



news Nutrition

PROVIDING YOU WITH WHOLESOME NUTRITION

Happy Autumn 2013 from Whole Nutrition News!

Learning to balance food and life can seem quite challenging. First, you need to observe your relationship with food. Are you eating to numb your stress? Or perhaps, not eating for fear of weight gain, loss of control or feeling anxious? In our over stimulating environments, feeding and eating tend to get unintentionally mixed with the emotional stressors of daily living.

Being diagnosed with diabetes, cancer, high cholesterol or any medical condition that is affected by diet puts one at risk for “disordered” eating or even an eating disorder.

In this issue, Laura Cipullo Whole Nutrition Services’ registered dietitian Holly Warfel sheds direct light on the basics of diabulmia. Again, one must first recognize that his/her relationship with food is inconsistent with self care. And then, with love and support, one must obtain assistance in actually creating a positive relationship with eating. Of course, this is always easier said than done. Creating such a relationship takes time, patience and even practice. In addition to nutrition counseling, there are many other opportunities that may help. Laura Cipullo and Whole Nutrition News share the concept of Mindful Meal Support Therapy (MMST) as a way to get “exposure therapy” and put real nutrition education into practice. We hope this information enlightens you and your family about possible struggles around feeding and eating—and this less known form of treatment.

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Just what is DIABULIMIA?

BY HOLLY WARFEL, MS, RD, CDN

You may have heard this word or seen an article talking about it, but have you ever thought about what diabulmia actually is? This term is being used more and more in clinical practice to describe individuals with Type 1 diabetes who minimize or completely skip insulin doses in an effort to lose weight. While not recognized as an official “eating disorder” in the DSM, this practice is often considered a type of bulimia. In someone who has diabulmia, the compensatory behavior employed is omitting insulin doses to try to lose weight—and often includes binge eating. The repercussions from these activities can be extremely dangerous as well as highly damaging—often resulting in multiple hospitalizations

and irreversible long term effects.

The body of an individual with Type 1 diabetes does not produce insulin. The individual is required to take insulin shots daily in order to regulate blood sugar. Insulin is a hormone that the body uses to aid in the breakdown of sugar or glucose for energy. When an individual is diagnosed with diabetes, it can be a very difficult situation to handle. When children and adolescents have diabetes, they may feel isolated, especially given that they are frequently instructed to stay away from sweets because sugary treats and other carbohydrates can make their blood sugar rise. Children may be told not to eat certain foods—such as birthday cake at a friend’s party or ice cream on a hot summer day—which can leave them feeling lonely, wanting more of the sweeter foods, or possibly wanting to “rebel” against their diabetes.

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Just what is DIABULIMIA?

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These can be the times and circumstances when feelings of loss of control over their bodies occur and could result in eating disorders such as diabulimia.

Fortunately, research on the management of diabetes has been changing through the years. Now, healthcare providers are encouraged to teach people with diabetes to eat *all* foods moderately and to take insulin to balance out the amount of carbohydrates they consume within a meal. People with diabetes, however, may also struggle with feelings of depression and anxiety or body image issues, along with having to manage this lifelong disease. Sometimes, this can result in seeking out unhealthy coping skills such as weight loss. When someone with Type 1 diabetes does not take their insulin, sugar from the food eaten is unable to get into the cells and be used for energy. Instead, the body is forced to break down fat and protein stores in order to get the energy that it needs. The “purging” is explained as the result of glucose and calories that are lost during urination, in addition to the breakdown of muscle and fat stores. Often, someone struggling with diabulimia may experience the complications of diabetes early on; these include extreme fatigue, thirst, and headaches as well as retinopathy, blindness, kidney failure, or neuropathy.

Signs to watch out for if you or someone you know might be struggling with diabulimia:

- Poor body image or obsession over weight, appearance, etc.
- Binge eating, night eating, food hoarding—sometimes in cycles of restricting and then binging.
- Consistently high HbA1c—blood test that shows the average amount of sugar in one’s blood over 3 months.

- Consistently cancelling diabetes care team appointments.
- Signs of depression or anxiety.
- Blood sugar logs that don’t match up with the HbA1c test. Many people struggling with diabulimia will keep blood sugar logs that appear as if they’re in control of the diabetes, as they could feel shamed or guilty for their behavior.

So, what do you do...if you or someone you know is struggling with diabulimia?

