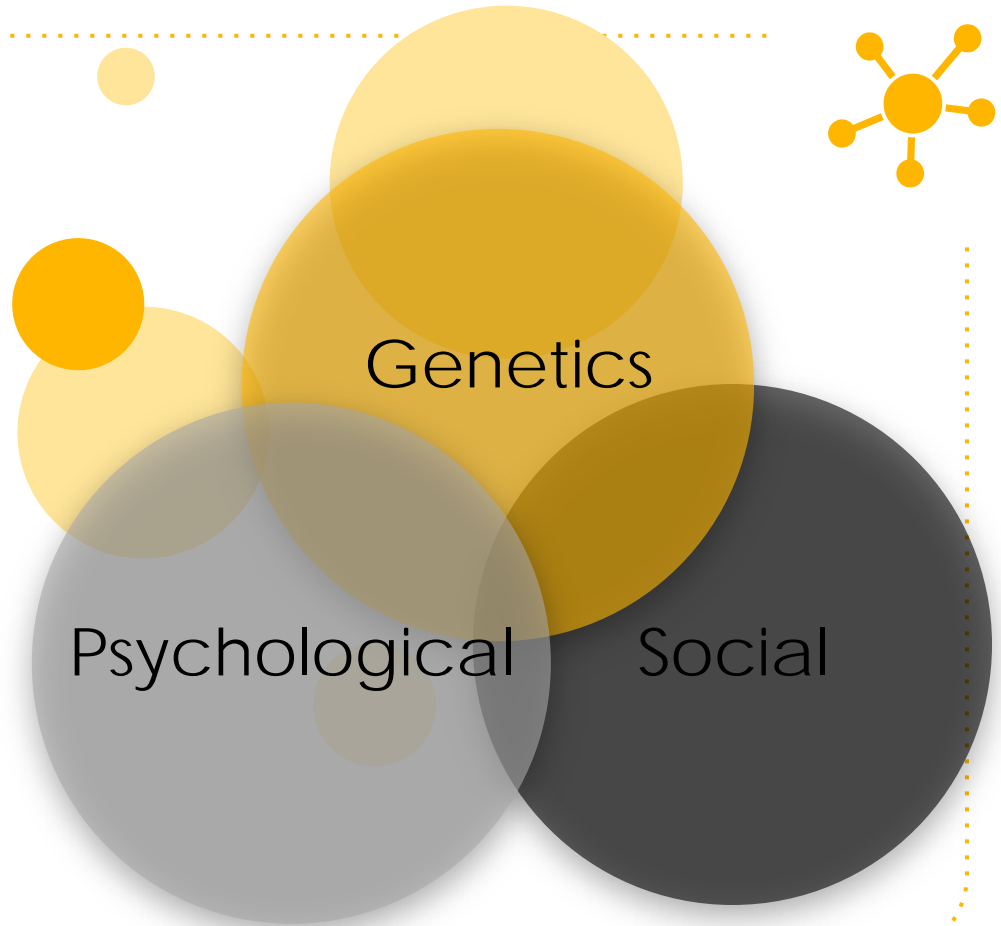


# Theories of Etiology

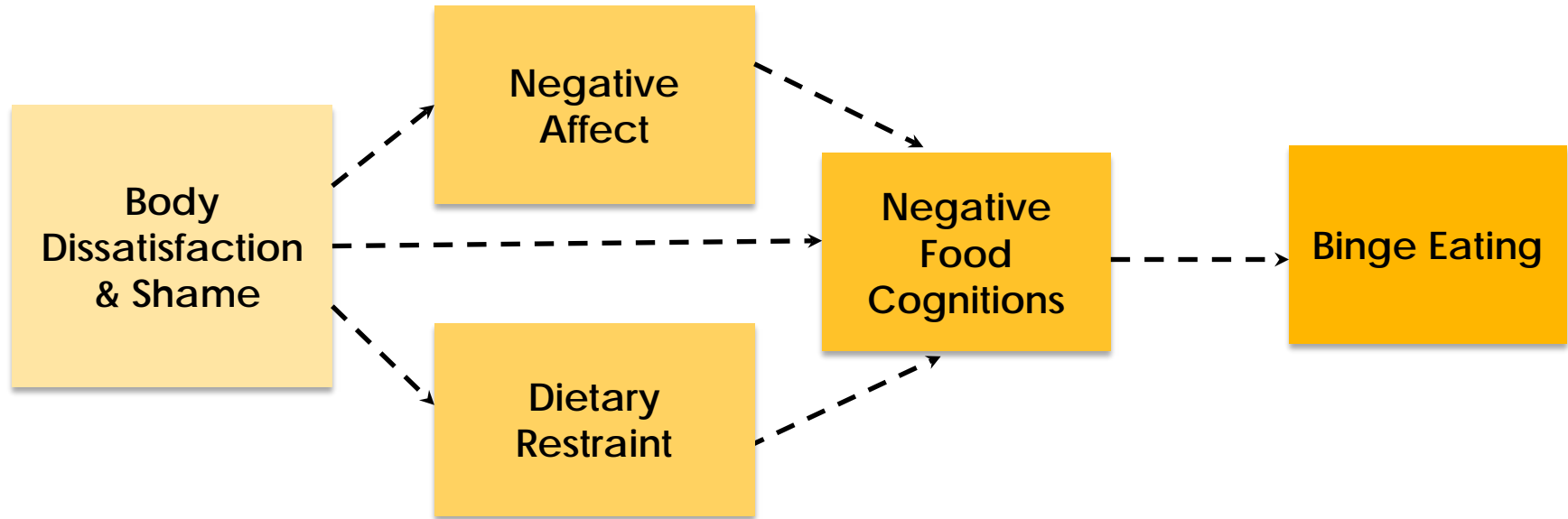


We think genes load the gun by creating behavioral susceptibility such as perfectionism or the drive for thinness. Environment then pulls the trigger.

- Walter Kaye, M.D.



