

Local

Local groups give support, advice to overeaters who lack will-power

By SALLY J. DREYFUS
Battalion Reporter

No magic formulas, no pills or drugs and no simple solutions are available for losing and controlling weight.

For many overweight people, weight control, weight loss and weight maintenance are difficult, if not impossible achievements.

Some people can't diet alone. Several groups in the Bryan-College Station area give help and support.

One such group is Overeaters Anonymous. OA has a 12-step program based on the Alcoholics Anonymous recovery program.

The alcoholic in AA is there to quit drinking. The overeater goes to OA to quit overeating.

"I've come to OA meetings before, wiping away the cookie crumbs from my mouth as I've walked in the door," one OA member said.

"None of us are perfect," she said, "and if we slip-up we just get back on the program."

OA members help each other solve compulsive overeating problems, to be cured from their "disease."

Abstinence from compulsive overeating, OA says, is most important in an overeater's life. This means "staying away from all eating between planned meals and from all individual binge foods."

An overeater said, "If I can be abstinent for one minute, that minute leads to an hour, one hour leads to one day, one day leads to one week, one week leads to one year. Every minute that I am abstinent, helps me."

Another weight loss method available in College Station is through registered dietitian, Frances Henry.

"I try to teach people how to get along with their diet," she said.

"A lot of overeaters are cooking right, but they're eating three portions instead of one. You can eat the things you like as long as you do it in moderation," Henry said.

It takes the stomach 20 minutes to tell the brain it's full.

"To lose weight, people need to push away from the table and eat slower," she said.

The \$20 first visit to Henry includes a consultation about a patient's weight problem and working out a suitable diet. Each visit thereafter is \$10.

Weight Watchers in Bryan-College Station has about 200 members attending weekly meetings, concentrating on retraining eating habits rather than on counting calories.

"We try to make people aware of their bad eating habits and we try to change them," Pat Hennessey, manager of the Weight Watchers in the Bryan-College Station area, said.

Ruth, a Weight Watchers lecturer, said, "We even run camps for overweight kids. Weight Watchers is for men, women and children with different overeating problems." Weight Watchers' initial fee is

\$11, with a weekly fee of \$5.

The Nutri-Medic weight loss program is based on a high protein, low carbohydrate diet with vitamin supplements.

At the first (free) consultation, the overeater fills out a questionnaire on eating habits and medical history.

Potential clients are shown before and after pictures of previous clients and given a guarantee that they will lose the amount of weight they want in a specified amount of time.

A \$70 lab test determines any medical problems that may deter the client from losing weight. A weekly fee of \$35 is charged during weight loss and for a six-week maintenance program following weight loss.

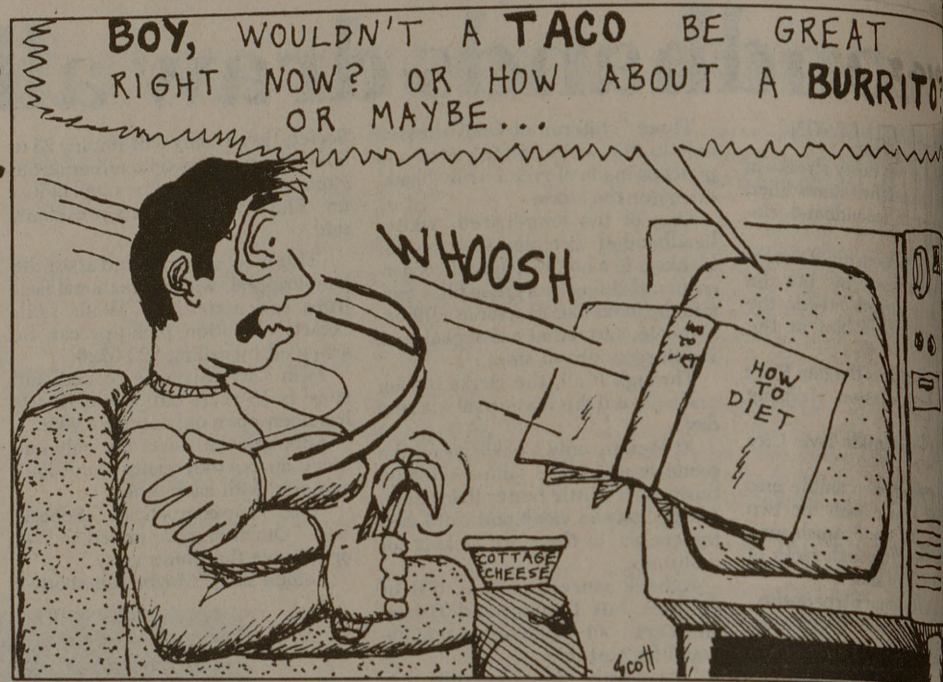
Although the organizations for weight loss use different methods, they agree on basic guidelines.

