

Addicted to eating

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Anonymous

Our author discusses how seeing her weight problems as a result of addiction helped her to learn new ways to manage

I have always struggled with my weight, even as a child. When I was aged 9 my parents started to try to help by encouraging me to go on diets, and I tried to eat less but couldn't do it. Throughout my life, the feeling of needing to eat something was overwhelming and all consuming. I would be physically restless and mentally obsessed until I ate and satisfied the craving. When I had a full packet of biscuits, I felt safe. When the packet was empty it left me feeling remorse, guilt, and hopelessness. I would try to resist the craving, but my mind would tell me I had no option. It was an overpowering feeling—I had to eat. I tried various diets and therapies to lose weight, including cognitive behavioural therapy, hypnosis, and psychotherapy, but nothing worked.

More than willpower

Many health professionals have advised me to move more and eat less. I have been told this more times than I care to recall. As a serial dieter there was little I didn't know about calories, and the suggestion that I didn't know what to do was humiliating. Having someone acknowledge how difficult it was might have stopped the feeling of disapproval I always felt. I thought I knew so much about nutrition and what I ought to be eating, but putting any of it into practice was more challenging. I felt ashamed and baffled. Why couldn't I remedy the situation with the knowledge and willpower I knew I had?

Attending health appointments meant fear and shame. Nobody felt worse about my weight problem than me. I worried that the health professionals would become impatient with me for not responding to the treatments and support being offered, and I often felt defensive. I wanted them to recognise that despite my best efforts the treatments were not working for me. Each time I went to see them I hoped there would be a different approach.

“Sober” from overeating

I heard about Overeaters Anonymous when I was 37 from a health professional who I was seeing about my weight. Overeaters Anonymous is a 12-step programme where eating disorders are viewed in the same way as any other

addiction, and the approach is to address this as a physical, emotional, and spiritual issue. Members are fellow addicts—the support is purely from those who have had problems with food and recovered, one day at a time. Thinking about my struggles with food as an addiction helped me to understand my compulsive eating urges. I discovered that certain foods set me up for a cycle of physical and mental obsession, so for these foods, moderation was not the key—the only way to avoid this cycle was to not eat these foods. The programme also used language similar to that when dealing with other addictions, including the term sobriety. This helped me picture the clear headedness that was possible from the utter chaos I was experiencing around my eating.

I have now been “sober” for over 11 years and maintained a weight loss of 8 stone. As with any addiction, however, I know it will always be there. It has taken a lot of hard work, but Overeaters Anonymous has enabled me to manage my food obsession by working the 12 steps; not just “white knuckling” through it. The compulsion I faced daily has gone and I no longer have to resist temptation at every turn. My obsession has been lifted. For now, I am at peace around food.

What you need to know

- Problems around weight management are not always a lack of willpower or control—asking about patients’ specific challenges could help provide tailored support
- Framing compulsive overeating as an addiction might help patients to find new ways of managing their weight
- For some patients who are struggling to manage their weight through standard approaches, suggesting the avoidance of some foods, rather than moderation, may be more effective

Education into practice

- What language do you use when talking to patients about their weight? Is this different to how you would discuss an addiction?
- What support are you aware of locally that you can offer patients who are struggling to lose weight using standard approaches or services?
- How could you ensure that patients feel supported and able to discuss their weight concerns with you?