# Dual Pathway Model **Updated**



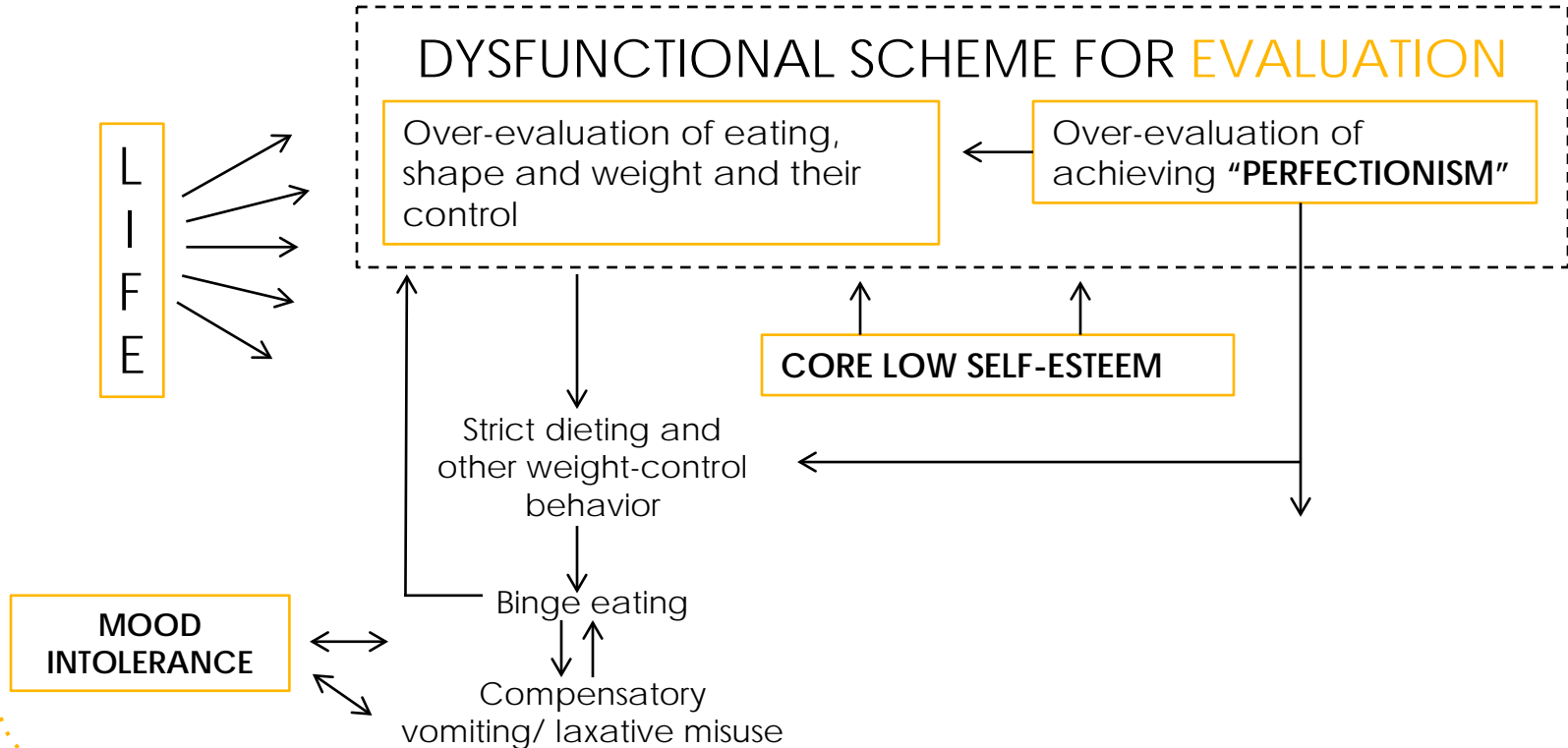
# Emotion Regulation Models



- BE more prevalent among those with depression, anxiety, stress
- Eating in response to emotional distress
- Affect-regulation theory: improve emotions after binge eating
- Escape theory: alleviate negative emotion
- Emotional arousal theory: overeat to reduce arousal
- BE is associated with emotion-oriented coping and avoidance/distraction



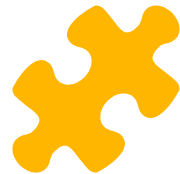
# Transdiagnostic Model



# Addiction Model:

## Is it an Addiction?





## Similarities

- Loss of control
- Consuming more than intended
- Unsuccessful attempts to quit
- Role impairment
- Time consuming
- Cravings
- Some neurobiological similarities
  - Altered reward sensitivity

## Differences

- Tolerance? Withdrawal?
- All or nothing thinking is not the goal
- Not correlated with other forms of addiction
- There is a cure
- Food's effect on the brain is weak & much less neurotoxic
- Food responses more diffuse
- Food avoidance/abstinence is counterproductive
- It's not an addiction to any one food

# Most Effective Treatments:

## CBT and IPT



- up to 79% of the patients benefit from the therapy and show abstinence from binge-eating at the end of the active treatment.



Munsch, S., Wyssen, A., Vanhulst, P., Lalanne, D., Steinemann, S. T., & Tuch, A. (2019).



**CBT Philosophy:** changing thoughts and behaviors about eating, weight & dieting can lead to recovery

- Eating regularly
- Use self-control strategies
- Problem-solve
- Clinician to share hope, offer reassurance

**IPT Philosophy:** making relationships more satisfying can lead to recovery

- Indirect focus
- Improve and maintain current Build new relationships
- No focus on eating or weight
- Clinician to share hope, offer reassurance







# Step 1 to Freedom

# It is about food.

## Normalize Eating.



“

*Diets don't work. There. I said it. Maybe that's not what you wanted me to say, but I'm here to tell you the truth, according to science, without sugarcoating it.*

- Traci Mann, Ph.D.  
[Secrets From The Eating Lab \(2015\)](#)



# What is true about dieting?

## A Poll



Approximately 3% of young women engage in unhealthy dieting such as restricting, purging and binge eating.

