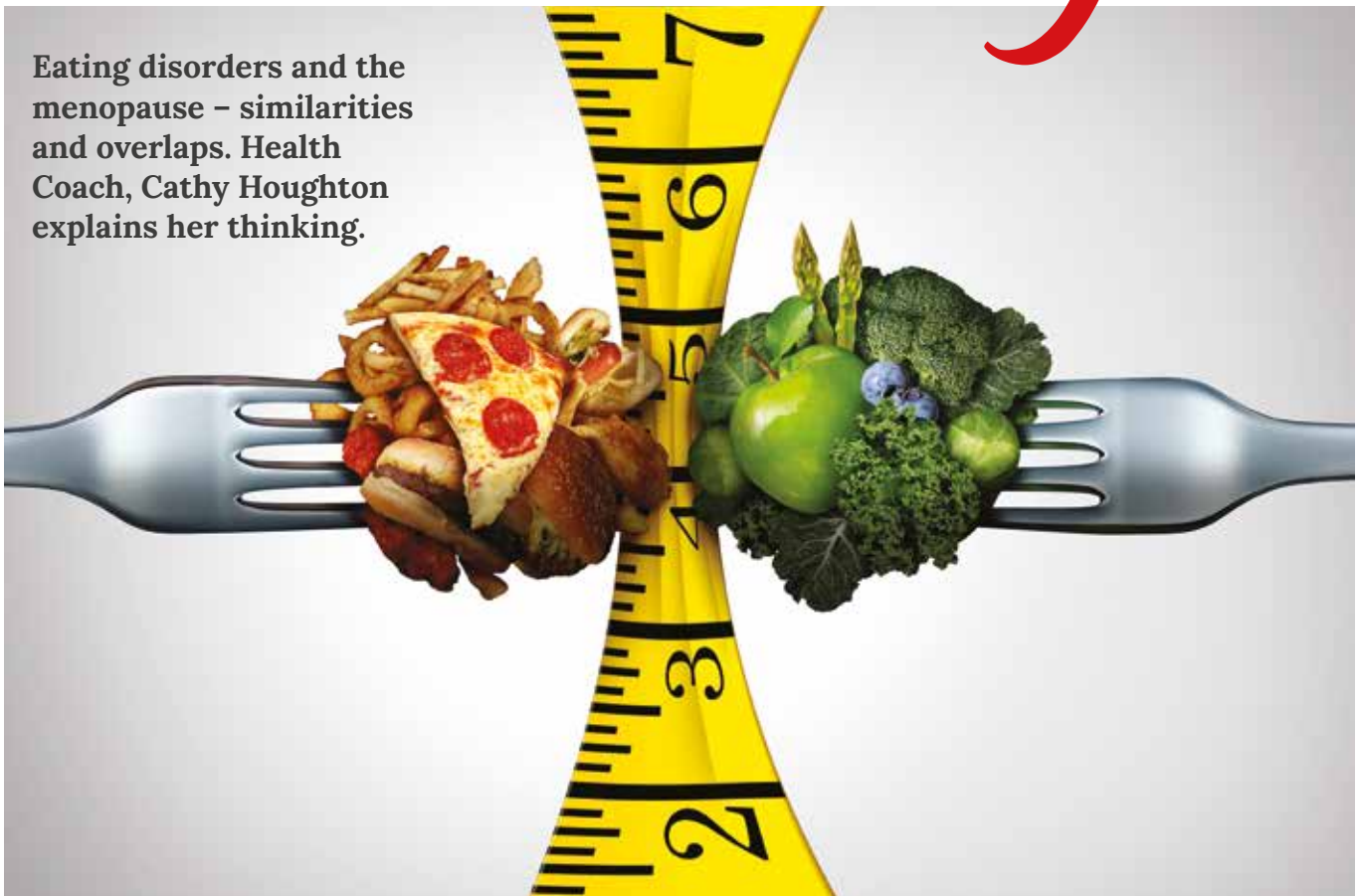


When our relationship with food can change

Eating disorders and the menopause – similarities and overlaps. Health Coach, Cathy Houghton explains her thinking.



Eating disorders are often seen as a problem of girls and younger women. It may then surprise you to know the most common profile of diagnosed eating disorder sufferers are women in their 30s or 40s with Binge Eating Disorder. ⁱ

In 2015, BEAT, the UK's largest Eating Disorder Charity, stated 15% of calls to the helpline were from over 40s. Across all eating disorders, 3 out of 4 sufferers are women.

