

# Binge Eating Disorder: Nutrition Therapy

**Kelly Stellato MS, RD, LDN**

Registered and Licensed Dietitian/Nutritionist

413-582-0100

[kstellato@waldenbehavioralcare.com](mailto:kstellato@waldenbehavioralcare.com)

# Overview



- Statistics
- Words of wisdom . . . .
- Pathways lead to binge eating
- Walden's BED IOP
- BED Nutrition Therapy Specifics
- 6 Steps of Treatment
- Words of wisdom, revisited
- Questions



- ❖ 1 in 5 patients who binge will consume approx. 5,000 calories in a “typical” episode
- ❖ 1 in 10 patients who binge will consume approx. 6,000 calories in a “typical” episode
- ❖ 3,415 calories is the average amount consumed per binge
- ❖ 20-40% of individuals participating in a weight control program are reported to binge
- ❖ The average duration of a binge is 78 minutes
- ❖ Most people who binge also diet
- ❖ BED is the most common ED
- ❖ BED affects 2% of the population
- ❖ It is estimated that 8% of people who are obese also have BED, some estimates are as high as 20%

# Words of wisdom . . . . .



“If you always binge on carbs., don’t eat carbs.”

“Have you tried Overeaters Anonymous?”

“Consider a lap band, you will lose weight and feel better about yourself.”

“Eat 1400 calories a day, that’s all you need. Once you get to 1400 don’t eat anything more.”

“Eat 3 meals and 1 or 2, 200 calories snacks daily.”

“Measure out all of your food according to the list I’m giving you and don’t go over that.”

“Eat more protein, you will be more full and will eat fewer calories overall.”

“The metabolic testing shows your genetic type needs more carbs, so, eat more.”

# Pathways of Binge Eating Disorder



## Pathway 1:

Dieting → Anorexia Nervosa → Binge Eating → Bulimia Nervosa

Oh, wow you're looking great,  
did you lose weight?

# Pathways of Binge Eating Disorder



Pathway 2:

Obesity → Dieting → Binge Eating

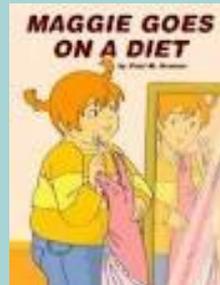
3000 cal → 800 cal → 6000 cal

# Pathways of Binge Eating Disorder



Pathway 3:

Generalized overeating in  
childhood/teen years →  
Dieting → Binge Eating



# Pathways of Binge Eating Disorder



Pathway 4:

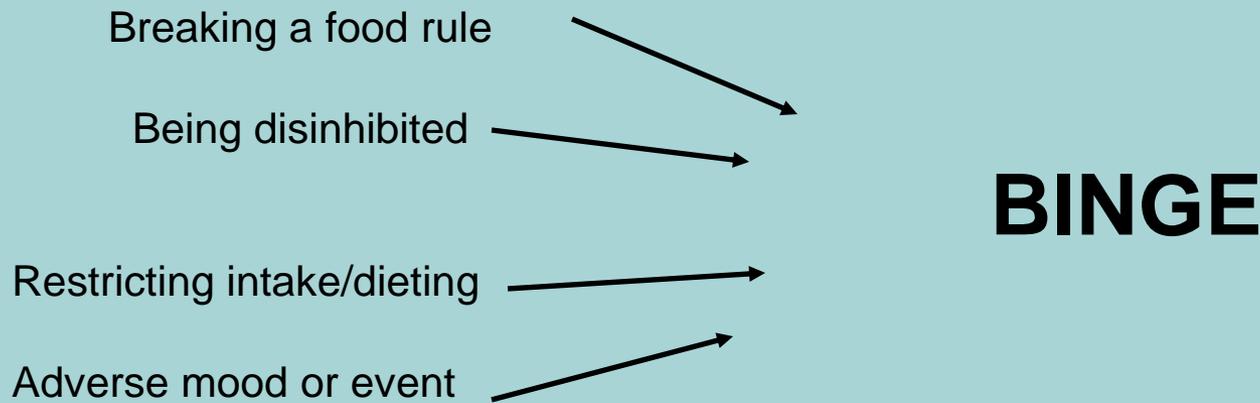
Lack of impulse control with food and in other areas of life.



There is a reason . . .



