

Objectives

Identify approaches to improve nutritional status through intuitive eating without imposing dietary restrictions.

Differentiate between sustainable weight loss strategies and misleading "fad diet" claims.

Explain health risks associated with popular diet strategies and "fads."

Lidentify indicators of one's nutritional status and overall weilbeing that do not involve numerical values.

What Is Intuitive Eating (IE)?





- Concept that was coined by two dietitians (Evelyn Tribole and Elyse Resch) in 1995
- "Intuitive Eating is a self-care eating framework, which integrates instinct, emotion, and rational thought"
 - o Weight-inclusive
 - o Evidence-based
 - o 10 main principles

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How is I.E. Supposed to Work?

- "1.) By helping you **cultivate attunement to the physical sensations** that arise from within your body to get both your **biological** AND **psychological** needs met"
- "2.) Removing the obstacles and disruptors to attunement, which usually come from the mind in the form of rules, beliefs, and thoughts."

Biological versus Psychological Needs

Biological



"Food is fuel"



Carbohydrates are our body's main source of energy



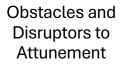
Protein can help to keep us feel full for longer

Psychological

- Boredom or stress eating
- Eating for pleasure/relief
- Eating in time of celebration and in time of grief

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Food keeps us alive, but it also tastes good:)







- Diet trends promoting restriction of your favorite food
- Food guilt/shame
- Fear of facing judgement or backlash for food choices
- "Good" food choices versus "bad" food choices

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10 Principles of Intuitive Eating

1. Reject Diet Culture Missing food group(s) Absence of Nutritionally physical inadequate activity **Fad Diet** Trendy dietary Rapid weight Promotes short pattern known to be term changes loss a quick fix for long term problems Inconsistent Maintenance scientific issues Detrimental for evidence those with chronic diseases

Fad Diets Pros Cons 1. Quick weight loss (assuming you can stick to it long enough) Unsustainable dietary Rebound weight gain Poor relationship with Potential Muscle loss following exacerbation of vitamin/mineral fast/extreme weight comorbid conditions deficiency loss

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Reasonable Diet Modifications



ULTIMATELY, WE ARE LOOKING FOR INTENTIONAL AND REASONABLE DIET MODIFICATIONS THAT ARE CHANGES THAT CAN BE REALISTICALLY CARRIED OUT FOREVER



ONE OF THE FIRST QUESTIONS I ASK PATIENTS WHO COME IN ON A "DIET" IS "HOW LONG DO YOU PLAN ON SEEING THIS THROUGH?"



IF THERE IS AN END DATE IN MIND, IT IS PROBABLY AN UNREALISTIC DIET CHANGE FOR YOU

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2. Honor Your Hunger

- We are often taught to fear hunger
 - o Appetite suppressant use
- Can lose the ability to listen to hunger cues (no worries, we can work on getting this skill back!)
- Reframing
 - o Instead of: "I feel hungry, but I am going to try and wait as long as I can before I eat something. I just had a snack 1 hour ago so I shouldn't be hungry anyway."
 - o Try: "That initial snack I had must not have been as satisfying as I thought it would be. What can I add to this next snack to keep me feeling satisfied and energized for longer?"

Hunger Scale

Ravenously Hungry

Hungry

Hungry

Slightly Hungry

Neutral

Slightly Satisfied

Uncomfortable

Stuffed/

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Hunger Scale





3. Make Peace with Food

• Simple!

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Just Kidding...

- Most of us have years, even decades, of diet culture reeking its havoc on us
- "Good" versus "Bad" food
 - o Associating shame or guilt with certain food choices
 - o Associating food choices with one's morality
- For many of us, it can feel like food has more of the control than we do
- · Strategies:
 - o Exposure
 - o Practice being gentle after "indulging"

4. Discover the Satisfaction Factor

- Food is both physically satisfying AND emotionally/mentally satisfying
- <u>Physical Satisfaction</u> what can we **ADD** to increase fullness and physical satisfaction?
 - o Protein
 - Aiming for 20-30 grams of protein per meal
 - Adding a protein source to snacks that may otherwise be lacking
 - o Fiber
 - Fruits/Veggies/Whole grains

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Emotional/Mental Satisfaction

- · Raise your hand if you have taste buds
 - o oh that's right, most of us do!
- Food is cultural
 - o Traditions, grieving, celebrating
- Taps into removing food's moral high ground and allowing space to truly WANT a certain food item
 - o "Eat what you want, add what you need"
 - o Balance

5. Feel Your Fullness



Ghrelin – Hormone that is simulated when the stomach is empty, increasing you appetite



<u>Leptin</u> – Hormone that is released from your adipose (fat) cells that sends signals to your brain that you are full



This process can take time

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6. Challenge the "Food Police"

- You are your own "Food Police"
 - o Telling yourself you "can't" or "shouldn't" based on the figurative box that food item has been put in
- Rationalizing why one shouldn't eat something:
 - o "It won't keep me full"
 - Challenge: "So what should we add to increase the satiety factor?"
 - o "No one else is eating it- I will be judged"
 - Challenge: "Others are potentially feeling similar negative thoughts. I will continue to work through my own and maybe will inspire others to do the same"
 - o "I am not hungry"
 - Challenge: "I am doing a great job listening to my body and my fullness cues. I am going to take this piece of cake to go so I can enjoy it when I am not so full"

7. Cope with Your Emotions with Kindness

- Strong emotion can directly impact food intake
- · Coping mechanisms that do not relate to food are helpful
 - o RDs work alongside mental health professionals here
- · Understanding that emotions can drive food choices and ultimately leave you feeling out of control
 - The food itself won't help the root issue, but may only be contributing to further exacerbation of the mental health issue (as a result of eating until severe discomfort)
- · Positive self-talk after over-eating
 - o It is not your fault you deserve to seek relief
 - o You are not weak emotions are intense, you are working to find ways to navigate them
 - o You are not undisciplined all foods fit in the diet in portions that remain comfortable to us

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8. Respect Your Body

- "Healthy at Every Size"
- BMI DOES NOT TAKE INTO CONSIDERATION BODY COMPOSITION
- "Healthy weight" is relative
- · Health indicators other than body weight
 - o Physical fitness/endurance
 - o Lab values
 - o How clothing fits
 - o Mental health

There is absolutely nothing wrong with desiring to lose weight.

