Eating Disorders

By Merrill DeVito
Have you ever heard a 9-year-old call herself fat? Seen her squeeze her thighs and say, “I need to go on a diet”? Do you ever wonder where a growing child gets these ideas?

I went on my first diet in fifth grade. I lost 10 pounds and my mom bought me the Laura Ashley skirt I had been wanting. I gave up milk and cookies after school for fresh fruit. This was in 1985, and I felt like I was the only one on a diet then. Today, studies show that 42% of first- through third-grade girls want to be thinner, and 81% of fourth and fifth-graders are afraid of being fat. Like their mothers, they feel better about themselves when they are on a diet.

In eighth grade, I led aerobics in the class lounge after lunch at my all-girls school alongside pictures of Twiggy and Naomi Campbell in bathing suits. By springtime, I was skipping lunch on Tuesdays and Thursdays to study in the library, and I even missed my own birthday party when my birthday fell on a Thursday. My friends waited 45 minutes for me in the lunchroom with the cake. I was half tormented, half proud of my self-discipline. I could be the thinnest.

It wasn’t until that summer when my hips really started to form and my chest filled out that I tried to give up food all together. I would give anything to be thin and food started to scare me. So I ate as little and exercised as much as possible until I no longer wanted to be alive. Then it was back to milk and cookies after school. I was banned from the field hockey team until I gained 15 pounds. My mother policed my every meal, literally forcing food through my tears, so that I wouldn’t have to go to the hospital.

Two months later, I weighed 113 pounds and was playing field hockey. I ate like a “normal” person, saw a psychotherapist and went to the doctor each week to “weigh in.” I never gained another ounce. I continued to exercise off every “extra” calorie I ate, and while I thought I was fine and had a healthier relationship to food than most girls in my class (who were beginning to face their own battles with bulimia and anorexia) my hair began to fall out, and I never got my period. Even worse, my stomach was so sensitive to food that there were times I couldn’t eat, even when I wanted to. My body remained trapped in a pattern my mind had set, and no doctor offered any escape. They gave me labels –
chronic fatigue syndrome, irritable bowel syndrome, Reynaud’s disease, amenorrhea, etc., but none went to the root of the problem. I was stuck between a fragile, frail body and a strong, determined mind, knowing I wanted to be better, but not knowing how to get there. Until I discovered energy work.

There are many kinds of energy work, ranging from less specific (reiki) to highly specific (craniosacral). All forms acknowledge and treat the energy body—a seemingly intangible, yet very palpable system that permeates and surrounds the physical body. Being abstract and invisible, the energy body has been written off as the imagination by many modern-day scientists. Others have set out to prove it is real.

While scientists like James Oschman describe the quantifiable mechanisms behind energy medicine, Candace Pert shows how the mind is linked or rather permeates the body. In her book, Molecules of Emotions, Pert reveals the science behind the mind-body connection. “The mind actually becomes body...the body is the actual outward manifestation, in physical space, of the mind,” writes Pert. “The traditional separation of mental processes, including emotions, from the body is no longer valid.” Her research shows that emotions actually trigger the release of neuropeptides, which are the messengers that carry information between the major systems of the body. She calls emotions “cellular signals that translate [felt] information into physical reality, literally transforming mind into matter.” Her scientific research has transformed the way we think about our bodies and our health. With it we can begin to understand how the self-hating that accompanies eating disorders gets trapped in the entire body. The ideas and judgments we hold about how our bodies are meant to look are literally held in our stomachs, our thighs and our breasts.

In her book, Anatomy of a Food Addiction, Anne Katherine explains how food and food abuse are linked to the role of neuropeptides in the body. Specifically, she cites serotonin, a “neurotransmitter known to alter mood, decreases appetite, decreases pain and facilitates sleep.” Carbohydrate intake boosts serotonin release, so people may crave carbohydrates both because carbs make them feel better and because they correct imbalanced chemical levels, said Katherine. Furthermore, carbohydrates provide immediate energy to the body, including the brain, so we may crave them in times of stress. Carbohydrates also stimulate the secretion of endorphins, another neurotransmitter known for relieving pain and giving feelings of pleasure. So it is natural that we are drawn to these foods, and while diet advocates encourage us to reduce and eliminate
these foods for weight loss, it is important to acknowledge their role in shaping both our emotions and our figures.

Over the past decade, psychotherapy has begun to take an increasing role in the treatment of illnesses, particularly eating disorders. Talk therapists play a crucial role in bringing people into awareness around their relationships to themselves, to other people and to food. This awareness is critical in treating eating disorders. My experience has been that psychotherapy only takes me so far. I understand my patterns and tendencies and that I try to let go, but somewhere I stay stuck. Somatic therapy, which is body-oriented therapy, helped me break through those last barriers.