# The pathways lead to BED. What, specifically leads to a binge?





In February 2011 Walden opened a  
specific, separate IOP for  
individuals diagnosed with BED



- 9 hours per week (3 nights)
- Cognitive Behavioral Therapy
- Dialectical Behavioral Therapy
- Nutrition
- Stress Management
- Weekend planning
- Therapeutic Meal

# Walden's BED IOP



Monday	Tuesday	Thursday
5:30-6:45 CBT	5:30-6:45 Nutrition Therapy	5:30-6:45 CBT
6:45-7:15 Therapeutic Meal and Stress Management	6:45-7:15 Therapeutic Meal and Stress Management	6:45-7:15 Therapeutic Meal and Stress Management
7:15-8:30 DBT	7:15-8:30 CBT	7:15-8:30 Goal Setting, Weekend Planning



## Multidisciplinary effort

- Client
- Therapists
- Dietitian
- All in collaboration with family support system, PCP, Bariatric Specialists, Psychopharmacologist, Endocrinologist, Psychologist, Exercise Physiologist . . . . .



- Assessment
- Begin-self help supplementary tool (Fairburn)
- Begin program  
Meet with R.D.

# Nutrition Therapy; Initial Assessment



- Allergies
- Religious dietary requirements
- Patients desired weight
- Binge foods
- Food rules
- Food recall
- Food shopping and preparing information
- Eating environment
- Physical activity
- Physical activity wishes
- Employment and typical day on the job
- Other medical dx
- Medications
- Pts. Impression of why BED is present

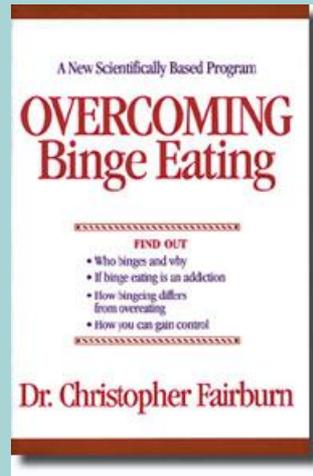
# Role of Nutrition Therapy in IOP



- Initial Assessment
- Weekly Nutrition Group
  - Follows Fairburn’s 6 steps of treatment
- Weekly/Bi-weekly individual nutrition “check-ins”
  - This is not the same as out-patient nutrition counseling
  - Specific to program steps yet individualized



## Steps of treatment . . .



# The Steps of Treatment



## Step 1: Monitor Intake

Time	Food/Drink	Place	*	Comments
10:00	coffee, donut	Car		
12:00	Salad w/fat free dressing	Work, desk		I'm trying to be good.
3:00	2 Chocolates	Work, desk		They were on the receptionists desk
3:30	4 Chocolates	Work, desk		They were good. I wanted more.
5:00	Chips, cookies, diet coke, candy	Home, kitchen	*	Very hungry and tired. Couldn't wait for dinner.
6:30	4 pieces of pizza, onion rings, Caesar salad, coke	Home		Didn't have anything ready for dinner, ordered take out
8:30	Cereal with chocolate pieces			Wanted something sweet but trying to be good.
9:00	Pint of ice cream		*	The cereal didn't do it for me. Wanted ice cream.
9:30	Cookies		*	Wanted more ice cream but there wasn't any



## Meal plan vs. Suggested Meal Guidelines

### Meal Plan

Breakfast: 2 grains, 1 Protein, 1 Fat, 1 Dairy

Snack: 1 Grain, 1 Fat

Lunch: 2 Grains, 3 Protein, 1 Fat, 1 Veggie  
1 Dairy

Snack: 1 Fruit, 1 Protein

Dinner: 2 Grain, 3 Protein, 1 Fat, 2 Veggie

Snack: 1 Dairy

### Meal Guidelines

Eat 5-6 times per day, 3 meals, 2-3 snacks  
no closer than 2 hours together, no longer  
than 4 hours apart.

All meals should have all macro nutrients:  
CHO, protein and a source of fat

# Step 2: Structured Eating



## Who gets a meal plan? Who gets meal guidelines?

### Meal Plan

Breakfast: 2 grains, 1 Protein, 1 Fat, 1 Dairy

Snack: 1 Grain, 1 Fat

Lunch: 2 Grains, 3 Protein, 1 Fat, 1 Veggie  
1 Dairy

Snack: 1 Fruit, 1 Protein

Dinner: 2 Grain, 3 Protein, 1 Fat, 2 Veggie

Snack: 1 Dairy

### Meal Guidelines

Eat 5-6 times per day, 3 meals, 2-3 snacks  
no closer than 2 hours together, no longer  
than 4 hours apart.

