

# *Foreword*

Many women (and men) suffer every day from the symptoms of eating disorders. They clearly have disturbed eating habits, with no regularly planned meals or snacks, and an inability to follow dietary plans for any useful length of time. They often impulsively binge, usually at the end of the day, and have difficulty stopping once they have started. These binges are commonly followed by shame and/or purging.

For many of these individuals, however, their eating is not the only area of their life that is out-of-control. Persistent problems with attention, concentration and focus coupled with disorganization and an inability to plan ahead wreak havoc in their daily lives and relationships. These symptoms also significantly contributed to continued disordered eating patterns. As many of these individuals were more carefully evaluated, it became clear that the incidence of undiagnosed ADD was very high in this group.

The ADD/disordered eating connection is not difficult to understand. Healthy eating habits require organization and planning ahead – skills that are typically lacking in those with ADD. Good eating habits also require awareness of hunger and when one feels full. Many individuals with ADD report that they skip meals because they were busy and distracted; these same individuals often report that later in the day their hunger becomes so intense that they swing in the opposite direction, overeating well beyond the point of reasonable intake because they can't stop and don't have the sense of feeling full. Individuals with ADD also report that they eat for many other reasons besides hunger – including boredom, need for stimulation, anger, sadness, reward, simple food availability, and stress relief. It is easy to understand how consistent self-regulation, which is a well-documented difficulty for those with ADD, can lead to patterns of chronic bingeing. The tendencies of people with ADD not to plan, to grab food on the run, or to forget to eat altogether is, unfortunately, a perfect set-up for later hunger and out-of-control, impulsive binge eating.

Despite the difficulties they suffer in their daily lives, these individuals spend a good deal of time lying to themselves by denying that they have a problem or making promises to change. Both lies insidiously prevent these individuals from making the changes needed in their lives. They deny or hide their binge eating and symptoms of ADD from others and lie to themselves that things will change. In his book, *Too Soon Old, Too Late Smart*, Dr. Gordon Livingston addresses this topic and sums it up as follows, “The most damaging lies we tell ourselves involve promises...they are a distraction from the serious task of evaluating who we are and what we really want. If we spend our time imagining some ideal of beauty or self-improvement, it drains energy and distracts our attention from more serious and obtainable objectives.”

Becoming aware of the link between ADD and eating disorders is often the first step on the road to recovery. However, in order to achieve success and get back in control, the individual with eating disorder/ADD must develop a plan for change. She must stop the lies and change the negative self-talk. Education, motivation, structure and developing a routine will help. But, she must also learn to eat healthy and address the ADD symptoms that sabotage her plans.

It has now been shown that treatment of the ADD symptoms with stimulant medication may not only provide a reduction in the ADD symptoms but also decreases binge eating. Stimulant medications turn on the control centers in the brain that allow individuals with ADD to become more consistent in their ability to self-regulate and resist eating impulses. It's like putting on the brakes in an out-of-control car. While on medication for their ADD, individuals may also be better able to create and follow daily routines and stick to an eating plan. This eating plan, however, must take into consideration the poor organizational skills, impulsivity and difficulty planning ahead that characterizes the lives of those with ADD. In order to insure success, the plan must be carefully drawn with a "Plan B" spelled out beforehand.

***In Pieces of the Puzzle: The Link between Eating Disorders and ADD***, Dr. Dukarm has shown that she not only understands how these pieces fit together, but also how they influence each other and affect outcomes. The treatment program she delineates not only offers suggestions to help individuals with eating disorders/ADD make the changes needed today, but also offers hope for a future where they will again be in control.

Patricia O. Quinn, M.D.  
*National Center for Girls and Women with ADD*  
*Washington DC*