



Volume I, Issue 1. November 25, 2015

## Welcome Letter from our CEO

In many cultures, holidays come with an overwhelming importance placed on food. For me, every year before now, the holidays have also meant uncomfortable questions from family, questions about my portion sizes or insulin doses. Like many of the 10 million Americans that suffer from an eating disorder, I find this time of year more stressful and anxious than jolly or merry. The unnerving looks as everyone asks the silent question, ‘did she take insulin for that?’ “Yes,” I want to scream, “**I can** eat some pumpkin cheesecake. No, it won’t set me into a binge.” But this year the holidays bring something different. This year I’m a new aunt, and my niece is experiencing everything for the first time. This thanksgiving is going to be about the squeal on her face when she first tastes gravy, or trying to get her to pose for a picture in the ridiculous turkey hat I bought her! It’s still going to be stressful, and they’re still going to sideways glance at me. My boyfriend is always going to want to say the right thing, and sometimes he’s going to fail horribly at it. And the truth is with the plethora of doctors I’m trying to squeeze in the next month, one of them will probably make an insensitive joke not realizing I used to suffer from an eating disorder. It’s always going to hurt when someone says something that makes light of one of the two biggest chronic illnesses I struggle with. But I am no longer ashamed of either. I didn’t ask for my eating disorder any more than I did my diabetes, and I am stronger for having survived them both. That survivor spirit, the dia-badass diva that burns within me, is the woman I want to inspire my niece, to teach her to own her mistakes and grow from them. So as I approach the holiday season, I do so attempting to be forgiving to myself as I inevitably burn a side dish or mess up a picture. I will attempt to be brave in confronting my family when they say hurtful things, knowing that they don’t mean to be hurtful. Mostly, I will attempt to be the beautifully imperfect version of myself that my niece already knows and adores - flaws and all. Because she is **absolutely** good enough, and so are you. Happy Holidays from Diabulimia Helpline!

Warmest Regards,  
Erin M. Akers

**24 Hour Hotline (425) 985 - 3635**

# Intuitive Eating and Diabetes

by Dr. Lorraine Platka-Bird, PhD, RD, CDE

Even those of us less familiar with diabetes can probably pull up a few guidelines for diabetes care: regular blood glucose monitoring, cutting back on sugar and carbohydrates, constant attention to food labels, carb counting, regular exercise, and regular visits to the doctor for glucose and body weight monitoring.

While all of the above are characteristics of a good diabetic, the list also highlights some of the reasons diabetics are at much higher risk for eating disorders than the general population.

Regular blood glucose monitoring can quickly turn into obsession with perfect blood glucose numbers. Cutting back on sugar and carbohydrates might help stabilize some glucose highs and lows, so the individual takes it even further, virtually eliminating these foods from her diet. Then what about fruit? What about other carbohydrate-containing foods? Where does it stop? Somewhere along the way, she learns being a good diabetic means reading all food labels, which over time turns every meal time into obsession with numbers instead of enjoying the experience of eating.

For the rest of this article go to <http://www.diabulimiahelpline.org/intuitive-eating.html>



## Family Holiday Tips

Thanksgiving can be a hard holiday to get through whether you are struggling with an eating disorder, new to recovery, or even recovered or have no eating disorder at all! It's a holiday filled with food, family, questions, compliments, and so much more! Here are some do's and don't's put together for us by the DBH volunteers to help make this a loving and comfortable a holiday for everyone.

- Don't follow the diabetic around asking about blood sugars & insulin. This will upset them and make things awkward.