The "why" you are wanting to lose weight is important.

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9. Movement-Feel the Difference

- Focusing on how your body feels following movement rather than "calories burned"
- No movement is too little movement, and level of movement can fluctuate depending on the day!
 - o Aim to avoid setting rigid exercise expectations

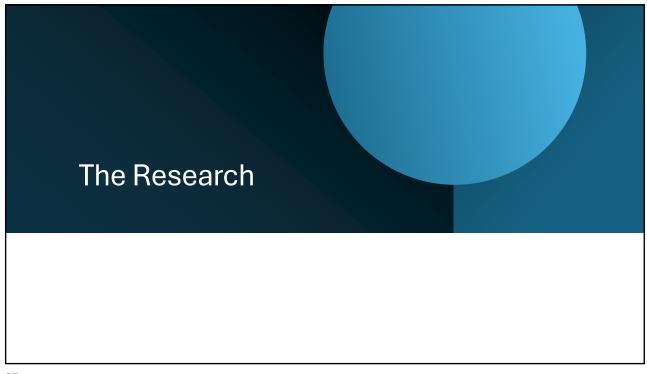
10. Honor Your Health- Gentle Nutrition

- · Aim to honor your taste buds, culture, and how the food makes YOU feel
- Not every day will be perfect that is life!
 - o Progress over perfection always
- You will not lose all your progress, hard work, or become nutrient deficient after one "less than ideal" meal or snack

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Common Intuitive Eating Misconceptions

- You can certainly reach for the veggie and/or protein-packed option on the menu if that is what you want
- The goal is that you feel more in control of your food choices and eat/move to make your body feel its best!
 - o Sometimes that may look like a fresh, light salad. Other times it may look like a couple slices of pizza.
- Overall, there is no perfect diet. The eating style that causes you to feel your best, is the best diet for you.



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I.E. in Young Adults

2022 longitudinal study of associations between I.E. and weight-related behaviors

- o Project EAT (phase 3 and 4 were compared)
 - Mean age 25.3 and 31.1 respectively
- o I.E. was defined as "eating according to internal hunger and satiety cues"
- Weight-related behaviors
- Specifically looking at weight (BMI) and traditional dieting practices
- o Male versus female groups were compared

I.E. in Young Adults

- Results
 - For women
 - I.E. had lower BMIs and reported engaging less in dieting practices
 - No significant difference between the non I.E. and I.E. groups in regards to exercise and decreased sweets consumption
 - · Both reported increasing exercise and decreases sweets in the diet
 - o For men
 - I.E. reported participating significantly less in unhealthy eating behaviors and binge-eating
 - No significant difference related to weight (BMI)

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I.E., Disordered Eating and Psychological Outcomes

2020 article examined longitudinal associations between intuitive eating, psychological health outcomes and disordered eating behaviors

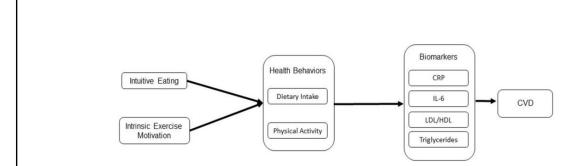
- I.E. was defined as "eating according to internal hunger and satiety cues"
- Psychological health outcomes used quartile cut-offs that had been previously used for Project EAT (clinical cut-offs for self-esteem and body dissatisfaction measures)
- <u>Disordered eating behaviors</u> defined as "unhealthy and extreme weight control behaviors"
 - Binge-eating questions (yes/no): In the past year, have you ever eaten so much food in a short time that you would be embarrassed if others saw you? If yes, did you feel like you couldn't stop or control your eating?

I.E. and Disordered Eating

· Results

o "After adjusting for age, sex, race/ethnicity, socioeconomic status, BMI, and outcome at baseline, greater baseline IE and increases in IE from baseline to follow-up were both associated with lower odds of high depressive symptoms, low self-esteem, high body dissatisfaction, UWCBs, EWCBs, and binge eating at eight-year follow-up (all p's < .01). The strongest protective associations were observed for binge-eating."

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2023 cross-sectional analysis assessed I.E., intrinsic exercise motivation and biomarkers for CVD in female older adults (>/= 58 y.o., n=79)

I.E. and Biomarkers for CVD

I.E. and Biomarkers for CVD

- Results
 - o I.E. associated with lower LDL and Triglycerides
 - $\circ\,$ No significant difference for CRP or IL-6 or BMI

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Limitations

- · So many!
- · Reporting bias
- Differing definitions amongst not only researchers but also study participants
- 2023 Qualitative Exploration Study
 - $\circ\,$ Explored people's understanding of intuitive eating, including perceived barriers and enablers to implementation.
 - o Initial perception quote:
 - "If I tried that I'd die of chocolate poisoning in about three weeks" (Men, 35-50)
 - Clearly some mis-understanding on I.E., the actions associated with it and the purpose.

Conclusion

- Intuitive eating looks different for everyone olt is a process that takes time
- Inquire about intuitive eating with your registered dietitian
 • Together you can produce unique strategies/goals tailored

 specifically to you to get started on your journey of food freedom

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