



EAT LOVE LIVE

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BINGE EATING DISORDER

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Learning Objectives

- Understand the diagnostic criteria of Binge Eating Disorder (BED) and aetiology.
 - Understand the Eating Disorder Cycle in relation to Binge Eating Disorder
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Binge Eating Disorder

Definition:

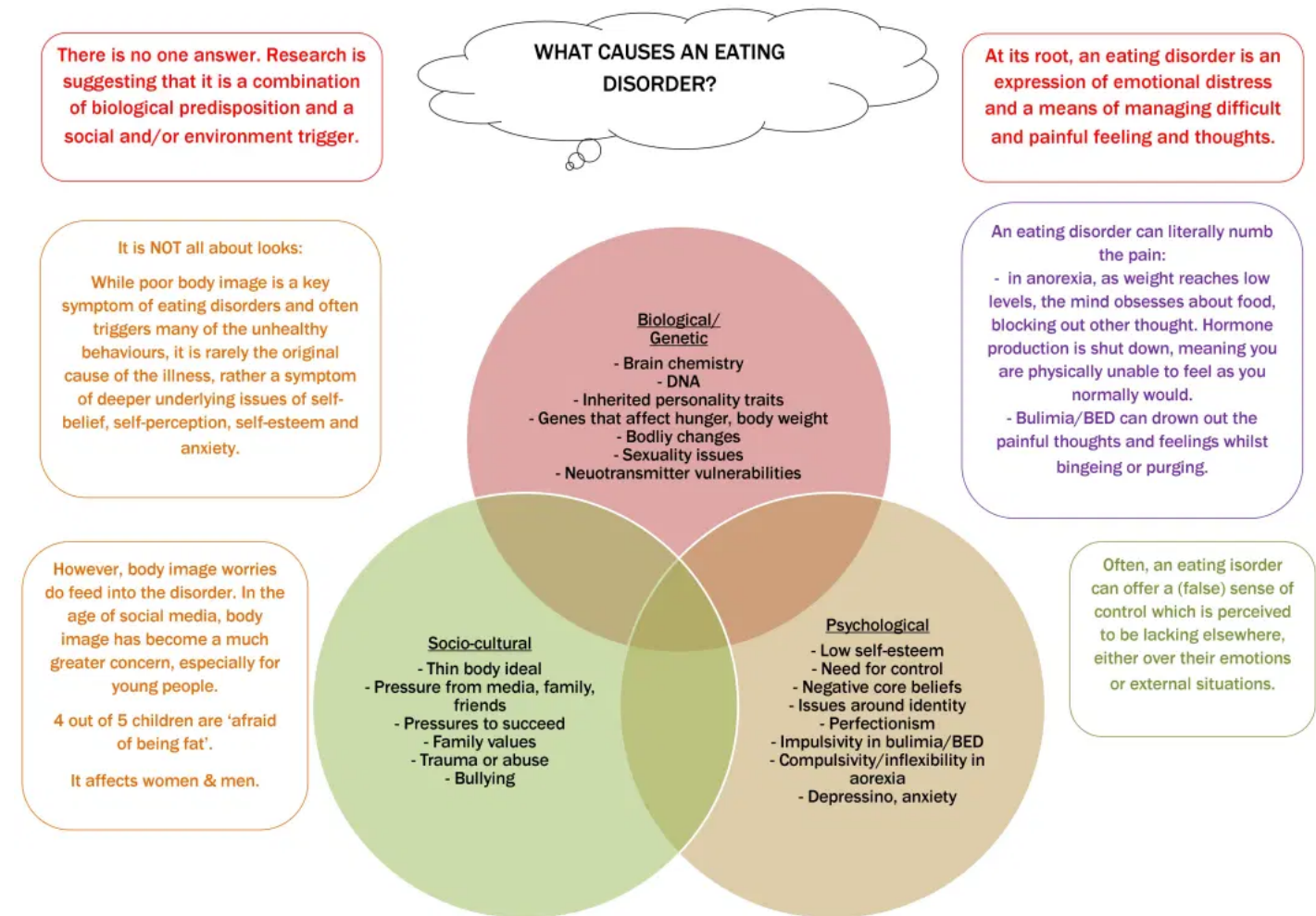
DSM-5 Diagnostic Criteria for Binge Eating Disorder

- Recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:
 - Eating, in a discrete period of time (for example, within any two-hour period), an amount of food that is definitely larger than most people would eat in a similar period of time under similar circumstances
 - A sense of lack of control over eating during the episode (for example, a feeling that one cannot stop eating or control what or how much one is eating)
- The binge-eating episodes are associated with three (or more) of the following:
 - Eating much more rapidly than normal
 - Eating until feeling uncomfortably full
 - Eating large amounts of food when not feeling physically hungry
 - Eating alone because of feeling embarrassed by how much one is eating
 - Feeling disgusted with oneself, depressed, or very guilty afterwards
- Marked distress regarding binge eating is present.
- The binge eating occurs, on average, at least once a week for three months.
- The binge eating is not associated with the recurrent use of inappropriate compensatory behavior (for example, purging) and does not occur exclusively during the course of anorexia nervosa, bulimia nervosa, or avoidant/restrictive food intake disorder.
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It is extremely important to note that weight or appearance is not part of the diagnostic criteria for binge eating disorder.

Causes of Eating Disorders

Collier and Treasure (2004)



<https://talkingsds.co.uk/2019/02/27/eating-disorder-awareness-week-2019/>

Diagnosis

- GP
 - Mental Health Practitioner
 - EDE-Q: <https://insideoutinstitute.org.au/assessment?started=true>
 - Binge eating disorders screener-7: <https://insideoutinstitute.org.au/assets/binge%20eating%20disorder%20screener%20beds-7.pdf>
 - Binge eating scale
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Prevalence In Australia

Eating disorders and disordered eating together are estimated to affect over 16% of the Australian population.

Anorexia nervosa and bulimia nervosa each occur in below 1% of the general population.

Binge eating disorders (BED) and other specified feeding or eating disorders (OSFED) are the most common eating disorders, affecting **approximately 6%** and 5%, respectively.

BED is the most common eating disorder in males.

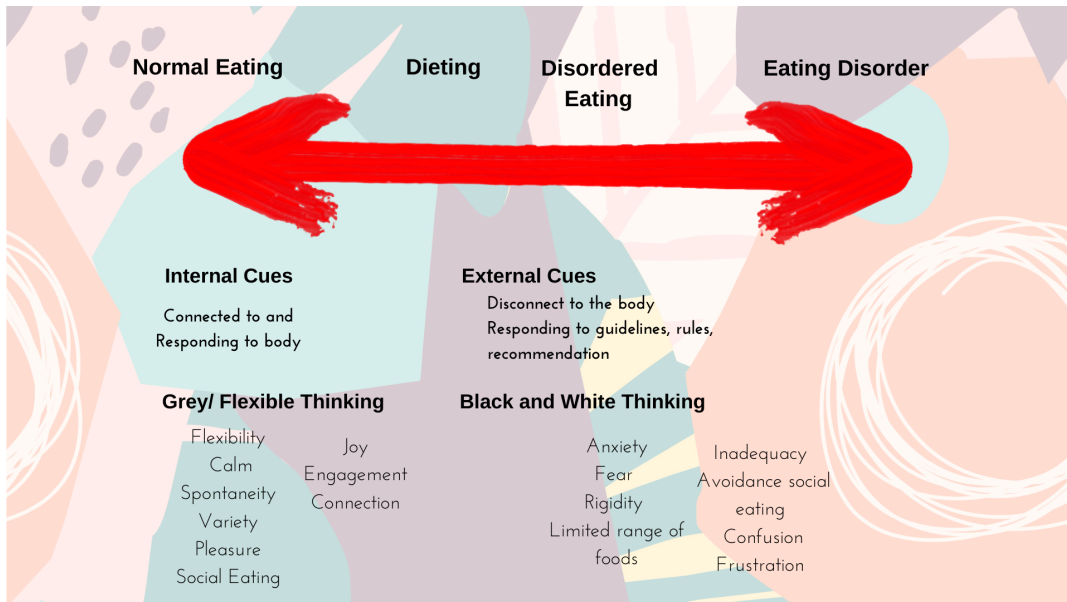
BED is under recognised and undertreated.