- Seek counseling from a professional multidisciplinary team familiar with eating disorders and diabetes.
- Meet with a dietitian to learn how to eat all foods moderately and manage the diabetes in a healthy, mindful way.
- Find support groups and ways to bond with others struggling with diabulimia. Try the Juvenile Diabetes Research Foundation online support team at <http://jdrf.org/get-support/online-diabetes-support-team/> or the Dlife website: <http://diabetescommunity.dlife.com/>
- Look into Diabetes Camps for Adolescents—a great way to have teens bond with others living with diabetes. Check out the Clara Barton Camp in Massachusetts or view the list at <http://www.diabetes.org/living-with-diabetes/parents-and-kids/ada-camps/camps/2013/> for other recommended camps.

And please keep in mind that diabulimia can be a very serious illness that is best treated as soon as possible...but it is never too late to get help. Learning how to best deal with managing diabetes and/or eating disorders can take time. But it is well worth it. Individuals who are struggling with nutritional problems really can learn to lead healthy—and happy—lives!

5 Candies That Won't Spook Your Blood Sugar Or Send Your Children Into A Crazy Tizzy!!

Written by Laura Cipullo, RD, CDE

1. Annie's Organic Orchard Strawberry Fruit Bites

One pack of these fun fruit snacks are a great option for your trick or treating tots!

2. YummyEarth Organic Lollipops

If you want quantity, you can lick three of these pops without worrying about your blood sugar.

3. Tootsie Pop

Want something to crunch and chew?? Choose a tootsie pop.

4. Lindt Chocolate

Fix your chocolate craving with 4 squares of Lindt's 85% cocoa bar.

5. Hershey's Chocolate Bar with Almonds

Yes, you can eat a bar of chocolate with almonds. The best option is to eat half of this and save the rest for another day.



MINDFUL MEAL SUPPORT THERAPY

Putting words into action and food into our body.

BY LAURA CIPULLO, RD, CDE, CEDRD

Putting words into action is always easier said than done. That is why many dietitians like Holly Warfel, MS, RD; Justine Roth, MS, RD; and I eat along with our clients. Sometimes RDs even offer meal support therapy in which multiple clients eat together with their RD; they learn how to change their relationships with food and how to eat all foods while getting face-to-face guidance and encouragement ultimately leading to empowerment. For the past ten years, I personally have been fortunate to eat with my clients in this wonderfully intimate group setting. During the past three years, my team and I have taken the process a step further to include “mindfulness.” So we now offer what we call **Mindful Meal Support Therapy (MMST)** for individuals wanting to not only improve their relationships with eating but also to enable them to learn how to eat all foods.

This is the real deal! Clients must learn how to eat all foods ranging from salad to pasta to cake as well as one course, or even three-course meals. Although this exposure therapy can be emotionally challenging

for individuals, it does give them valuable opportunities to reap great rewards.

Signs and Symptoms that can be addressed at meal support therapy:

- Not eating
- Cutting food into small pieces
- Hiding food in napkins/smearing food under the table/hiding food in pockets/dropping food on the floor, etc
- Mixing foods to make unusual concoctions
- Stalling; trying to finish last
- Eating very quickly
- Eating very small mouthfuls
- Eating very large mouthfuls
- Eating foods without utensils
- Eating food with utensils which are inappropriate for the meal
- Eating each food group before moving to the next
- Eating easiest food first and saving the most difficult foods for last
- Going to the bathroom during or immediately after a meal to purge or to discard hidden food.

- Purging after a meal
- Exercising after a meal¹

What and Why of MMST:

At our Mindful Support Therapy, a group of woman and/or men meet their RD at a restaurant or some other given place. Everyone checks in with each other. One by one the clients go around the table sharing their past week's nutrition events, their present mood, feelings and thoughts. Each individual then sets a goal for the meal he/she is about to order. The goal could be to eat 90% of the meal for one person (usually someone struggling with eating adequate amounts of food for fear of weight gain and loss of control around food) while another person may set out to order a food such as pasta that he/she typically has difficulty eating mindfully and in a non-binge like manner. Everybody then chooses their meal and the RD helps to hold the clients accountable to their goals

while also offering support, reflection, role modeling and nutrition education as needed. The nutrition education helps someone work through irrational thoughts and/or fears such as “If I eat pasta, I’ll never stop!” or “Carbs go straight to my thighs.” or “Perhaps I’ll get diabetes from eating pasta.” The RD specializing in eating disorders has the knowledge and experience to teach someone how to eat all foods moderately. And they do!

The RD leads a mindful exercise or breath to create a space between the day's stress and the meal. The purpose of mindfulness—also called centering—before and after meals is to allow the individual to

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TESTIMONIAL:

The benefits of meal support therapy...

