Dr. Katie Rickel of Structure House shares about "Chronic Pain and Food Addiction" Twitter Chat Script May 27, 2015

EDH: Welcome to today's EDHchat! We are excited to have you all with us! We would like to start by welcoming our special guest, Dr. Katie Rickel.

Dr. Rickel is a licensed clinical psychologist at Structure House here to share her expertise with us. Thank you for joining us today Dr. Rickel!

EDH: Please tell us a little about yourself and your background.

Dr. Katie Rickel: I am a licensed clinical psychologist with expertise in weight management and in other health behaviors, including management of chronic pain.

I had always thought I would become a physician it was during the process of interviewing for a position at medical school that it became clear to me that clinical health psychology would be a much better fit

I am fascinated by the cognitive and emotional facets of whether or not people engage in certain health behaviors like nutritious eating, regular exercise, and adherence to medication regimens.

I knew that, as a psychologist, I would have more time & creativity to address my patients' unique barriers to behavioral change.

Structure House, where I work, is a residential weight management facility in Durham, North Carolina. Patients come from all over the world to stay on our campus (where we have on-site housing)

For anywhere from 1 week to 6 months to learn how to change their lifestyles in a way to facilitate healthy weight management efforts.

We have a multi-disciplinary treatment staff, comprised of dieticians, exercise physiologists, nurses, and therapists. I serve as a staff therapist, and I provide individual and group psychotherapy – as well as teach psychoeducational classes – on campus.

I do phone and web-based individual and group sessions for patients who have completed the on-campus program and are adjusting to their lives back at home. I also

do phone and web-based individual and group sessions for patients who have completed the on-campus program.

EDH: What are the symptoms of chronic pain?

Dr. Katie Rickel: There is some debate about how to define chronic pain. Many researchers and practitioners agree that chronic persists longer than six months. Almost all will characterize chronic pain as pain that has persisted past the point of expected healing.

Chronic pain comes in many varieties – stabbing, throbbing, aching; intermittent, persistent; mild, intense. It will sometimes begin as a result of an injury or illness, but oftentimes it arises without a clear etiology. Chronic pain, unlike more acute pain that resolves within days or weeks, tends to cause more emotional and lifestyle challenges because of its duration and its unpredictability.

Oftentimes, individuals with chronic pain will develop other psychological symptoms like <u>depression</u> and/or anxiety. As they are forced to adjust to the changes that the chronic pain has caused in their lives.

EDH: How can food become a means of coping with chronic pain?

Dr. Katie Rickel: Because chronic pain can persist for so long, individuals dealing with chronic pain commonly develop feelings of sadness or despair.

This may be about the ways in which they are forced to change their lifestyles in order to accommodate their condition. They may no longer be able to engage in activities that used to bring them joy (e.g., a woman may have to stop knitting if she develops arthritis in her hands; a runner may have to stop running if he develops plantar fasciitis in his feet) they may seek out food and eating as a substitute pleasurable activity.

Food also can be an effective "numbing agent" when we are feeling down or anxious. Many people associate certain foods with comfort and reward. A person with chronic pain may feel as though the only way they can feel good or have a "break" from their pain is through eating.

Unfortunately, folks who use food to deal with chronic pain often unknowingly place themselves in a vicious cycle. Many chronic pain conditions, such as osteoarthritis, actually become worse when an individual gains weight and becomes more sedentary.

Thus, using food and eating as a way to cope with pain often creates more physical (and emotional) pain than they had to begin with. It is then tempting to turn back to food to escape, more food is used, more weight is gained, and the cycle continues.

EDH: What are signs that may indicate that a food addiction has developed?

Dr. Katie Rickel: It is likely that a <u>food addiction</u> has developed when an individual relies excessively, and often exclusively, on food to cope with distress. Everyone, on some level, uses food occasionally to experience pleasure and to provide distraction. Using food occasionally in these ways will usually not result in weight gain, decreases in self-esteem, or feelings of hopelessness or helplessness.

When food is the only the tool in the proverbial tool-box of coping strategies, people often feel as though they have no other ways to feel better than to eat. This leads to taking in more calories than the body can use and ultimately leads to weight gain that can negatively affect one's physical and psychological health.

Folks with a food addiction often feel a loss of control around food they feel very guilty and shameful about their eating behaviors.

Binge Eating Disorder was recently recognized as psychological condition in the newest version of the diagnostic manual. Psychologists use this to diagnose psychological disorders, and it may be the closest "label" we have for said "food addiction".