In 2017 UK researchers found 15% of midlife women had met the criteria for an eating disorder, with 3.6% having symptoms in the last 12 months. ⁱⁱ That is about 1.2m women.

Similarly, US research indicated in 2012 over 13% of women aged 50+ reported eating disorder symptoms,

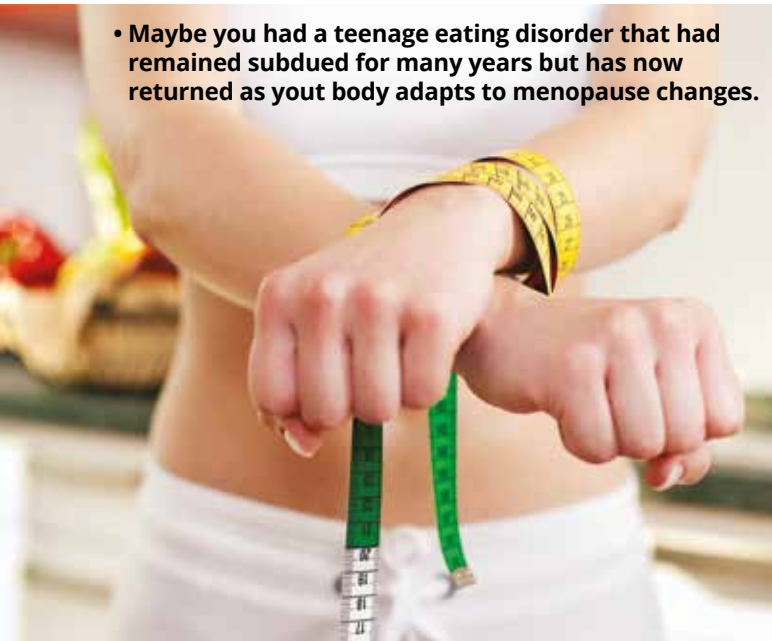
which at that time was higher than the rate of breast cancer. ⁱⁱⁱ

These are extraordinary numbers. Even more worrying is that receiving a formal diagnosis is just the tip of the iceberg. Older women are much less likely to seek help and address the underlying issues causing the problem. ^{iv} They may perhaps believe 'they should know better', are too embarrassed or too ashamed. So, they suffer quietly.



Perhaps this is you? Perhaps you know, on some level, that your eating is not quite right? Is it causing you distress, worry, anxiety? Do you live in fear of putting on weight, yet continue to feel anxious about what the illness is doing to your body and mind? Do you feel you have a half secret life? →

• **Maybe you had a teenage eating disorder that had remained subdued for many years but has now returned as your body adapts to menopause changes.**



It may be that you have had these problems for decades and feel it's too late to get help now. Perhaps your eating was OK until the peri-menopause arrived, and something seems to have gone awry. Or maybe you had a teenage eating disorder that had remained subdued for many years but has now returned as your body adapts to menopausal changes.

Or maybe you don't know that those niggling symptoms you are experiencing are not simply due to the peri-menopause? If so, I hope this article helps you.

I believe that the peri menopause can significantly contribute to the start, or return, of an eating disorder. Some of the symptoms of the menopause transition and eating disorders can be the same and create a vicious circle in which some women become trapped. This can create confusion about what is really going on in your body and mind.

Here are some similarities of symptoms and features of both eating disorders and menopause :

1. Fear of weight gain – metabolisms naturally slow down in midlife, it is estimated by 15-20%. Decades of yo-yo dieting and ever-changing food consumption can also slow the rate at which food is used by your body. This can trigger food restriction (dieting) or purging and this in turn can often lead to bingeing / compulsive eating. Sometimes the harder a woman tries to lose weight, the more elusive it becomes. This has a negative affect on body image

2. Poor body image – inescapably connected to fear of weight gain. Again, low body image goes hand-in-hand with most eating disorders, as does poor self-worth. Many women don't know where self-esteem and body image start and stop, they are so intertwined. US research found 79% of women over

the age of 50 reported that weight and shape still affected their self-image^{vi}. In peri-menopause there are few women whose body image is not tested in one way or another...as don't forget we are supposed to age perfectly too

3. An ageing body and mind – may naturally produce concerns over body parts that are drooping, wrinkling, not working, shrinking, growing, losing stamina. The peri-menopause can be a wake-up call to notice the body and brain, and sadly, this may not always be positive. Research has shown that in the peri-menopause, brain ageing accelerates^{vii} and eating disorders may speed up the ageing process too through the damage they cause.^{viii} This can include loss of bone density, heart issues, weight gain; all of which can be attributed to the peri-menopause and/or eating disorders. These can all create worry and anxiety