4 out of 5 adults with a lifetime prevalence of BED have at least 1 co morbid psychiatric condition. Most commonly mood, anxiety and substance abuse.

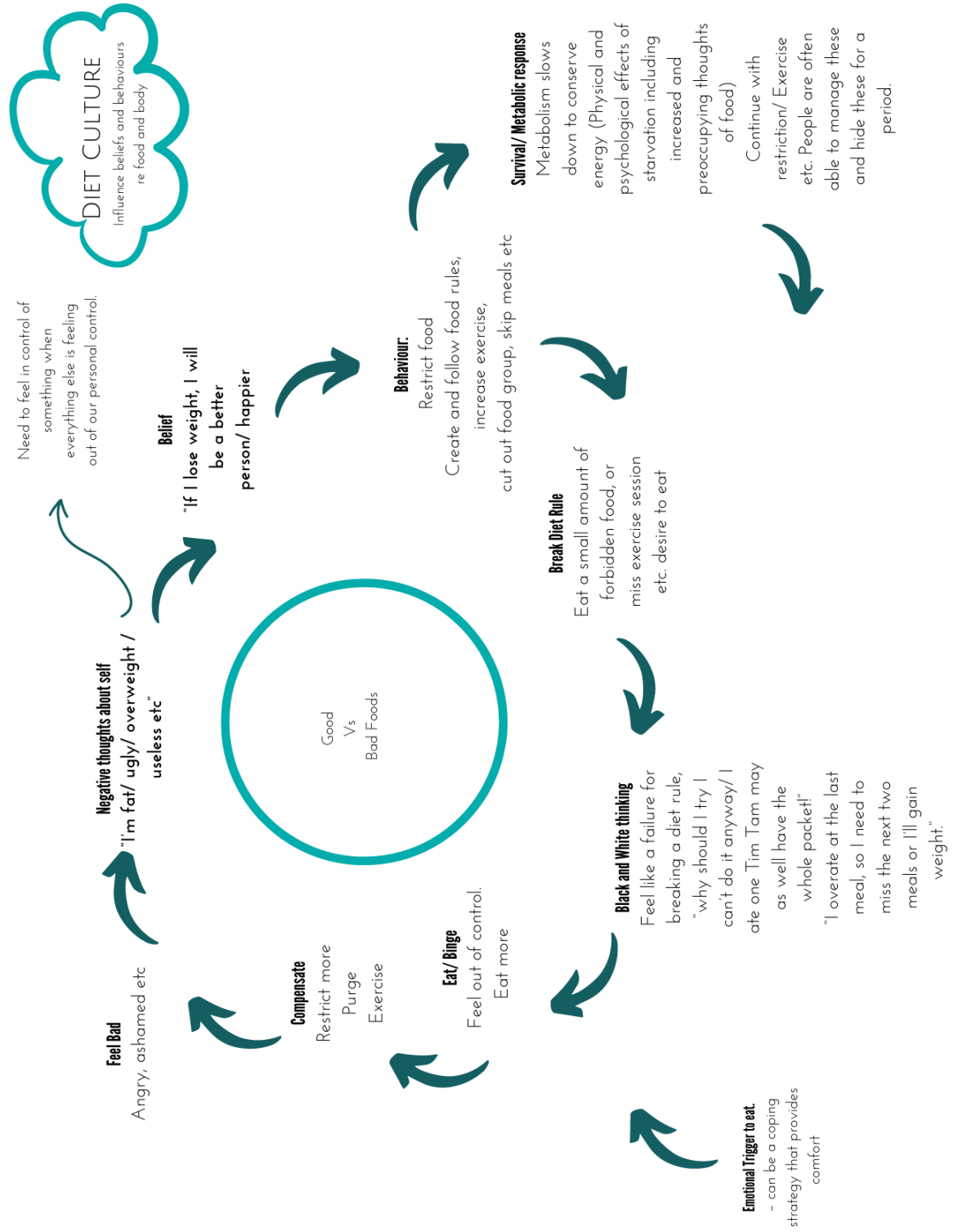
<https://www.nedc.com.au/>

Guerdjikvoa et al (2019)

Conceptualizing an Eating Disorder



THE EATING DISORDER CYCLE



WAS IT A BINGE ?



