



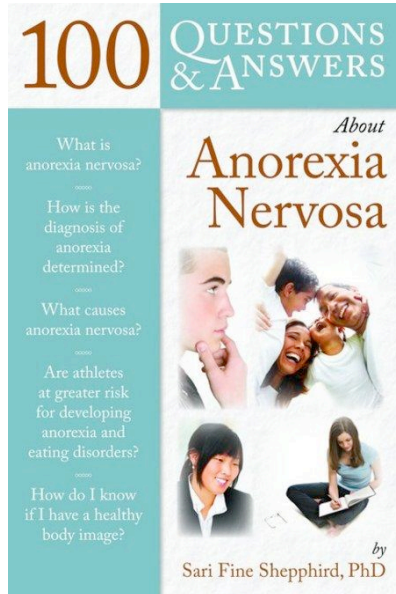
Enjoy this e-Interview with Dr. Sari Shepphird, author of 100 Questions and Answers about Anorexia Nervosa. Learn a bit about her, her book and her strategies for keeping life simple.

About Our Guest: Dr. Sari Shepphird

- **Tell us a little bit about yourself.** Well, I am a psychologist and I specialize in eating disorders treatment. I have a new book out called "*100 Questions and Answers about Anorexia Nervosa*", and I am really pleased because people say that the book has been helpful to them!
- **What do you like most about your job?** I really enjoy interacting with people and helping people. It is really rewarding to help my clients and patients find healing and live beyond their eating disorders, and I especially like seeing those "light bulbs" go off in people when they discover something new about themselves or their potential.
- **You're obviously an expert on eating disorders, but what else do you write about?** I also write about pop culture, but pop culture that revolves around beauty, health, and weight issues. We are so inundated as a society with messages about beauty and attractiveness, but so much of what we see and read paints a really unrealistic idea of beauty. It's important that our kids learn what TRUE beauty is all about, and not get sidetracked by the latest waif-like trend sweeping through our culture. So, I write about ideas that challenge what we see and encourage a healthy ideal and hopefully a healthier culture!
- **What's next from Dr. Shepp, perhaps a new book you can tell us about?** I hope so! Right now I am working on a resource for professionals who work with eating disorders, but I hope after that to write another book for patients and families. This one has been well-received and that is really encouraging! But it's more encouraging to know that it is thought of as a helpful resource - because to me, that's the whole point!



About Her Book: [100 Questions and Answers about Anorexia Nervosa](#)



• **What are some common myths associated with Anorexia?** There are a lot of ideas about anorexia that stem from misconceptions about the illness. And that actually relates to the first myth - that anorexia is a lifestyle choice and not an illness. That cannot be further from the truth!

Anorexia is both a medical and psychiatric illness, and a very serious one at that. What many people don't know is that anorexia has the highest premature death rate of any mental illness - up to 20% of people with anorexia will die from it! This is why it is so important to try and bring more accurate information to light about anorexia - so people can better understand it, and know that help is available!

These are some other myths that I address in my book; misconceptions that need to be cleared up about the illness, and I hope that the information in my book helps.

Myth: "Individuals with anorexia are just trying to get attention."

Myth: "Anorexia is about vanity. If a person with anorexia says, 'I feel fat,' it is just to get compliments."

Myth: "Eating Disorders are primarily about food and weight."

Myth: "People with anorexia do not engage in binge eating."

Myth: "You cannot die from anorexia if you exercise to keep your heart and body strong."

Myth: "Anorexia is all about control."

• **How do I know if someone I love has Anorexia?** There are warning signs that you can look for, and if you suspect that someone you love may have an eating disorder of any kind, talk to your healthcare professional who can suggest what to do to help. You can also visit my website for some free download-able articles at <http://www.drshepp.com> or go to the National Eating Disorders Association website at <http://www.nationaleatingdisorders.org>.

In my book, I include a helpful warning sign checklist, and I have included here some of the basic warning signs of anorexia nervosa. The signs fall into different behavior categories for the sake of clarity.

Someone with anorexia nervosa may exhibit some or all of these symptoms. Many of the signs and symptoms listed can also be signs of other illness, so be sure to consult a trained professional for a complete evaluation and proper diagnosis.

