

Eating Disorders

help guide



This booklet, produced by **Dr. Melissa Rizk**, a specialist in eating disorders, is intended to provide **accessible information on eating disorders** to a wide audience, including **individuals** with eating disorders, their loved ones, and healthcare professionals such as **nutritionists, psychologists, life coaches, and personal trainers**.

If interested, please consider signing up for our **upcoming online workshop**. Led by Dr. Melissa Rizk, this **comprehensive course** will be held **twice a week for a month**, totaling **16 hours** of instruction. To express interest or for more information, please email **melissarizk@hotmail.com**.





DID YOU KNOW?

- ▶ Did you know that if you are **interested** in this help guide, then there's a **chance that you or someone you know** is **suffering** from an **eating disorder** ?
- ▶ Have you ever tried all kinds of diets and still haven't lost weight? Lost weight and gained it all back (and more!) ? If you are **preoccupied with food, weight, and shape and fear gaining weight**, you may be experiencing an eating disorder. Without treatment, an **eating disorder can lead to weight gain**.
- ▶ Did you know that if you can't **say "no" to people** and set proper boundaries, you **can't say no to food** ? Recovery from an eating disorder is possible and can lead to a healthy, intuitive relationship with food. It is **important to seek help and support** in addressing eating disorder behaviors.



THIS VALUABLE HELP GUIDE INCLUDES

I - WHAT IS AN EATING DISORDER ?

II - RISK FACTORS OF AN EATING DISORDER

III - DO I HAVE AN EATING DISORDER ?

IV - WHAT CAN I DO TO RECOVER ?

I. What is an eating disorder ?

To simplify it, if you are **obsessed and constantly worried about your weight, your shape and your food**, then you are at a **high risk of suffering from an eating disorder**.

The most **common** eating disorders are:

- **Anorexia nervosa,**
- **Bulimia nervosa and**
- **Binge eating disorder.**

1. Anorexia Nervosa (AN)

If you suffer from AN, you are usually at a **low weight**. You are **terrified of gaining weight** and you might not have a realistic idea of what you look like (you don't seem to fully realize how thin you are, and hear comments such as "you look sick", "you've lost so much weight, are you okay?"). You are **very scared of food**. And will do everything it takes not to gain weight, mainly **restricting food** as much as possible.

This sense of **food control** gives you a feeling of being in control of your life, and being **special**. And despite the fact you **very hungry**, you **deny hunger**.

2. Bulimia Nervosa (BN)

If you suffer from BN, you are usually at a **normal weight**, but want to lose weight. And, when you are triggered, you can have a **binge eating episode** (you'll eat **large quantities of food**, in a short period of time (up to two hours) and feel like you've **lost food control**).

After this binge episode, you will try to **compensate** for that binge by: restricting food, and/or overexercising, and/or chewing and spitting and/or self-inducing vomiting and/or abusing laxatives, diuretics or enema.

Your **body shape and weight** significantly influence how you **evaluate yourself**.

3. Binge Eating Disorder (BED)

If you suffer from BED, you are also **scared of weight gain**. And when you are triggered, you can have a **binge eating episode**. However, unlike individuals who suffer from BN, you'll **try to compensate** for the extra food eaten during a binge, but **fail to do so**. Which eventually will lead to **weight gain**.

4. When to worry?

It is important to recognize the **warning signs of an eating disorder that is developing or is fully developed.**

Put a question mark on your relationship with food and your body if:

- You are **suddenly** and/or **rapidly losing** or **gaining weight** ;
- As a woman, you've **lost your period**;
- You are **very cold** most of the time;
- You are **very tired** most of the time;
- Your **heart rate is low** (less than 60 beats per minute);
- You complain of **dizziness** and even faint;
- You complain of constipation and/or **abdominal pain**;
- Your skin is **yellow** (especially palms);
- You show signs of **frequent vomiting** (swollen cheeks, irritated knuckles, damaged or very sensitive teeth);
- You **refuse to eat** certain food groups;
- You claim to **dislike foods** previously enjoyed;
- You have a sudden interest in "**healthy eating**";
- You make a list of "**good**" and "**bad**" foods;
- You are constantly or repetitively on a **diet**;
- You **skip meals**;
- You are **uncomfortable eating** around people;
- You **hide food** in strange places;
- You constantly **seek reassurance** about your shape from people

- around you (i.e., asking questions like “have I gained weight?”);
- You **count calories** and/or **weigh your food**;
 - You replace meals with **fluids**;
 - You **avoid situations** and events involving food;
 - You socially withdraw or **isolate** from friends;
 - You avoid previously **enjoyed activities**;
 - You frequently claim you’ve **already eaten** when offered food;
 - You claim to have an **intolerance/allergy** to particular foods;
 - You often wear **baggy clothes**;
 - You continually **deny your hunger**;
 - You have **rigid schedules** and plans for meals (insisting for example that meals must always be at a certain time);
 - You have certain **rituals** before, during and/or after **meals**;
 - You plan, prepare and cook **meals** for others but **do not consume them yourself**;
 - You frequently **research** for food and nutrition facts.