**False:** Between 4-20 %

# What is true about dieting?



## A Poll

Cultural pressures to be thin for girls and muscular for boys are risk factors for developing an eating disorder.

**True:** this is not the only risk factor but it is one. Also, genetics vulnerability, personality traits, psychological factors and other environmental factors all contribute.

# What is true about dieting?



## A Poll



In 2005, a U.S. nationwide sample revealed that almost half (47%) of adults in the United States are trying to lose weight at any given time.

**True**

# What is true about dieting?



## A Poll

A review article found that 25% of diet study participants gain back more weight than they lost on the diet.

**False:** 30-60% gained back more

# What is true about dieting?



## A Poll



Dieting in the past is a predictor of weight gain, and the longer participants were followed up, the more weight they gained.

**True**

# What is true about dieting?



## A Poll

14 Biggest Loser participants who were studied for 6 years after the competition maintained most of their weight loss amount.

**False:** most gained back a substantial amount —they maintained about 12-17% of the weight loss )



# What is true about dieting?



## A Poll

The same 14 Biggest loser participants showed a large persistent metabolic adaptation 6 years later.

**True:** this means they had to work harder to just maintain their weight because the dietary restriction caused their bodies to develop a lower resting metabolic rate than would be expected. For example, they had to eat 500 calories less than someone would be expected at their height, weight and age to maintain their weight. The dieting seems to have caused the metabolic adaptation; A meta-analysis of previous cross-sectional studies found that subjects who had lost weight exhibited a 3% to 5% lower RMR compared with control subjects who had not lost weight.

# Give up Dieting



- Dieting may seem normal because it is so common
- But there is nothing normal about dieting
- Key findings from the Minnesota Starvation Study



# Make eating more regular, predictable, planned.

- Make a daily plan
- 3 meals and 2-3 snacks daily
- Weight neutral
- Stop delayed eating
- No more than 4 hour interval between eating
- Track with paper or app
- Contain eating to meals and snacks only
- No focus on content of meals and snacks at first (but include all food groups)
- Structure connects you with hunger and fullness cues





Time	Food and/or Drink consumed: Not measured, not calorie - driven. Ex. A turkey sandwich, a handful of chips or an apple or yogurt with some granola	M= Meal S=Snack B= Binge	Situation: Alone? With people? Where?	Thoughts? Feelings?
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Breakfast

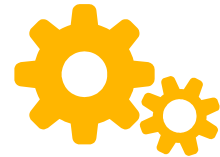
Morning Snack

Lunch

Afternoon Snack

Dinner

Evening Snack



Make a commitment not to diet, to plan your meals and eat regularly throughout the day. Write out this goal in your own words.

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Tell one person. Who will that be?

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# Step 2 to Freedom



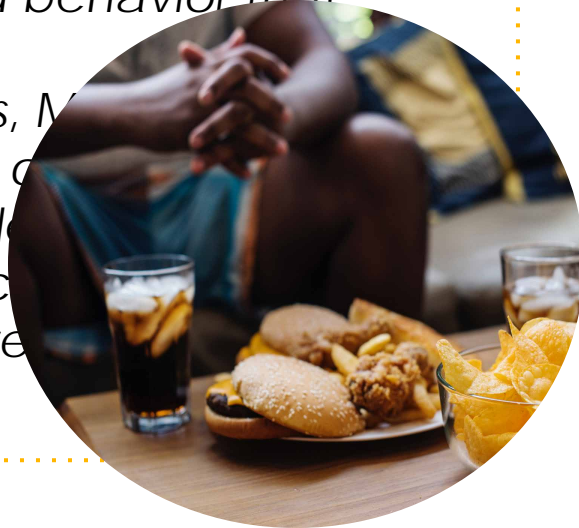
It is not **ALL** about food. Identify **triggers** that lead you into binge eating.

*Sometimes a binge is just a binge. It is an isolated behavior that even*

*if recurrent, is not associated with other problems, More than not though, binge eating is associated with other difficulties. The relationships between these problems and binge eating is complex, and often vicious cycles develop that are self-maintaining and hard to break.*

- Christopher Fairburn, M.D.

