

A PREFACE TO THE 2ND EDITION

I struggled over the decision to update the first edition of *Answers to Anorexia*, a passion project written in 2009 that was finally published in 2010. Since then, the psychiatric landscape has darkened: rates of eating disorders have increased steadily, and the average age of eating disorder onset continues to decrease.

It was a heartfelt letter, sent to me from the parent of a former patient who recently graduated college after a long and painful struggle with anorexia nervosa, that inspired me to gather the new research supporting a biologically based treatment model.

Anorexia nervosa is a life-threatening illness, and the current medical model for anorexia treatment is in desperate need of additional evidence-based strategies that will lead to better outcomes. *Answers to Anorexia* offers simple therapies that are accessible to anyone. Therapies focused on one of the most significant and neglected interventions in the field of modern psychiatry: nutritional therapy.

The 2010 edition of *Answers to Anorexia* represented my reaction—refined over what was, at the time, six years of direct clinical care for hospitalized eating disorder patients—to the systematic neglect of effective nutritional therapies by traditional psychiatry. It coalesced my views of what I perceived as being a highly disjointed and inadequate therapeutic model. One marred by lack of research, lack of focus on the root causes of anorexia, and a dearth of evidence-based treatments.

Then, as now, the treatment model for anorexia nervosa was associated with low rates of recovery and high rates of patient relapse. Many relapse cases found their way to my practice after repeat treatment failures, coming to me as a last resort and hoping that I might offer them something—anything—that would set them along a different path, one that would lead to real recovery and sustained health.

Instead of investigating the differences between the thousands of patients I treated, I looked for similarities. The one thread linking every single eating disorder case? Nutrition. Or, more accurately, lack of nutrition. Every patient who has ever been admitted to an eating disorder treatment program has been

malnourished in some way. Depressed or not, happy family or not, and regardless of prior medical history, psychiatric history, eating disorder type, or any other factor, each and every patient has arrived in a state of profound biochemical imbalance, with a wide range of physiological maladies and nutritional deficiencies.

In the years that have passed since the publication of the first edition, my career has evolved along a dualistic track. I have pursued my passion for educating healthcare providers about nutritional science and the importance of functional and integrative medicine approaches to the treatment of mental illness. I am also the chief medical officer of Walden Behavioral Care, a consortium of eating disorder specialty-treatment centers. Over the eighteen years at Walden, during which I have served in this capacity, I have treated thousands of patients. They have ranged in age from ten to eighty and spanned all levels of care, from eating disorder patients too frail to get out of bed to outpatients walking through the clinic doors searching for answers, health, and hope.

I continue to strive to educate parents, patients, and clinicians as to the role of nutrition in psychiatry and the role nutritional supplementation can play in the treatment of psychiatric illness. It is not always easy; too many mainstream treatment models still fail to recognize nutritional imbalances as being factors in mental illness.

This second edition of *Answers to Anorexia* updates and expands upon concepts and information presented in the first. The body of scientific research has been expanded significantly over the last decade, and it continues, overwhelmingly, to corroborate the established relationship between malnutrition and brain function across every major psychiatric illness. From depression, ADHD, and schizophrenia to eating disorders, anxiety, and suicide prevention, scientific evidence confirms robust associations between discrete nutritional imbalances and the emergence, entrenchment, and/or symptomatic severity of psychiatric presentations.

As with the first edition, it is my intent and hope that this book will not only educate but also serve to spark much-needed change. While research has indeed progressed, the application of new research has lagged, and psychiatry continues to adhere, by and large, to older treatment models for anorexia. So, too, does the nutritional science education provided to today's doctors and psychiatrists remain woefully lacking: many programs offer medical students and psychiatry residents just a few precious hours of training in nutrition or eating disorders. One or two hours of training is NOT sufficient to prepare a

physician to treat anorexia nervosa, an illness with the highest rate of mortality and relapse in psychiatry.

It is difficult to overstate the gravity of the current situation regarding anorexia nervosa. The current mainstream treatment model for anorexia lacks any FDA-approved medication and is devoid of therapeutic strategies that have been shown to be consistently effective. There is no “gold standard” model, no “magic bullet” fix, no effective medicines. Instead, we have an approach that accounts for psychology but dismisses biology completely . . . until the physical complications associated with anorexia become so severe that they constitute a medical emergency. This same approach is associated with a relapse rate approaching fifty percent and a fatality rate that far exceeds those of other psychiatric disorders.¹⁻³ This is not success, and in no way should this be accepted as “the best we can do.”