First, the overeater must want to lose weight and permanently change his or her eating habits. The overeater needs to retrain old eating patterns through behavior modification groups or individual counseling.

"Originally these techniques were used to treat alcoholism and phobias. But there is mounting evidence that behavior modification is more effective than traditional methods in a variety of disorders. Its application to the treatment of obesity is a late development, but a fruitful one," according to Albert J. Strunkard in the "Eating Patterns and Obesity."

Second, a doctor should be consulted before beginning any kind of diet.

Third, maintenance of weight loss is stressed.



Disease hits 'model' families

Anorexics examine illness

By BETH YOUNG
Battalion Reporter

She was the model daughter. They were the ideal family. One disease affected them all.

Untold thousands suffer from anorexia nervosa — self-starvation — each year and don't realize it. Despite a mortality rate of between 15 percent and 21 percent, few people know about the disease and fewer understand it.

A background look at the disease describing symptoms, treatments and other general information is helpful in making the public aware anorexia nervosa exists, possibly in epidemic proportions since one of every 200 girls in the United States gets the disease.

However, by looking at the victim and the part families play, people can

similar symptoms, they each had different dieting reasons, eating patterns and effects from the disease.

While reasons for dieting differ for each person, the editors of the Comprehensive Textbook of Psychiatry say that for some, extreme dieting is a way to gain attention, express anger or combat one's family.

Betty says a desire for male attention made her diet. "All the skinny girls were getting the attention of all the guys," she said. "I wanted some of that attention. I thought that if I lost enough weight, I'd get it."

"Being a perfectionist," she continued, "I dieted the best I could. Maybe too good."

Jane feels that homesickness and her family caused her to want to diet.

"I was so popular in high school and I was just one of the crowd at college," she explained. "At Christmas, my mother told me that I was fat, so I decided to change that, hoping it would change my college life. Boy, did it."

Jane says her doctor said she needed something to control and dieting was her only mode of self-control.

Editors of the Textbook say the desire for acceptance and attention plays an important part in the dieting. Patients want attention so much that they do not want to recover and are pleased with their condition.

The editors say anorexia's eating patterns vary greatly. Some go on diets and lose their appetites while others never had big appetites.

In describing her eating habits, Betty says she ate like a bird.

"I kept exercising non-stop," she explained. "If I ate over 500 calories a day, I had to do extra exercises to get rid of the extra calories." Normal calorie intake is between 1,500 and 2,000 calories a day.

Bryan psychiatrist Barney Davis says this is typical behavior. "There are girls who will eat a salad and then go run a mile," he said.

Jane's eating patterns revolved around not eating anything fattening.

"I used to eat anything," says Jane, "but now I eat dry salads and broiled meats. For awhile, I would eat a bowl of oatmeal in the morning and that was it for the day. I drank coffee for energy and to keep warm."

An article in Science Digest, March 1980, describes these eating patterns and hyperactivity as "bodily punishment."

According to doctors in an article in the East Texas State University Special, December 1979, anorexics will do anything to keep from gaining weight, including taking laxatives and making themselves vomit.

"I tried to make myself vomit once," says Jane, "but that was too gross. I'd rather not eat or exercise it off."

Anorexia nervosa victims can benefit from realizing the problem, learning from it and helping others.

"Even after I started seeing a doctor," Jane said, "I was about eating. I became nervous with school and was down if I failed at anything."

"Now, I'm not so uptight about it," she says. "I exercise about the same as before. P.E. major."

Betty said she finally decided to me again," she says, "I'll be myself and accept me as I am."

While Jane says that her reason for dieting was to please her mother, Betty gives her credit for helping cure her.

"They showed me pictures of what I looked like and made me see it."

Whether the family helps the victim is an unanswered question.

The editors of the Textbook that there is no uniform treatment, although they are somewhat protective. Food was a particular concern early in the dieting.

Davis agrees, saying that point the family might have food. "Also," he says, "the family might have been squeamish, not being given to anorexia."

Burns DuBose, College psychologist, says anorexia is difficult on the family and "interpersonal relationships deteriorate," he says.

The Textbook editors say anorexia and malnutrition are powerful

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spicuous behaviors used to get family and friends.

Parents play an important part in the treatment.

"It's necessary to get the victim involved in therapy," says Davis, "and to focus away from the dieting."

The Textbook editors say the time the disorder is in its early stages, parents become overprotective, overconcerned, bribing their children with any way possible.

Davis says the family is often but doesn't understand the problem and doesn't know what to do, "I tried to make myself vomit once," says Jane, "but that was too gross. I'd rather not eat or exercise it off."

Anorexia nervosa victims can benefit from realizing the problem, learning from it and helping others.

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