An example of somatic therapy is polarity therapy. Therapist and teacher Avi Khadir calls polarity therapy “a somatic journey” that works by facilitating awareness of who we are and how we are in our bodies, in the world. Khadir seeks to integrate an individual’s experience by bringing the soul into contact with the body. He touches in a way that facilitates the release of energetic blocks. This allows for the release of physical blockages and creates a sense of expansion and space in the body. For me, it’s as if literal walls break down and my body begins to flow as one integrated entity. I get off his table saying, “Oh, this is what it feels like to be in my body.”

Bodywork brings us back into awareness of our body and shows us how to listen to it. In eating disorders, we learn to ignore our body’s cravings and hunger signals. We overeat, under-eat, and instead of eating what we truly crave, we eat non-fat diet foods or fatty feel-good foods. Food choices come out of the brain instead of the body, and the body doesn’t get what it needs. Deprivation leads to bingeing and unhealthy food choices. We get caught in cycles and lose touch with what our body really needs or wants. Polarity therapy is a way of re-educating ourselves to listen to our bodies, not the magazine ads and diet trends that surround us.

Energy work can also create space for the emotions that get confused around food. My observations are that in bulimia, women use purging as a way of expressing their feelings of upset and anger. In anorexia, women are avoiding food as a way of avoiding feelings; and in overeating, sufferers seek to drown out their emotions with food. All of these patterns seem to use food as a way of dealing with feelings. Polarity therapy can help make us more aware of these patterns and can physically create more space where we can hold our emotions.

Diane, a polarity therapist who is recovering from her own eating disorder, said “Bodywork teaches us to actually sit with our feelings and to process them in a safe environment. It teaches us to cope without..."
using self-destructive behavior.” She has found that bodywork lets her go to the core of her healing experience without having to intellectualize or relive the pain, as so often happens in psychotherapy.

Furthermore, polarity therapists are educated in the energetic qualities of foods. They see both food and the body in terms of the elements: ether, air, fire, water and earth. Food and the body are manifestations, in different proportions, of these five elements. So polarity therapists offer nutritional advice based on this model for understanding different body types and needs. In cases of extreme eating disorders, patients should seek the help of an expert nutritionist.

Craniosacral therapy is another form of somatic or body-oriented therapy inherent within polarity therapy, but also practiced as a stand-alone technique. I have heard it described as “psychotherapy for the body.” Without talking, a therapist can access the emotional body and potentially release the stress, tension or depressing emotions being held there. Naturopathic doctor John Beaulieu said, “Depression is always present [in cases of eating disorders].” Starvation and vomiting are both ways of getting a high, a relief from the darkness that surrounds an addict’s life.

In cranial work, contacts to the skull, the spine and the sacrum help put a person into his core being where deep-seated emotions can be worked out. Scientifically speaking, these gentle contacts help send an individual into his/her parasympathetic system, the branch of the nervous system associated with states of relaxation, where organs function optimally and digestive processes occur. Its opposite, the sympathetic system, is engaged in times of stress. Our blood goes to our limbs to prepare us for “flight or fight.” Many of us in this country spend too much time in sympathetic mode. Our lifestyles and work ethic cause significant stress, and food obsessions add another layer to it.

In anorexia, people suffer the stress of not eating enough to sustain their bodily functions. So the body enters into survival mode where the functioning of central organs, first the reproductive and then the digestive, shut down. Their bodies are further stressed by the lack of fat to protect the nerve cells (myelin sheath). In bulimia, the body is stressed by binge eating, throwing up and over-exercising. In both cases the body enters into the sympathetic nervous system and digestive processes shut down. So craniosacral helps shift the body back into the parasympathetic system. It gives the body a chance to reposition and possibly repattern itself so that central organs can function and restore balance to the entire body.

Apart from the science of how these bodywork systems work, it is the somatic body-to-body experience that seems to affect the most profound shifts. Both forms of touch therapy communicate a deep sense of love to the recipient. The body senses it even before the brain does, and it begins to let go of both its long held ideas about how it is supposed to hold itself, as well as the trauma that occurs around mis-using food. As this letting go occurs in the tissues, profound shifts occur emotionally and physically. A softening or melting happens, and the brain and body begin to integrate again. The divorce of mind and body that created disordered eating habits begins to heal. And, if the recipient is willing, she can learn to love herself, understanding that she is her body.

After years of psychotherapy, medical examinations and my own explorations into yoga, nutrition and other forms of alternative medicine, I discovered polarity therapy, and it is only through this form of intuitive, compassionate touch that I can find peace with food.

References
4. Ibid. p. 187.
5. Ibid. p. 189.

Merrill DeVito earned a degree in English and Spanish literature at Stanford University in 1997 and went on to study alternative medicines including ayurveda, herbalism, nutrition, massage, polarity and craniosacral therapy. She completed her bodywork training at the New Mexico Academy of Healing Arts and moved to Boulder, Colo., to start a private practice. She continues to study alternative medicine in the form of Chi Kang healing touch.