This 2021 edition of *Answers to Anorexia* is a rebuttal to the current status quo, and it is based on empirical scientific research and decades of direct clinical experience. It explores concepts that to most readers, whether they be patients, parents, or clinicians, will appear obvious: if we address the profound nutritional deficiencies associated with chronic self-starvation, psychotherapy and pharmaceutical interventions will become more effective. Psychotherapy is less likely to be successful for patients whose psychological and physical health has been negatively impacted by chronic malnutrition.

The model presented in this book does not omit traditional therapies but rather adds to them, expanding the treatment paradigm such that it addresses imbalances at all levels.

Correct biochemistry, heal the brain and body, then support the mind and spirit through psychotherapy. This model, in tandem with already-existing treatment strategies, comprises an approach that is comprehensive, balanced, and (most importantly) successful.

Distinguished professor and scientist Dr. Cynthia Bulik has led groundbreaking research into the genetic underpinnings of anorexia, and her team’s latest findings are so significant that Dr. Bulik now describes anorexia as a “metabo-psychiatric disorder.”⁴ Or, put another way, as a disorder that lies somewhere within the very intersection that links biology and psychology. As you will read in *Answers to Anorexia*, I have been advocating for this model to be incorporated into standard clinical practice for over ten years.

Answers to Anorexia is a starting point from which patients, their families and loved ones, and health professionals can move in a forward direction and along a path illuminated by science. It is a distillation rather than an exhaustive, comprehensive resource; for every chapter that follows, there is extensive research literature that could not be included due to space limitations.

For many parents, an eating disorder diagnosis brings frustration, along with countless challenges encountered while trying to find appropriate care from the medical community. I know how much you have struggled. Chances are that this book is not a first resort or a second, or even a third, but rather “yet another” new attempt to address a serious challenge that you have been facing for a long time. It is likely that you have consulted a string of doctors, psychiatrists, nutritionists, and therapists, and have been forced to convince health insurance representatives to support the various treatments they’ve recommended for your child. You’ve sacrificed tremendously and at great personal expense. On top of this, your child suffers from a disorder that obliterates normalcy, uproots stability, and embodies a profound distrust of the very health professionals from whom you’ve sought help . . . and she or he is probably not interested in pursuing any sort of treatment, particularly treatment that revolves around the core anorexia fear of gaining weight.

I have met with thousands of parents over the years, and various aspects of their stories are quite similar. Many arrive in my office as a last resort, having exhausted nearly every other option and overwhelmed with a sense of hopelessness. Most are also overwhelmed with profound fear for their child’s health and life.

I understand. Anorexia does not just affect the sufferer but also everyone else in the sufferer’s sphere of connection or influence.

There are no magic bullets in psychiatry and no guarantees in life, but I promise you: there IS hope for your child, for you, for your family. This book opens a doorway to another path towards healing. While it is impossible to predict how any one individual patient will or will not respond to any course of treatment, I can say with confidence that implementing a nutritional approach in combination with other therapies offers a much higher chance of treatment success than standard therapies alone. I have treated thousands of patients with this approach, and I have witnessed both their recoveries and their achievement of freedom from the constant intrusive thoughts that previously derailed their lives.

A lasting recovery from anorexia is possible.

This book includes recommendations for basic nutritional supplementation strategies that can help you or your child with anorexia. Think of this book as a roadmap: it describes a route and pinpoints destinations along that route, and as such can guide you as you pursue your personal journey or as a facilitator of your child's recovery.

You will find more information and guidance on the Answers to Anorexia website (www.answerstoanorexia.com). The site is an educational and support resource for patients, their families and loved ones, caretakers and physicians, and anyone else who is interested in learning more about a biopsychiatric model for the treatment and prevention of anorexia nervosa. Offering articles, updates, blogs, survivor stories, courses, and more, the Answers to Anorexia website is intended to educate, provide ongoing support, and invite an ongoing, open-minded discourse about current models for eating disorder treatment.

I applaud your bravery and encourage you to read ahead with an open mind and heart. There is hope.

When it comes to the treatment of anorexia nervosa, we can do better. It is my most sincere hope that this book serves as a launch point towards "better" for all.

Yours in health,
James M. Greenblatt, MD

Chief Medical Officer, Walden Behavioral Care
Founder, Medical Director, Psychiatry Redefined

www.psychiatryredefined.org