JULIE VINEY

Diet Culture

Ultimately, we [found](#) that diet culture refers to a set of ever-changing myths about food and bodies, promoting the idea that one's body weight automatically equals health and that foods can be simplistically categorised as 'good' and 'bad'. It also comprises a moral hierarchy of bodies that preferences the thin-ideal while masking a fear of fat.

These cultural ideas are driven by broad systems and structures of power, such as patriarchal ideals about women's bodies, racialised ideals around thinness and health, and capitalist industries that profit from body dissatisfaction and confusion around food and eating. (Butterfly foundation)

[Read the Full article here](#)

Anti-fat Bias

What is weight stigma?

Weight stigma and discrimination refer to the negative stereotypes about, attitudes towards and the resulting negative behaviours and treatment of individuals who are affected by overweight or obesity.¹ At the core of weight stigma are beliefs that the causes of obesity are completely under an individual's control.² As one of the few remaining socially acceptable forms of stigmatisation, weight stigma is pervasive. Individuals living with obesity experience weight

stigma across many social contexts, including at home, schools and education centres, workplaces, social media, and in healthcare.

Weight stigma attitudes develop due to consistent and continuous exposure to stigmatising, stereotypical and often disrespectful framing and portrayal of people living with obesity in the media.³ The simplistic framing and rhetoric in obesity prevention campaigns and policies that adopt approaches that focus solely on personal responsibility contribute to weight stigma.^{4,5} Such policies also implicitly attribute the responsibility for broader societal impacts associated with obesity to people living with obesity.⁶ Community interventions similarly reflect the 'personal responsibility' narrative and largely continue to focus on the 'eat less, move more' mantra in the pursuit of weight loss.

Individuals living with obesity often internalise weight stigma, directing these stigmatising attitudes and beliefs towards themselves, devaluing themselves and their role in society.⁷ In this perspective article, we: a) outline the challenges to reducing weight stigma and b) provide recommendations for action for public health researchers and practitioners, as well as our broader communities, to begin the crucial task of reducing weight stigma in our society.

[Read Full article here](#)

Weight stigma in Australia: a public health call to action

Citation: Lawrence BJ, de la Piedad Garcia X, Kite J, Hill B, Cooper K, Flint SW, Dixon JB. Weight stigma in Australia: a public health call to action. Public Health Res Pract. 2022;32(3):e3232224.

<https://www.self.com/story/fat-activist-fatphobia>

Points to Note

- Binge Eating Disorder is a restrictive Eating Disorder
- Weight Loss is not an appropriate Treatment goal
- You can not recovery from an Eating Disorder and be on a diet

BED is under recognised and undertreated.

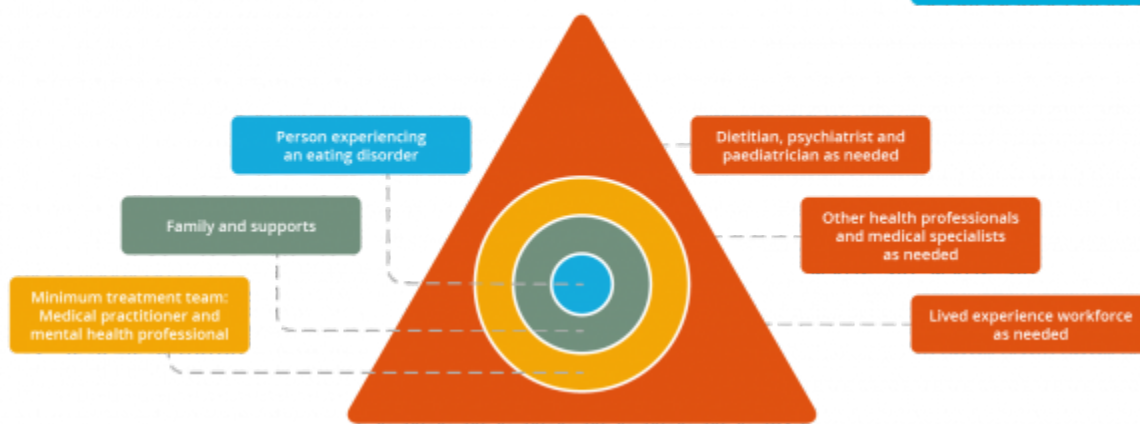
The binge eating behaviour is often overlooked and treatment commonly focused on weight and complications rather than addressing the core eating psychopathology.