4. Increased worry and anxiety – research shows that anxiety is most prevalent amongst midlife women in general.^{ix} During the peri-menopause levels of the female sex hormones, which keep us calm and focused, decrease. A woman's body needs a certain amount of fat for the endocrine (hormone) system to work properly. So, the reason why mid-life brings natural weight gain could be to generate more natural estrogen, at least that's according to Margot Maine and Joe Kelly in their book, Pursuing Perfection.^x It's an historic, protective, natural occurrence that does not fit with our size-obsessed culture. Also, the brain is 60% fat, and needs fuel (proper food) every day to function at its best. Restricting food unnaturally can mean missing out on key nutrients and balanced hormones, which in turn can contribute to heightened anxiety, worry and perceived stress

5. Increased perceived stress – sometimes dubbed 'the sandwich generation' many midlife women are at the peak of their stress levels. Having an eating disorder can be incredibly stressful too, it is all-consuming and constant. stress. Chronic, constant higher levels of cortisol make most women want to eat more and higher levels of stress induced eating are linked to higher BMIs.^{xi} So, the circle begins again for many. Stress – comfort eat – guilt & fear of weight gain – restrict – stress

6. Mid-life transitions – it's no coincidence that the peak times for eating disorders to surface are in adolescence and at peri-menopause. These are both times of transition in the body, as well as actual big changes in life. So, for peri-menopausal women, in addition to some of the feelings listed above, they have real life stuff going on such as -

- Divorce, separation, new relationships
- Children leaving home, empty nest syndrome
- Children returning from university, new partners

- Grandchildren
- Promotion or changes in career
- Downsizing at home
- Parents needing care, dying, grief.

Sometimes we don't all cope well with change. We might think we are doing well on the surface, but underneath what is really going on?

What an eating disorder is about really

This might be unexpected, but if you suffer from eating disorders, in some ways you might want to thank your brain. Your brain has done the best job it can in trying to protect you in difficult circumstances. It chose to use eating patterns to manage or squash down emotions.

There will be reasons why you don't have techniques that others have to self-soothe and self-regulate your emotions. These reasons may be complicated, multi-layered and long-standing, and may need treatment to correct.

Having an eating disorder is not about laziness, greed, or lack of control in overeaters, or being a control freak in under eaters. Food is not the cause, it is the symptom.

Our culture does not help. It lends itself to dealing with life's challenges through food, or dieting. We are expected to look and act perfectly, yet we live in an obesogenic environment. For example, an advert for chocolate followed by an advert for slimming clubs - how unhelpful and confusing is that?

How to start to recovering

Please know that recovery is possible in time and is easier when help is sought quickly.

It is important to start the recovery process with a GP, even though to get NHS help might depend on the severity of the disorder, and there are currently long waiting lists. This means that private treatment may be the best option for some. This can take many different forms and will often involve a team to get the optimum help; such as counselling, dieticians or nutritional therapists, psychotherapy, yoga therapy, coaching, hypnotherapy, or energy therapies.

Recovery can be thought of as being in 3 parts:

- 1. Nutrition** – getting the body, especially the brain, nourished again
- 2. The mind** – the therapy part – the 'why', and how to change
- 3. Whole life** – ensuring there is more to life than the eating disorder, to create wellbeing. Getting sufferers to take care of themselves.

Seeking help for eating problems is not something to be put off until after the pandemic. Please don't tell yourself it isn't serious enough, or you aren't worth it, or it can wait. Taking action now is crucial.

Further help

There is plenty of further advice available from these links, including the main types of eating disorders and the signs to spot them: -

- beateatingdisorders.org.uk/
- eating-disorders.org.uk/
- nationaleatingdisorders.org/health-consequences
- seedeatingdisorders.org.uk/

Cathy Houghton is an Integrated Nutrition Health Coach, specialising in Disordered Eating. Cathy partners women of mid and later life to find peace around the issues of eating, food, and wellbeing. She works with women to help them take charge of their own wellbeing, transform unhealthy habits, and work through the midlife in the best way they can.
cathy@blossomhealthcoaching.co.uk
www.blossomhealthcoaching.co.uk
[@blossomhealthcoaching](https://www.instagram.com/blossomhealthcoaching)

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