Overcoming Binge Eating (2013)





# Eating patterns





# Sticking to your Eating Plan



- |     |    |   |
|-----|----|---|
| Yes | No | I am not dieting.   |
| Yes | No | I am planning my daily meals and snacks.                                      |
| Yes | No | I am not skipping any meals or snacks.  |
| Yes | No | I am not eating in between meals and snacks.                                  |
| Yes | No | I am tracking my food.  |
| Yes | No | I am not cutting out food groups, calorie counting or measuring.              |
| Yes | No | If I binge eat, I get right back to my eating plan at the next meal or snack. |



# Situations & Relationships

A close-up, low-angle shot of a person's hands on a steering wheel, driving a car at night. The driver is wearing a dark long-sleeved shirt and a metal link watch on their left wrist. The steering wheel is black with a silver Toyota logo in the center. The background is blurred, showing the interior of the car and the view through the windshield at night.

# Coping with Risky Situations and Relationship Challenges

- Put barriers into place to interrupt time of day when you typically binge eat.
- Put barriers into place in the location where you typically binge eat.
- Plan to eat in public or with others to decrease risk.
- Notice any foods that tend to lead to binge eating.  
Eat them at less risky times.



# Coping with Risky Situations and Relationship Challenges

- Stop habit of compare and despair.
- Learn communication skills to enhance closeness.
- Participate in new activities to expand your relationships.
- Plan for how you will deal with loneliness.
- Reach out for support.



# Thoughts: cognitive distortions



Waller et al., 2002; Marcus et al., 1998

# Coping with Negative Thoughts

- Identify your most common thoughts that precede binge eating
- Which cognitive distortion is it related to? Catch, check and change your thought.

*"I totally blew it. I ate a piece of cake so I might as well eat the whole thing. I blew it. Now it doesn't matter what I do."*

**Cognitive distortion:**  
**Polarized or all-or-nothing thinking.**

*"One piece of cake is not a catastrophe. I will feel out of control if I eat the whole thing. One piece of cake is not the same as eating the whole cake. There is a big difference."*

# Emotions: Feelings wheel





# Coping with Distress: Distract, Accept, Soothe

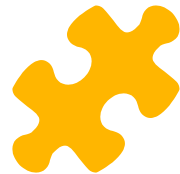
- Distract yourself with a pleasurable activity
- Name and accept the emotion
- Give to others
- Remove yourself
- Participate in a task
- Soothe yourself







# Step 3 to Freedom



Problem **solve.**

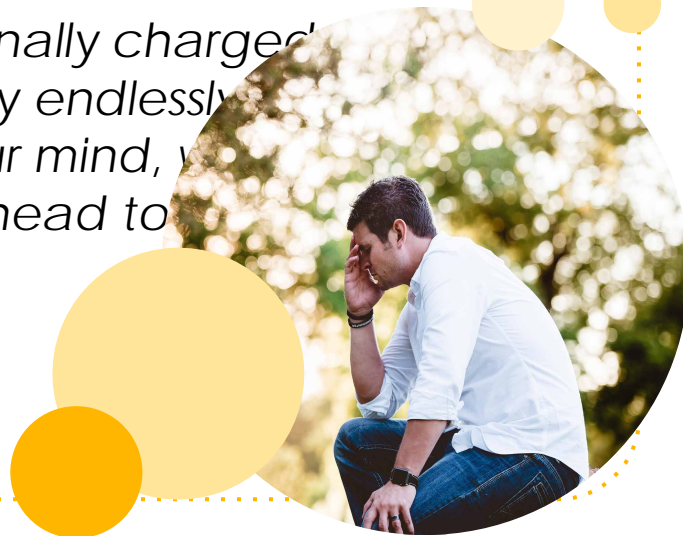
Build a **pathway** to a new normal.

“

*How do we generally prepare for an emotionally charged event? Many of us imagine the worst or worry endlessly rather than drowning in the nightmare in your mind, you not consider realistic challenges and plan ahead to reduce your vulnerability?*

- Jennifer Taitz, Ph.D.