All meals should have all macro nutrients:  
CHO, protein and a source of fat

# Step 3: Alternate Activities/Structured Time



Go for a walk

Journal

Scrapbook

Call a friend

Make a card

Write a letter

Look up fun stuff on the internet (YouTube “Cute Kittens”)

Art, make it, look at it, plan it

Plan a vacation or even a day trip to look forward to

Read the newspaper and plan weekend, day trips

Read a book

Get a massage

Knit/Cross stitch

Volunteer



## Binge Triggers

- ❖ 78% being alone
- ❖ 72% unstructured time after going home  
(from school or work)
- ❖ 59% boredom
- ❖ 44% drinking alcohol

# Step 4: Problem Solving



Problem 1: “I always over eat or binge when I go to a restaurant.”

Solution: Avoid eating out in the early stages.

Problem 2: “I cannot have just 1 bite of ice cream.”

Solution: Don’t have access to ice cream in the early stages.

Problem 3: “My hunger is insatiable.”

Solution: Explore hunger vs. appetite vs. craving

Problem 4: “All of my favorite foods are bad for me.”

Solution: Is this really true? Let’s brainstorm ways to incorporate favorite foods and healthful foods.

Problem 5: “I’m too busy in the morning to eat a real breakfast?”

Solution: Are you too busy to put pants on before leaving the house? People make space and time in their life for the things that are truly important. Lets look at your schedule and see what we can do to bump breakfast up a notch or two on your list of priorities.



“The food I usually eat [during a binge] consists of all of my forbidden foods: chocolate, cake, cookies, milk, cereals . . . .food that is easy to eat. Food that doesn’t need any preparations. I never eat these kinds of foods normally because they are so fattening. But when I binge, I can’t get enough of them.”

# Step 5: Dieting



## Types of dieting;

Trying not to eat for long periods of time

Ex. Skipping breakfast, too busy for lunch . . . .

Suggestion: Eat every 2-4 hours

Trying to restrict the overall amount of food you eat

Ex. Trying to be “good” and only have small portions.

Suggestion: Start with healthful portions and balanced meals, have seconds if needed.

Trying to avoid certain types of food

Ex. Don't carbs make people fat?

Suggestion: Break down food rules and ask, is it true?

# Step 5: Dieting



Have client list ALL of their food “rules”.

Discuss them one-by-one.

1. I was told eating after 7 p.m. will cause whatever I eat turn immediately to fat.
2. People always talk about how bad bread is for you, so I try to avoid it.
3. Ice cream is not filling so if I start eating it I need a lot to feel full.
4. Cucumber have no nutrition so I don't eat them.
5. Carrots and corn are loaded with sugar.

# Step 5: Dieting



Re-introduction of binge foods in a methodical way.

<b>Highest risk</b>	<b>Moderate risk</b>	<b>Low risk</b>
Mini Reese's	Ice cream	Cookies
Birthday cake	Candy Bar	Pizza
Fudge	Chicken Nuggets	Salad with fried chicken
Cadbury Eggs	French fries	Mashed potatoes
Bertuccis dinner rolls	Chips	Fruit/Veggies