II. Risk factors of an eating disorder ?

Eating disorders do not have a singular cause, but rather are influenced by a **variety of predisposing factors**. **These factors may increase** an individual's risk of developing an eating disorder **at any point in their life**, particularly during **adolescence**. These factors include a history of:

1. A genetic predisposition

You are at **risk of an eating disorder** if you come from a **family** that is more vulnerable to develop **psychiatric disorders**. Up to **80%** of the risk for eating disorders is proven to be **genetic**.

2. The environment and the family

What does that mean?

If your mother has/had **unhealthy body image**; your **parents** constantly **diet**; your **father** comments on women “**having to be thin**”; **Abuse** as a **child** (emotional, verbal, physical and/or sexual); **Neglect** as a child (including emotional neglect and derogation); **Unpredictable family environment** (for example, parents who fight regularly, exposing their kids to conflict).

3. The culture

Is that surprising ? Probably not. We all live in the same era where **diet culture** is pretty much everywhere. Have you never been at the supermarket, or waiting in line to buy popcorn at a movie theater, or at a social event where food, shape, and/or exercising didn't come up? Of course you have. And believe me **you are not alone!**

Diet culture is a multi-billion industry that **robs people** from, not only their **money**, but their time, **health and well-being**. It increases the **risks** of **food-preoccupation, bad body image, weight stigma, fat-phobia**, and of course, **eating disorders**.

Why ? Because unfortunately it becomes an **insecurity**.

But no worries, we can definitely **heal** it in **recovery!**

4. The media

Do not get me started on social media and all of the **misconceptions** about a person's shape, eating patterns, and exercise that are published, by basically, anyone and everyone. The **photo manipulation** (hello filters and photoshop!) and **dieting promotion** have a significantly **negative** impact on your **self-esteem** and **self-worth**.

5. The developmental considerations

Gaining weight during **puberty** (which is, for God's sake, absolutely normal!) and being **fat-teased** and/or **bullied** about your **physical appearance** as a child or adolescent (“look at your sister/cousin, they are thinner than you!”) have been proven to **increase** the **risk** of developing an **eating disorder**.

6. Some personality traits

There are some **personality traits** that some individuals inherit that have a clearer pattern in some people more than others. For example, individuals who are at risk of suffering from an eating disorder are more **sensitive** and **anxious** than other people. They are more likely to be **perfectionists** too.

Okay, does that mean that if you have any of the **predisposing factors** above you would end up **developing an eating disorder** ?
Not necessarily, no. Don't Worry !

However, if you went through a **traumatic period in your life**, then yes, **you are at a higher risk** !

Trauma. What is trauma and what is considered a traumatic period in one's life ?

“Trauma is any negative life event that occurs in a state of relative helplessness” (Neurologist, Dr. Robert Scaer).

So no, trauma is not necessarily a **life-threatening event** (it could be) or a big abusive event. It’s a **period in which you feel helpless**, and consequently, **hopeless** (like changing schools, moving countries and losing someone you love).

If you are at risk of developing an eating disorder, then this **trauma** is what we call a **precipitating event**. It’s a phase in your life in which you feel you are **not in control of what’s happening**.

As a consequence, you will long for a **sense of control** (to decrease your **anxiety**). And eventually, you’ll want to practically control the only things you believe you can: Your **Weight** and Your **Shape**.

And here comes the thought: “I could benefit from losing some weight. **I do need to lose weight. I’m going to go on a diet**”.

A **diet** (in terms of restricting food in quantity and/or quality) is what we consider **THE triggering factor**. This is when an eating disorder is activated in an individual. **Weight, shape, and their control** become the **top priority in a person’s life**. And eventually, their worst enemy.

III. Do I have an eating disorder ?

There are many tools and **questionnaires** to know if you are at high risk of suffering from an eating disorder.

If you are **underweight or at a normal weight**: you can **fill the questionnaire** below, entitled “**Eating Attitudes Test**” (EAT-26):

You can fill this questionnaire online via the link:

▶ <https://drmelissarizk.com/eating-attitudes-test-eat-26/>

If you are at a **normal weight or overweight**: you can **fill the questionnaire** below, entitled “**Bulimic Inventory Test, Edinburgh**” (BITE):

You can fill this questionnaire online via the link:

▶ <https://drmelissarizk.com/bulimic-investigatory-test/>

IV. What can I do to recover ?

A person who is at a **high risk of an eating** disorder will need to **be fully assessed** in order to confirm the diagnosis with a **healthcare professional specialized in eating disorders**.

If the diagnosis is confirmed, then starting the **eating disorder recovery journey, as soon as possible**, is definitely recommended.

Recovery will definitely change your life, once and for all !

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Thank you for reading !