End Emotional Eating (2012)

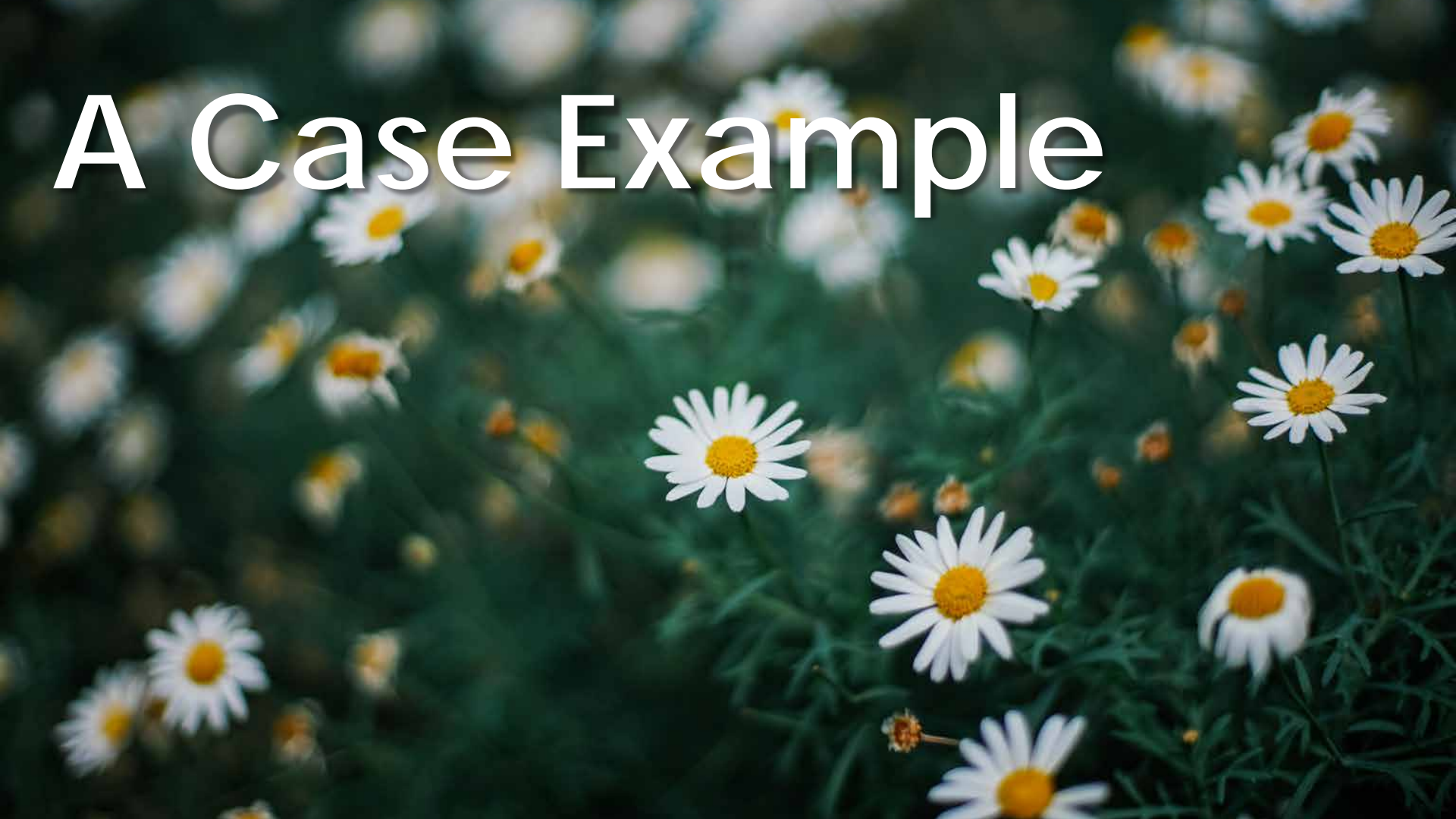


# Write Your **Healthy Coping Plan**

*Complete the following sentences after reviewing tracking data and problems you identified in Step 2.*