- **Food Behaviors**
 - Denies hunger
 - Will only eat a few "safe" foods
 - Avoids eating with others

- Is ritualistic about food (e.g., chews each bite a certain number of times, measures food servings, counts the number of food items eaten) or has other rules about eating (e.g., will not eat past a certain time)
- Restricts eating or maintains severe dieting
- Purges (i.e., self-induced vomiting)
- Makes frequent trips to the bathroom after eating (can be a sign of purging)
- Eats alone; eating patterns are vague or secretive
- Skips meals
- Chews food and spits it out before swallowing
- Makes excuses for not eating; plays with food on plate, or moves it around, instead of eating
- Is preoccupied with food content and ingredients
- Divides food into "good" and "bad" based on fat content
- Suffers intense guilt after eating
- **Appearance and Body Image Behaviors**
 - Has lost significant weight and/or refuses to maintain minimum normal weight
 - Exhibits great concern about weight; shows intense fear of gaining weight; complains of "feeling fat"
 - Spends time inspecting self in mirror
 - Entertains magical thinking about weight (e.g., "If I am thinner, I will feel better about myself.")
 - Seeks to emulate thin people
 - Wears baggy clothes to hide weight loss
 - Weighs self frequently
 - Has negative body image
- **Exercise Behaviors**
 - Exercises even when injured or overly tired
 - Exercises compulsively
- **Thoughts, Beliefs, and Feelings**
 - Difficulty expressing feelings unrelated to food or weight
 - Suicidal thoughts
 - Depression (may include feelings of shame, anger, or guilt)
 - Self-critical and/or a "perfectionist"
 - Overly concerned with opinions of others; may be described as a "people-pleaser"
 - Low self-esteem, feelings of worthlessness
 - Mood fluctuations, irritability
 - Isolated, withdrawn
- **Physical Complaints**
 - Decreased coordination
 - Headaches
 - Dental problems, swollen glands, discolored teeth
 - Insomnia
 - Constipation, gastrointestinal problems
 - Frequent complaints about being cold
 - Fatigue, or in contrast, hyperactivity
 - Dizziness or fainting

- **Other Behaviors**
 - Suicidal gestures
 - Dramatic weight loss
 - Frequent use of laxatives or diuretics

While all of these "other" behaviors can raise concern for anorexia, their appearance, even in isolation, is associated with an additional increased risk of harm.

• **What is the cause and can I prevent it from happening in my family?** Anorexia doesn't have just one cause, but rather there are multiple influences that make up a person's risk for developing anorexia. Many people, however, are unaware that anorexia is a biologically-based illness. So genetic and biological factors combine with other factors to make up the total picture of risk for developing anorexia. Other risk factors include psychological factors like anxiety; developmental factors like puberty; cultural factors like the pressure to be excessively thin; and social factors like teasing and peer influence. It is the presence of these other risk factors that can increase a person's *vulnerability* to anorexia, and when combined with stressful life events, these factors increase the likelihood of developing an eating disorder.

But having said that let me add one important note: Knowing the cause of an eating disorder is *not* a prerequisite for getting help! Even if you are unaware of particular risk factors that apply, do not delay getting help for yourself or for a loved one.

• **How do I know if I have a healthy body image?** That's a great question! And in my book, I actually have a quiz that might help to provide an answer! Some of the questions from the quiz I have included here. Keeping in mind that positive and negative body image are on a continuum, you can use this questionnaire to help guide your thinking about your body image. As you read each statement, respond with one of the following answers: *Always, Frequently, Sometimes, or Never*. You may want to write your answers down as you go.

- 1) When I look in the mirror, I dislike what I see.
- 2) The way I treat my body is a result of my frustration with my physical appearance (example: I exercise to "punish" my body because I feel fat or didn't perform well athletically).
- 3) I think of the worth of myself and my body in terms of appearance (example: I like myself because I look good today), not in terms of how it feels and what it does for me (example: I like myself because I am healthy or strong).
- 4) When I look in the mirror, I can't help but concentrate on the parts of my body that I dislike or hate.
- 5) I do not like being seen in revealing or tight clothing because I am uncomfortable with my body.
- 6) I think that if I were thinner, I would be happy.