<u>Binge Eating Disorder</u> is diagnosed when an individual is frequently eating large amounts of food within a short period of time and feels out of control while the eating is happening.

People usually engage in this eating behavior even when they are not hungry. They eat past the point of physical discomfort, they may eat more rapidly than usual. They usually are eating alone, and they usually feel guilt and shame related to the eating episode.

EDH: What are effective forms of treatment for food addiction and pain management?

Dr. Katie Rickel: While there are distinct treatments for both, treatment for food addiction and pain management do have some overlap. For one, individuals with food addiction and/or chronic pain usually benefit from adopting a regular program of exercise. If the chronic pain condition renders some kinds of exercise uncomfortable or difficult, there are usually modifications that can be made.

Exercising in a pool (pool walking, water aerobics, swimming) is often a safe and effective form of exercise for folks with chronic joint pain. When appropriate, walking can also be an accessible, effective, and enjoyable kind of exercise for people at a variety of fitness levels.

Exercise can be helpful for weight loss (when necessary) but it can also be a powerful anti-depressant, stress management tactic, energy-producer, and self-confidence builder.

People who struggle with food addiction and chronic pain will benefit from discovering and engaging in pleasant activities that do not involve food. Socializing, creative expression, physical activities, spectator appreciation intellectual stimulation, and relaxation are all categories of pastimes that do not necessarily involve food.

Engaging in these kinds of activities can provide a sort of distraction, comfort, stimulation, or entertainment that food may have provided. As with any new interest or activity, there will likely be some work to organize and plan for participation in these, but the pay-off can be enormous.

EDH: What programs are available at Structure House for pain management and food addiction?

Dr. Katie Rickel: Many patients at Structure House struggle with chronic pain issues including osteoarthritis, fibromyalgia, diabetic nerve pain, and migraine headaches. As aforementioned, many aspects of a behavioral weight loss program will likely aid someone learning to better deal with chronic pain.

For instance, eating nutritious foods at regular intervals and in appropriate quantities will not only assist in weight loss, but this will also help patients regulate their energy levels.

It is important for patients with chronic pain to experience an even energy level throughout the day so they are not tempted to "overdo" when they are feeling especially energetic and then "underdo" as a result of feeling lethargic.

Developing a regular program of exercise is also a crucial part of any good weight management or pain management program. Structure House offers massage therapy as well as other forms of bodywork that might benefit chronic pain sufferers.

Individuals have social support when living in a community with others who have similar challenges and barriers. Many factors inherent in the standard program will likely help treat both sets of symptoms.

Several clinical psychologists at Structure House – including myself – have had specific training in behavioral pain management program. We can work with patients individually to develop a coping tool-box that addresses their specific and unique pain concerns. These sessions might involve relaxation training, guided imagery, help with

activity pacing, and relapse prevention plans.

Patients can purchase a package of sessions to focus specifically on these behavioral pain treatments. Structure House has close relationships with several pain management centers in the area, we often refer out for more specialized diagnostic or treatment services when appropriate.

EDH: What encouragement would you offer to the individual who is struggling with chronic pain and food addiction?

Dr. Katie Rickel: To individuals struggling with chronic pain and food addiction, I would provide reassurance that they are not alone in their struggles.

As mentioned, these two plights are often found within the same individual because a vicious cycle can easily develop when one uses food to cope with the challenges of living in chronic pain.

This cycle, however, provides many options for intervention. Addressing pain issues and food addiction simultaneously, as we do at Structure House, is optimal. Many of the same treatment interventions will be effective in ameliorating both problems.

However, it is not unreasonable to believe that learning to cope well with chronic pain may help ease the need to go to food, and therefore weaken the food addiction.

Overcoming a food addiction may build the confidence of an individual so much he or she might be willing to try strategies to cope with pain that he or she might have brushed off previously.

So, whether treated simultaneously or sequentially, there is hope.

EDH: Thank you Dr. Rickel for sharing this great insight about chronic pain and food addiction. If you or a loved one has been suffering, we hope this information brings you hope.

For more information about Dr. Rickel visit www.structurehouse.crchealth.com.

Thank you to everyone who participated in our Twitter Chat today! And thank you for the great insight Dr. Katie Rickel.

If you are in need of resources for an eating disorder, visit our website at <u>Eating</u> <u>Disorder Hope</u>