The ART of Binge Eating Disorder: Assessment, Risks, Treatment

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Objectives

• Implement assessments for Binge Eating Disorder
• Summarize diagnostic criteria for BED in Diagnostic Statistical Manual-V
• Describe risk factors for BED
• Describe the relationship between stress and overeating
• Implement at least 3 interventions for the treatment of BED
Assessment

- Gather height and weight data
- Lab work
- Perception of weight and shape
- Importance of weight and shape
- Relationship with food
- Binge-eating episodes
- Compensatory behavior
- Stress and stress-eating, other triggers
- Support of family
Diagnostic Criteria

• Binge Eating Disorder, 307.51
  – Formerly Eating Disorder Not Otherwise Specified

• Subjective binge versus objective binge
  – Recurrent binge eating: 1 p/ wk for 3 months

• Absence of compensatory behaviors

• Specify severity
  – Mild: 1-3
  – Moderate: 4-7
  – Severe: 8-13
  – Extreme: 14+
People at risk

• Reliably associated with overweight and obesity in treatment-seeking individuals (35% of US population obese)

• 12-month prevalence among U.S. adult
  – 1.6% females
  – .8% males

• No race/ethnicity differences
People at risk

• Up to 50% of individuals with EDs abuse alcohol or illicit drugs, compared to 9% of the general population.
• 35% of individuals who abuse alcohol or other drugs have EDs, compared to 3% of the general population.
• Severe BED most consistently associated with alcohol use and abuse

Piran & Robinson, 2011
CASA, 2003; Gadalla & Piran, 2007
Prognosis

• Social role adjustment problems
• Impaired health-related quality of life
• Increased medical morbidity and mortality
• Increased health care utilization
Role of stress

• How does stress get under the skin to influence eating patterns and weight?

“We find that pizza softens the blow of bad news.”
Why look at stress?

- Stress reactivity is important in the short term but causes impairment in long term
- People report greater frequency and severity of stress than ever before (APA, 2007)
- Chronic stress is related to psychological, immunological, and health problems such as high blood pressure
- Chronic stress is related to dysregulated eating
When stressed, do you eat?:

A. 

B. 
When stressed, do you eat?:

A. 

B. √
Stress and drive to eat

- Greater vulnerability to stress and increased intake of high sugar high fat food
- Chronic strain and lack of control; finding mirrored in laboratory study
- High sugar foods and the limbic system
  - High dopamine release
Building rapport

• Your eating disorder has been in service of something.

• It is scary to know what to do instead. Let’s look at other ways to cope.

• Let’s look at the eating disorder as separate from you; what would it be telling you right now?

• What have you lost because of your eating disorder?
Management of stress-eating

• Empower patients
• Normalization
  – It makes sense, when this stressed, that you turn to food
• Alternative strategies
  – What are other things that could help?
• Pause, look at emotional vs. physical hunger
  – Slow intake
  – Mindful eating
  – Estimable acts
  – Deep breathing
  – Distraction
Interventions

- Psychotherapy (Vocks, S et al., Int J Eat Disord. 2010 (43(3):205)
- Self-help (Fairburn, C. Overcoming binge eating.)
- Group therapy
- Pharmacotherapy
- Bariatric surgery
Emotional Regulation

• Successful reduction of binge eating long term
  – Develop non-substance methods
  – Change emotional associations
  – Identity shift
To be alert to, in a loved one

• Height and weight outside of healthy range
• Relationship with body and food
• Level of stress
• Triggers for unhealthy eating
• Empower your loved one, externalize the eating disorder
• Normalize
• Help with alternative strategies
Take home points

• Peel the onion to find eating disorder symptoms
  – Anorexia, Bulimia, Binge-eating
• Key differences with DSM-V
  – No longer binary, report current level of severity
  – Only 1 episode required per week (not 2)
  – Binge-eating disorder is now its own entity
• Stress is related to dysregulated eating, weight gain and other health conditions
• There are things you can do, even when not an expert, to help manage eating disorder symptoms
Other resources

- Websites
  - National Eating Disorders Association: www.nationaleatingdisorders.org
  - Academy of Eating Disorders: Aedweb.org

- Books
  - Reclaiming yourself from binge eating: A step-by-step guide to healing. Leora Fulvio
  - The Binge Eating and Compulsive Overeating Workbook. Carolyn Ross
Questions?