	Triggers to Binge Eat	Maladaptive Coping	Positive
Coping			
Food related:			
Emotional:			
Cognitive:			
Interpersonal:			
Situational:			

# A Case Example





# Step 4 to Freedom

# Right-size your concerns about weight and shape.



“

*My first recommendation is to stop talking about your body. No comments, either positive or negative. This is because a focus on body appearance, especially when a narrow set of ideals is applied to concepts like beauty, acceptance, or health, is unscientific, nurtures internalized stigma, and may induce shame or body dissatisfaction. Your children are watching you like little hawks, learning to follow your cues. Don't celebrate if you lost weight, and don't complain about any aspect of your body...Equally important is not commenting on people's bodies.*

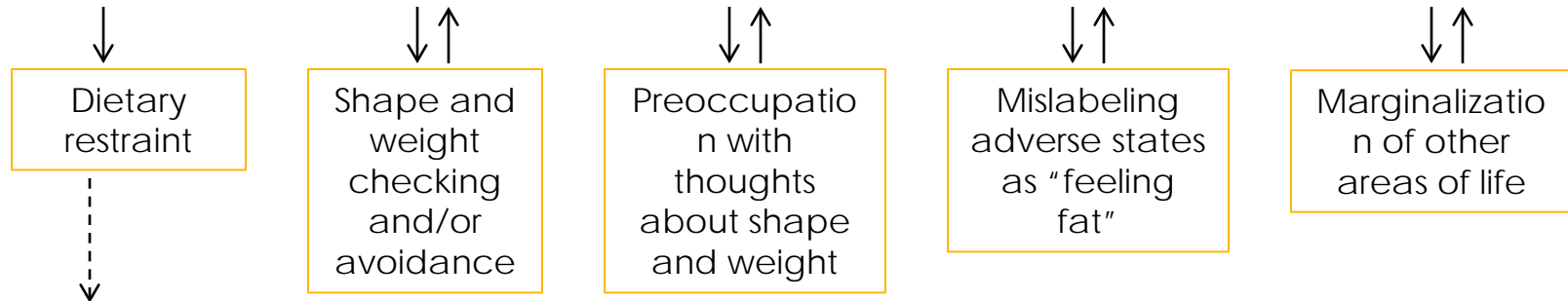
- Jennifer Gaudiani, M.D.  
[Sick Enough](#) (2019)



# Are you **preoccupied** with your weight and shape?



Over-evaluation of shape and weight and their control





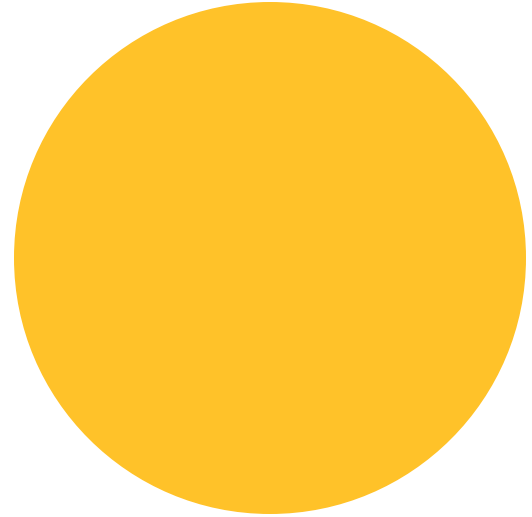
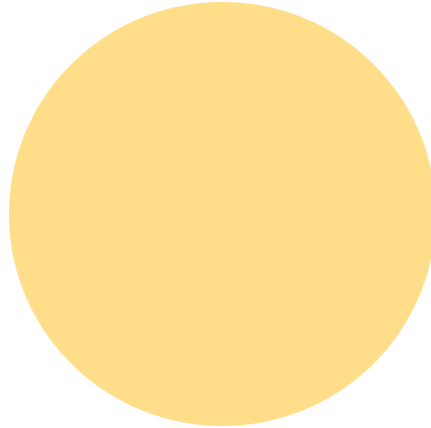
# Values as Guide to Change



