

ABOUT THE TASTELIFE COURSE

An eight-session weekly group course for sufferers of all types of eating disorder, and those who care for them.

The course is non-threatening, educational, and encourages a self-help approach that really works. It is run in the community by trained volunteers who care about those who struggle with eating disorders. Some have been sufferers themselves, or have cared for them. The course uses interactive and motivational methods to explain how to make changes in small steps towards health and wholeness. Its unique approach brings carers and sufferers together in an accepting environment where change is made possible.

CAN HEALTHCARE PROFESSIONALS AND VOLUNTEER HELPERS COME TO THE COURSE?

Yes, if supporting a sufferer. Otherwise, our awareness events are more suitable. Please contact us or your local course leader for more information.

REFERRAL AND COST

Participants are asked to donate about £5 per week to cover costs, where possible. Guests self-refer by finding a local course on our website.

WWW.TASTELIFEUK.ORG

ACCREDITATION DETAILS

The tastelife course and training have been accredited by the University of Brighton School of Health Sciences REQ award.



ABOUT TASTELIFE

tastelife is a supportive and educational charity that informs about eating disorders. It provides tools for recovery for those who suffer and those who care.

This leaflet gives you a brief overview of eating disorders from a health professional point of view, and invites you to investigate the tastelife response.

tastelife

HEALTH PROFESSIONALS

information about tastelife



Contact us

admin@tastelifeuk.org
07817605349 | 07845089400
www.tastelifeuk.org | reg charity no 1158516

Breaking free from
eating disorders

WHY ARE EATING DISORDERS IMPORTANT?

IT'S COMMON

There are an estimated 4 million people of all ages in the UK suffering from this hidden, denied and misunderstood condition. Eating disorder incidence is increasing and is a complex multifactorial mental health problem. Eating disorders occur in people from all social classes and backgrounds.

IT'S SERIOUS

Eating disorders have the highest mortality rates among psychiatric disorders, and of those surviving, about half recover, and the rest improve to some degree. Undiagnosed depression, suicide and parasuicide are highest in sufferers of Bulimia Nervosa. Binge Eating Disorder is strongly linked to trauma and abuse. Diabulimia affects an increasing number of type 1 diabetics. Alcoholimia is a growing problem amongst students.

IT'S URGENT

Societal pressures of body image and social media on children and adolescents are intense and increasing. Early identification of an eating disorder improves prognosis, and increasing awareness in the general population and in schools will help to prevent eating disorders and improve mutual care within communities.



HOW MIGHT AN EATING DISORDER PRESENT?

ANOREXIA NERVOSA:

- significant weight loss with hair loss
- amenorrhoea
- tiredness, anaemia, brain fog
- anxiety around food, restricted diet
- hiding of symptoms with bulky clothing, weights in pockets, water loading

BULIMIA NERVOSA:

- binges and purges, vomiting or laxative abuse
- dental problems and electrolyte disturbances
- depression
- enlarged parotid glands
- scarring on the back of one hand
- weight can be normal

BINGE EATING DISORDER:

- large binges when not hungry
- secretive about food
- shame and guilt after binges
- weight gain and associated problems
- previous trauma or abuse

Other eating disorders include over-exercising, not taking insulin for diabetes (diabulimia), orthorexia (obsessive 'clean eating'), and alcoholimia. These, and variations on the above, are currently classified together as OSFED (Other Specified Feeding and Eating Disorders).

EATING DISORDERS AND MENTAL HEALTH

Eating disorders are a defence mechanism against strong emotions, resulting in addictive behaviours and rituals around food. Eating disorders may be associated with anxiety, OCD and a perfectionist personality. They are triggered by a complex mix of factors, including physical, social and psychological. Undiagnosed depression is a common comorbidity.

RECOVERY IS POSSIBLE AND IS HELPED BY:

- early intervention
- education of carers and sufferers about eating disorders and how to recover
- collaborative care by family, peers and health professionals
- group and individual integrative counselling
- small steps to recovery to counter addiction
- personal support and loving encouragement
- family therapy for adolescents and CBT for adults

THE TASTELIFE RESPONSE

- tastelife runs accredited courses for sufferers and carers around the UK, focused on tools for recovery from any eating disorder
- tastelife hosts accredited training for volunteers to equip them to run these accredited courses in their community
- tastelife Youth Track 'Understanding eating disorders' offers three interactive sessions for youth groups, and schools at Key Stage 3
- Professionals' days are available: 'Eating Disorders and Recovery'
- tastelife is a registered charity and needs money to increase its spread and effectiveness. We welcome donations
- Please see our website for details of all the above



IS IT ON
YOUR
PROFESSIONAL
RADAR?