Focusing on weight can perpetuate the cycle of binge eating.

Support Team

- Gp
- Psychologist/ mental health worker
- Psychiatrist
- Dietitian

The eating disorder care team



(NEDC, 2022)

Where to find clinicians:

Try Local ED organizations for list of specialist clinicians - [EDV](#), [Butterfly](#), [NEDC](#)

connect.ed PROFESSIONALS CREDENTIALLED
IN EATING DISORDERS

<https://connected.anzaed.org.au/treatmentproviders/>

Treatment Options

Public

- Inpatient
- Day program
- Out patients
- Area and child mental health services
- Community health services

Private

- Hospital
 - Inpatients
 - Day program
- Private Clinicians

Additional Support

- Eating Disorder organizations
- Recovery Coaches

[More Information Resources](#) -

- Eating Disorder Help organizations
- Books and Audio books
- Podcasts
- Social Media

LOW COST RESOURCES FOR EATING DISORDER SUPPORT VICTORIA

We have put together a list of the leading organisations providing free or low cost support, resources, education and treatment facilities available in Victoria.

This is in hopes to ease the process of navigating the wide array of resources and information out there about eating disorders, recovery and treatment available.

[Low Cost Eating Disorder Support Options - Victoria 2022](#)

MEDICARE SUBSIDISED EATING DISORDER PLAN EXPLAINED

A printable explanation of Medicare Eating disorder care plans to help you understand how to access an initial and subsequent plan. A great resource to print and take to the GP with you.

[Printable PDF Medicare EDP explained](#)

SUPPORTING CHILDREN & TEENAGERS RESOURCES

A comprehensive list of books, websites, podcasts, and online courses for parents, teachers and health professionals to support children and teenagers to develop a positive relationship with food and body.

[Printable PDF-Children and Teenagers resources](#)

GENDER DIVERSITY AND EATING DISORDERS

A List of support groups, websites and articles.

[Printable PDF-Gender Diversity and Eating disorders](#)

RESOURCES FOR SUPPORTING AUTISM, ADHD & EATING DISORDERS

A comprehensive list of websites, videos, articles, studies and social media resources.

[Printable PDF-Autism, ADHD and ED](#)

NO DIET AND BODY TALK PRINTABLE

[No diet and Body image A4 Printable](#)

Supporting loved ones

- Get support for yourself (edfa)
- Learn about eating disorders (edfa)
- Listen, Believe and validate their experience
 - "that must be difficult..."
 - "i'm hearing that your feeling..... am i understanding right?"
 - "It is understandable you feel that way"
- Ask them what they need or how they would like support to look from you.
- Its ok if you cant do it - talk through a compromise of what you can.
- Support them to navigate the system to get what they need.

<https://www.nationaleatingdisorders.org/learn/help/caregivers/support>

<https://www.eatingrecoverycenter.com/blog/recovery/compulsive-overeating-helping-someone-you-love>

<https://butterfly.org.au/get-support/helpline/>

<https://eatingdisorderscarerhelpkit.com.au/your-role-as-carer/>

<https://edfa.org.au/>

<https://www.betterhealth.vic.gov.au/health/healthyliving/eating-disorders-support-for-families>

<https://au.reachout.com/articles/support-services-for-eating-disorders>

https://ceed.org.au/wp-content/uploads/2020/06/CEED_Carer-Support-Resources_Jun.2020_FINAL.pdf

There is no one way to support someone what works
for one may not feel helpful or another

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RAVES Shane Jeffery

<https://eatingdisorderscarerhelpkit.com.au/wp-content/uploads/2019/10/RAVES-Model.pdf>
https://ceed.org.au/wp-content/uploads/2020/04/CEED_Handout_RAVES_Jeffrey.pdf

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<https://insideoutinstitute.org.au/assets/the-diet-cycle.pdf>

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