## Step 6: Relapse Prevention and Other Issues

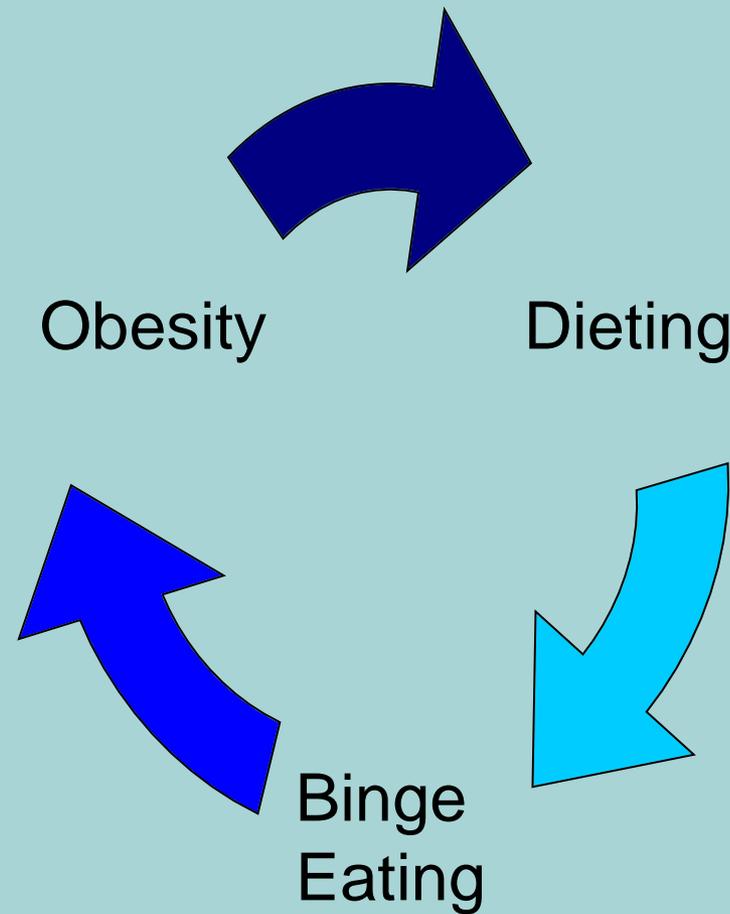


1. Have realistic expectations
2. Distinguish a setback from a relapse
3. Have a plan to deal with set backs
4. Reduce vulnerability
5. Have an out patient team and after care appointments in place

# Step 6: Relapse Prevention and other issues



Other issues: Obesity/BED Cycle



# Obesity

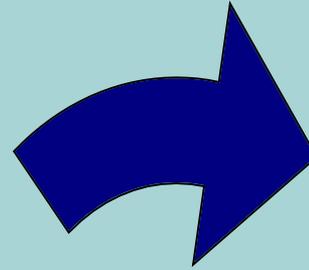


Walden BED IOP is not a weight loss program. However, we set the stage for weight loss behaviors to be more successful after discharged.

(The majority of BED IOP participants have lost a small amount of weight during the program.)

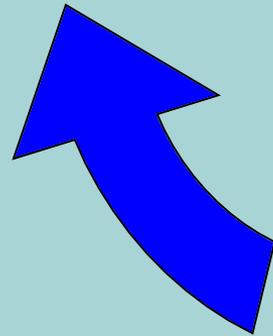
Obesity

Dieting



Walden BED IOP:  
Unhealthy dieting behaviors are addressed.  
Sound, evidence based nutrition therapy has been provided.

Healthful eating has been discussed and practiced.



Binge Eating



Walden BED IOP:  
In Northampton, so far, 100% of participants have decreased frequency of binge eating

# Words of wisdom . . . .revisited



“If you always binge on carbs, don’t eat carbs”

“Have you tried Overeaters Anonymous?”

“Consider a lap band, you will lose weight and feel better about yourself.”

“Eat 1400 calories a day, that’s all you need. Once you get to 1400 don’t eat anything more.”

“Eat 3 meals and 1 or 2, 200 calories snacks daily.”

“Measure out all of your food according to the list I’m giving you and don’t go over that.”

“Eat more protein, you will be more full and will eat fewer calories overall.”

“The metabolic testing shows your genetic type needs more carbs, so, eat more.”

Questions?



Thanks for your time  
and attention.

[kstellato@waldenbehavioralcare.com](mailto:kstellato@waldenbehavioralcare.com)



For more information about  
Walden Behavioral Care and their  
Binge and Night Eating IOP  
contact:

Director, Jennifer Smith LICSW  
[jsmith@waldenbehavioralcare.com](mailto:jsmith@waldenbehavioralcare.com)



- American Psychological Assn. (statistics)
- Cognitive Behavior Therapy and Eating Disorders, Christopher Fairburn, 2008
- Overcoming Binge Eating. C. Fairburn, 1995
- The End of Overeating, David Kessler, 2010
- Eat What You Love, Love What You Eat, Michelle May, 2010
- Food, Eating and Obesity: The Psychological Basis of Appetite and Weight Control, D.J. Mela and P.J. Rodgers, 1998