Binge Eating Disorders impact two times more patients than Anorexia. Eating Recovery Center offers a unique eating disorder treatment program for people who suffer from binge eating disorder, compulsive overeating, night eating, emotional eating, and/or “food addiction”.

Patients with loss of control eating often “diet” and then blame themselves for their “failure” to manage their behavior. We help patients normalize eating patterns, treat binge eating related medical problems, manage stress, improve health-related quality of life issues, and establish deeper connections with others.

Our program provides intensive multidisciplinary treatment for adults. We offer a dedicated team that includes obesity medicine specialists, exercise physiologists, therapists and psychiatrists who specialize in eating disorders. We also offer three levels of care based on the severity of a patient’s eating disorder. See back for details.

Our program will help patients:

- Interrupt or eliminate eating disordered behaviors
- Better manage stress
- Address co-morbid mood, anxiety, and substance use disorders that frequently co-occur with eating disorders
- Address medical and functional impairments
- Address body image disturbance
- Learn and practice healthy lifestyle and functional movement
- Improve quality and quantity of sleep
- Decrease co-morbid compulsive behaviors (i.e., process addictions)
- Learn cutting-edge skills to address eating disordered behaviors including Cognitive Behavioral Therapy, Acceptance & Commitment Therapy, and Exposure & Response Prevention

For a free assessment by a Masters-level clinician, call 1-877-735-0252 or visit www.eatingrecovery.com

“I didn’t know what to expect and getting all this therapy was just amazing. You guys are so different from what else is out there. Before I came here, my heart and brain spoke different languages. Now that I did the work here, I’m much better off because my heart and brain talk now.

– Andy M., Program Alumnus

“Too many patients who struggle with loss of control eating attribute their behavior to a lack of discipline or willpower and seek “diets” or try to address this behavior on their own. Upon learning the diagnostic criteria for overeating, they often recognize eating disordered behaviors that have been evident since childhood. Binge eating disorder and compulsive overeating are treatable disorders with good long term abstinence rates, but patients need the right care and the right team behind them.”

– Julie Friedman, PhD, Executive Director, Binge Eating Treatment and Recovery, Eating Recovery Center
Patients who can answer “YES” to any of the following questions may find this program helpful.

- I feel out of control around food.
- I sometimes eat until I feel sick or uncomfortable.
- I am worried about my weight and body size.
- I eat 25% of my total daily calories after dinner and before bed, and/or eat in the middle of the night.
- I use food as comfort.
- I have gained more than 15 pounds in the last 12 months.
- I feel addicted to food.
- I am vomiting and/or using laxatives, diuretics, or other over the counter or prescription medications to try to lose weight or reduce my calories.
- I eat mindlessly throughout the day or during the night.
- I have medical issues (diabetes, hypertension, heart disease, sleep apnea, etc.).
- A medical or health professional has advised me I must manage my eating behaviors.
- I am struggling with eating disorder behaviors after having bariatric surgery.
- I am always worried or think a lot about my weight and/or shape.
- I have mood and/or anxiety symptoms and/or substance use behaviors.

### Who is the ideal candidate for this program?

<table>
<thead>
<tr>
<th>RESIDENTIAL</th>
<th>PARTIAL HOSPITALIZATION</th>
<th>INTENSIVE OUTPATIENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description:</strong></td>
<td>- 24/7 supervision and medical support to prevent harmful behaviors in a total containment environment</td>
<td>- Up to 8 hours of daily treatment, including weekends, after which patients return home or to supported apartments</td>
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<tr>
<td><strong>Patient Status:</strong></td>
<td>- Serious medical issues, fall risk, limited mobility, hygiene challenges and sleeping issues</td>
<td>- Possess ability to practice recovery skills independently</td>
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<tr>
<td><strong>Program Goals:</strong></td>
<td>- To interrupt behaviors, improve co-morbidities, stabilize weight and begin learning recovery skills</td>
<td>- To improve medical co-morbidities, stabilize weight plus learn and apply life skills in a home environment</td>
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<tr>
<td><strong>Treatment Team:</strong></td>
<td>- Psychiatrist, therapist, family therapist, diettian, physician, nurse and exercise physiologist</td>
<td>- Psychiatrist, therapist, family therapist, diettian, physician, nurse and exercise physiologist</td>
</tr>
</tbody>
</table>
| **Medical Care:** | - 24/7 nursing care  
- Complete weight physical by physician  
- Physician visits  
- Weekly movement physiology | - Complete weight physical by physician  
- Physician visits  
- Weekly movement physiology | |
| **Psychiatric Care:** | - Individual psychiatry  
- Full treatment team rounds with patient present | - Individual psychiatry  
- Full treatment team rounds with patient present | - Individual psychiatry |
| **Behavioral Care:** | - Trauma-informed care and intensive therapy, including:  
- Acceptance & Commitment Therapy (ACT)  
- Dialectical Behavior Therapy (DBT)  
- Exposure & Response Prevention Therapy (ERP)  
- Weekly individual psychotherapy  
- Daily group therapy and skills-based education groups  
- Weekly family therapy | - Trauma-informed care and intensive therapy, including:  
- Acceptance & Commitment Therapy (ACT)  
- Dialectical Behavior Therapy (DBT)  
- Exposure & Response Prevention Therapy (ERP)  
- Weekly individual psychotherapy  
- Daily group therapy and skills-based education groups  
- Weekly family therapy | - Trauma-Informed care and intensive therapy, including:  
- Acceptance & Commitment Therapy (ACT)  
- Dialectical Behavior Therapy (DBT)  
- Exposure & Response Prevention Therapy (ERP)  
- Individual psychotherapy  
- Group therapy |
| **Nutritional Care:** | - Individualized meal planning based on patient’s status  
- Daily supervised and supported meals and snacks  
- Individual nutrition counseling  
- Daily group activities to learn various nutrition skills | - Individualized meal planning based on patient’s status  
- Daily supervised and supported meals and snacks  
- Individual nutrition counseling  
- Daily group activities to learn various nutrition skills | - Individualized meal planning  
- Individual nutrition therapy  
- Nutrition groups (skills, education, exposure)  
- Supervised meals |

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