While I have a more complete quiz in the book, if you answered *Always, Frequently, or Sometimes* to more than one of these statements, you may be suffering from poor body image. If you answered *Never* to most of the questions, you likely have a healthy, positive body image. Either way, you can read my book to learn about ways to improve your body image!

• **Are you a parent? What have you done to enhance your child's body image?**
It's in the works! ;-)

• **If I have a loved one who is dealing with Anorexia, what is the single BEST thing I can do to help?** I have a chapter in the book devoted to this, but the SINGLE best thing? That would be keep loving and supporting your loved one. Unconditionally. That doesn't mean that you have to support their eating disorder or their unhealthy behaviors. But a person struggling with anorexia is likely to feel increasingly isolated and struggle with self-loathing, shame and embarrassment. Just being there, consistently, unconditionally, can be more healing than you may think.

If it is helpful, I have a list of "do's" and "don't's" in the book... here are just a few from that list...

Things *to do* when a loved one has anorexia or another eating disorder:

- Understand all you can about this complex illness.
- Obtain adequate self-support to ensure you have the coping skills needed to care for your loved one. Know your own limitations.
- Listen to and heed any recommendations from healthcare professionals.
- Encourage positive self-esteem (not based on physical appearance) in your loved one. Support their unique personality, talents, and abilities.
- Relate to your loved one as a *person*, rather than relating to their anorexia. Understand that the two are separate.
- Realize there are no quick and easy solutions to an eating disorder.
- Set a healthy example. Have a positive, balanced approach to food. Enjoy and respect your own body. Exercise in moderation.
- If your loved one is at an immediate risk of harm, seek emergency intervention.

Things *not to do* when a loved one has anorexia or another eating disorder:

- Do not threaten your loved one if he or she refuses help.
- Do not assign blame. Do not criticize or judge your loved one for his or her illness.
- Do not try to diagnose or treat an eating disorder on your own, apart from the appropriate involvement of a healthcare professional.
- Do not ignore medical risk or complications.
- Do not keep your loved one from socially appropriate activities because of his or her eating disorder. This can lead to further isolation.
- Do not deny or ignore your own need for support. Do not ignore other family members' needs for interaction and support. Do not allow a loved one's anorexia to be a distraction or excuse for not attending to your own needs.

Just for Fun

- **What is your best strategy for keeping it simple?** "Staying in the Moment". That is how I keep it simple. I try not to dwell on yesterday or worry about tomorrow. That way I have the mental energy to focus on what is in front of me, and it helps my physical energy levels too because "staying in the moment" reduces stress.
- **What is the background on your computer screen?** That's a fun question! I have a picture of a sunrise that my family and I witnessed when we were traveling overseas together a few years ago. I took the picture both because the setting was beautiful and memorable, but also because I am rarely up when the sunrises! I had to prove it to my friends or they would not have believed ! ;-)
- **How addicted are you to Facebook on a scale of 1 - 10, with 10 being a nut about it?** Facebook I am sadly a 3, I don't check it or post on it as much as I should...But on Twitter? I am a 10! Yep, it's a habit that is getting the best of me! ;-) Feel free to follow me, by the way. I am at [Twitter.com/@DrShepp](https://twitter.com/DrShepp).
- **What is your favorite holiday?** I love Thanksgiving in our family. We have LITERALLY 100 or more people every year, because my grandmother was one of 7 kids, and now 4 or 5 generations of us all get together and spend time catching up. It's really inspiring to see all of the families grow individually, but also have the good fortune to be able to get together as one, big (okay, huge!) family once a year and share with each other. Plus, we have a great family football game that everyone plays in! It's a lot of fun, and really intimate and warm, despite how large the gathering can be!
- **If you were stranded alone on a desert island, what one item would you have to have with you?** Hmmm...I have to think about that one. I would say...a locket with my family's picture in it. I guess that is what I would want, both to remind me of how worthwhile my life has been just knowing and loving them, but also because they would be the best motivation for keeping up hope. Hope is the best medicine and the best motivator, so whatever would keep my hope alive is what I would want to have with me. Other than that, I guess I would just have to be pretty darn scrappy to live on a desert island!



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