“Whether during individual session or at meal group, she has guided me nutritionally, helping me to see how food can be both nourishing and enjoyable. She is able to distinguish between the eating disorder and my own personal beliefs, ready to challenge one step further and to consider commonly disregarded components, such as the role of social eating. The goals and plans are always realistic, always jointly decided, and with her vast and up-to-date knowledge of food and nutrition, she is able to provide appropriate and accurate feedback.” —Megan

Mindful Meal Support Therapy

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check in with him or herself and to eat the meal for fuel and pleasure rather than eat the meal without physical and psychological recognition or even satisfaction.

Does it work?

In addition to anecdotal experience, literature, though limited, does support the favorable outcome of mindful eating interventions not only with eating disorders, but with clients diagnosed with diabetes.

For binge eating:

For instance, results from the MEAL study showed statistically significant increases in measures of mindfulness and cognitive restraint around eating as well as statistically significant decreases in weight, eating disinhibition, binge eating, depression, perceived stress, physical symptoms, negative affect, and C-reactive protein². “In the MB-EAT (Mindfulness-Based Eating Awareness Training) program, mindfulness exercises help participants with binge eating disorders and weight issues to become aware of hunger and satiety cues. Ideally, once clients can identify hunger fullness cues, you can say they are successfully mindful³.”

For anorexia:

The use of exposure-based protocols has the potential to favor the development of new non-fear learning⁴. “The goal of meal support therapy is to normalize the eating behavior of patients with eating disorders and produce weight gain for those with Anorexia Nervosa. The incidence of nasogastric feeding was substantially reduced after the implementation of meal support therapy⁵.”

For diabetes:

“Training in mindful eating and diabetes self-management facilitates improvement in dietary intake, modest weight loss, and glycemic control. The availability of effective treatments gives patients with diabetes choices in meeting their self-care needs.”⁶

“A 9-week mindfulness-based eating program had less insulin resistance after meals than subjects who received conventional weight-loss education. This result was attributed to the relaxation response, a byproduct of mindfulness.”ⁱⁱⁱ

Last but not least here is a quote a mom recently emailed me about her daughter who attended our meal group about 8 years ago: “She told me how much you and your sessions meant to her—and apparently, it was the group sessions that helped her make decisions about her life that she has stuck with—very much for the better. She’s such a healthy, wonderful girl who now knows how to take care of herself and get help when she needs it.” —Louise E., mom of a former client.

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3. Horowitz, Sala. “Treating Eating Disorders Mindfully.” *Alternative and Complementary Therapies* 15.1 (2009): 11-16.
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Fresh Facts about Laura Cipullo Whole Nutrition Services

Laura Cipullo Whole Nutrition Services’ registered dietitians’ Holly Warfel and Laura Cipullo are synergistically evolving within the field of food and nutrition. In March of 2013, Laura was elected the New York Chapter president of the International Association of Eating Disorder Professionals. This not-for-profit organization is dedicated to providing education and networking opportunities for professionals working with eating disorders. Laura also published her first book in collaboration with *Prevention Magazine* from Rodale Press. Titled “The Diabetes Comfort Food Diet Cookbook,” this lifestyle book teaches you how to eat all foods every day—throughout the day. Laura teaches readers that diets should be understood as daily nourishment—rather than short term fads—and dietary change must be geared to the readers’ levels of readiness.

In an effort to prevent eating disorders, Laura has self-published a program called **Healthy Habits** that is now available on amazon.com. The program workbook contains eight essential nutrition lessons every parent and educator needs to know. It teaches readers how to implement nutrition education in conjunction with mindful eating.

Holly Warfel, MS, RD, joined the Laura Cipullo Whole Nutrition Services practice one year ago to help Laura lead Mindful Meal Support Therapy groups as well as to personally counsel individual clients. Holly is currently working on solidifying her expertise in diabetes by pursuing her certification as a diabetes educator.

Please remember to stay nourished with Laura’s health guidance by following her weekly blog “Eating and Living Moderately.” Also, learn how to cultivate your children’s positive relationships with feeding, eating and body image by reading her personal blog “Mom Dishes It Out” each week. Stay hydrated and connected with us on Facebook at “Laura Cipullo Whole Nutrition Services.” 2014 will be another active year of personal growth and wholesome nourishment for both Laura and her supporters! And don’t forget that FB activity and comments get rewarded with freebies and giveaways. Just check in every Monday to be eligible for these healthy and fun free gifts.

Healthy and Happy Wishes to all!

Laura Cipullo Whole Nutrition Services • 80 University Place, Suite 2A, New York, NY 10003

Phone: 917-572-7137 • E-mail: CipulloRD@aol.com • Web Site: LauraCipulloLLC.com



Laura Cipullo Whole Nutrition Services and Mom Dishes It Out



@MomDishesItOut