List Your Values

Now

Ideal







# Step 5 to Freedom

# Give up Perfectionism



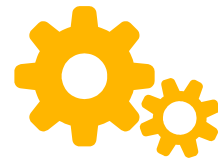
“

*Perfectionism is not the same thing as striving to be your best. Perfectionism is the belief that if we live perfect, look perfect, and act perfect, we can minimize or avoid the pain of blame, judgement, and shame. It's a shield. It's a twenty-ton shield that we lug around thinking it will protect us when, in fact, it's the thing that's really preventing us from flight.*

- Brené Brown  
[The Gift of Imperfection](#) (2010)



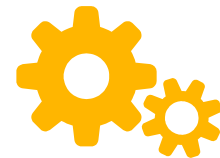
# Why & How Should You Give up Perfectionism?



- All humans make mistakes, experience failure, feel lonely, endure rejection, etc. throughout our lifetimes
- If you respond as if these negative experiences should never happen to you, you may experience shame and become self-critical
- Self-criticism triggers our threat-defense system and activates fight, flight or freeze
- The stress that results from constant self-criticism may lead to lead to anxiety, depression, and it may maintain binge eating



# Why & How Can You Give up Perfectionism?

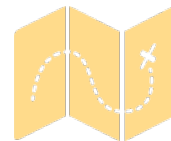


- Perfectionism can lead to shame; shame can lead to isolation and lower self-esteem because you try to hide that you are imperfect & feel bad about yourself
- Can you accept that all humans are imperfect, therefore you are too?
- Instead of responding to yourself with self-criticism, can treat yourself with kindness?
- Try practicing a Loving Kindness meditation daily





# Step 6 to Freedom



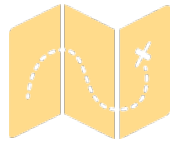
Prepare for problems  
and plan for success.

“

*“Relapse is not fate. It is a stumbling block...”*

- Julie O'Toole, M.D.  
[www.kartiniclinic.com](http://www.kartiniclinic.com) (2017)

# Relapse Prevention Plan



Cues that let me know I may  
be at risk **LATER**

I am thinking:

I am doing:

I am feeling:

The situation:

Relationship problem:

Cues that let me know I may  
be at risk **NOW**

I am thinking:

I am doing:

I am feeling:

The situation:

Relationship problem:



# What is Normal Eating?



Ellyn Satter's Definition





# Your Definition of Normal Eating



# What is Freedom with Food?



Carolyn Costin's Definition of recovery from an eating disorder:

*Being recovered is when a person can accept his or her natural body size and shape and no longer has a self-destructive relationship with food or exercise. When you are recovered, food and weight take a proper perspective in your life, and what you weigh is not more important than who you are; in fact, actual numbers are of little or no importance at all. When recovered, you will not compromise your health or betray your soul to look a certain way, wear a certain size, or reach a certain number on a scale. When you are recovered you do not use eating disorder behaviors to deal with, distract from, or cope with other problems.*

Costin and Grabb, [8 Keys To Recovery From an Eating Disorder](#) ( 2011)

## The 6 Steps

Step 1: Normalize Eating

Step 2: Identify Binge  
Eating Triggers

Step 3: Problem Solve

Step 4: Right-Size Weight  
and Shape Concerns

Step 5: Give up  
Perfectionism

Step 6: Plan Relapse  
Prevention

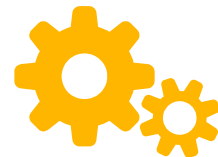
**Write Your Own Definition  
of Freedom with Food!**

# Thank you!

**Contact:**

Glendon@Glendon.org

800-663-5281



THE GLENDON  
ASSOCIATION

[www.glendon.org](http://www.glendon.org)

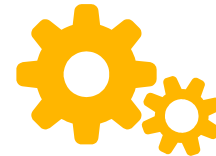
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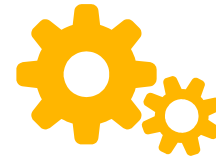
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