- Do tell your loved one how happy you are to spend time with them. They need and deserve to hear they are special to you.
- Don't comment on their appearance, even if it's a compliment. An eating disordered mind will always turn it around as an insult on themselves.
- When company is around is not a good time to bring up issues that are personal and will cause fights. Leave it for another day.
- Do keep traditions. If you make pumpkin pie every year, don't stop out of fear that it will trigger the person. They will notice and feel guilty assuming it's their fault that you changed the menu.
- If the person has a gluten intolerance or gastroparesis, try to incorporate foods that they can enjoy as well.
- Don't watch every bite the person eats during dinner. Even if you don't say anything, they can feel your eyes and will assume you are judging them for eating too much or not eating enough.
- If the person looks noticeably different in size (bigger or smaller, sicker or healthier) it may be a good idea to talk ahead of time to the guests so they don't bring it up and ruin the person's holiday by feeling judged the whole day.
- Make sure there are plenty of sugar free drink options available. Any person with diabetes will appreciate this, plus someone not in recovery will likely be quite dehydrated.
- If the person needs space or time alone, don't get on them for it. Respect the fact that it is an overwhelming day and that they may need some privacy.
- Do tell your loved one how happy you are to spend time w/ them. They need and deserve to hear they are special to you.

### Family & Friends Support Group

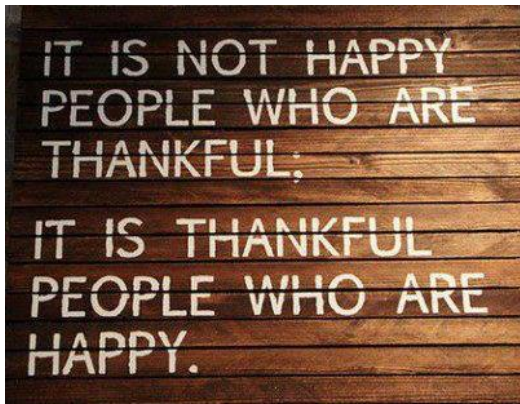
## Having a Child with Type 1 Diabetes

by Dawn Lee- Akers

"I can do this," I thought as I listened to the doctor explain how our daughter, Erin, had just been diagnosed with type 1 diabetes. My mother had T1D. Yes, there had been a lot of advances in technology since her passing 15 years before, but the basics were still the same. It was all about numbers – measuring food, counting carbohydrates, blood glucose levels, insulin dosages, body weight, hours of activity, hours of sleep, etc. What I didn't understand at the time was the mental and emotional toll this focus on numbers can have on a person, especially someone predisposed to an eating disorder.

For the rest of this article go to <http://www.diabulimiahelpline.org/child-with-diabetes.html>

## Art in Recovery



Submit your poetry or photography to Art in Recovery corner at [info@diabulimiahelpline.org](mailto:info@diabulimiahelpline.org)

## Sanitised Madness

and that which is the end of the madness  
begins a madness of a different sort:  
the physicality of starvation  
replaced by a saintly sanity:  
the systematic quantification,  
compensating each mouthful as one ought  
with exogenous insulin sadness

sadness because need may indicate badness:  
gluttony or an unhealthy lifestyle;  
sad because whatever the cause, effects  
mean dependency, and the vanity  
of self-reliance is met by defects  
in immunity: the body on trial.  
Some may call this the end of the madness.

3rd October 2015 © Anon

## Diabuddy Announcement

An eating disorder can be very isolating so we also have a Diabuddy program where we can match you with someone who has recovered from diabulimia for a more personal, one-on-one connection; someone who has been where you are and can listen or offer advice without judgment. If you are interested in a Diabuddy, call [425-985-3635](tel:425-985-3635) or email [info@diabulimiahelpline.org](mailto:info@diabulimiahelpline.org).

## Latest Research

Withholding insulin for weight control is a dangerous practice among individuals with type 1 diabetes; yet little is known about the factors associated with this behavior. Studies of nondiabetic individuals with weight concerns suggest that eating in a disinhibited manner (e.g., binge eating) predicts the use of maladaptive compensatory strategies (e.g., self-induced vomiting). The purpose of this study was to test whether individuals with type 1 diabetes are less restrained in their eating when they think their blood glucose (BG) is low and whether this contributes to insulin omission for weight control purposes and subsequently higher hemoglobin A1c (HbA1c).

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4130344/>

*Merwin, Rhonda, et. al. "Disinhibited Eating and Weight-Related Insulin Mismanagement among Individuals with Type 1 Diabetes." Appetite. 2014; 81:123-130.*