

# REGAINING YOUR SELF

## Breaking Free from the Eating Disorder Identity A Bold New Approach

Ira M. Sacker, M.D.  
with Sheila Buff

---

### *A conversation with Dr. Ira M. Sacker*

**Q: What prompted you to write *Regaining Your Self*?**

**A:** My first book, *Dying to Be Thin*, came out twenty years ago. Since that time I've seen the epidemic of eating disorders increase—and the face of eating disorders change. I wanted to write a new book that reflected these changes, and that would offer hope to the millions of people affected by and struggling with eating disorders.

**Q: Are eating disorders on the rise?**

**A:** Absolutely. According to the National Eating Disorder Association, approximately 10 million women and 1 million men struggle with anorexia and bulimia. Among female college students, for instance, the rate of bulimia is now somewhere between 19 and 30%. And approximately 25 million people struggle with binge eating disorder.

**Q: Why do so many people suffer from eating disorders these days?**

**A:** That's a good question, and a very tough one to answer. I think anxiety plays a big role. An overpowering feeling of agitation can lead some people to create rigid rules and engage in extreme behavior, especially with regard to food and weight. An eating disorder is an outlet that can replace anxiety by providing a focus, which in turn creates purpose and ultimately a new identity. Not only does this new found obsession become a place to avoid anxiety, it provides a meaningful structure for a distorted identity. In a culture such as ours where image and identity seem to be interchangeable, the eating disorder identity may, unfortunately, even regard the disorder as an accomplishment.

**Q: What do you mean by the “eating disorder identity?”**

We all want an identity that gives us a strong sense of self, something that distinguishes us from others and reflects who we really are. But when that sense of self is vulnerable, we may feel compelled to seek an identity based on the approval of others. That can be very dangerous. Because the individual with an eating disorder is adept at picking up cues from the outside world, the search for self may be defined by outside approval rather than by the individual’s interests, passions, and expectations. In a culture such as ours where so much focus is placed on looking a certain way, this search for approval—actually a search for an approved identity—can morph into an extreme, such as an eating disorder.

**Q: Can you tell if someone has an eating disorder just by looking?**

**A:** If only it were that easy. The tabloids are full of pictures of rail thin celebrities—men and women. But it’s important for people to understand that you don’t have to be thin to have an eating disorder. While someone with anorexia is significantly underweight, the individual with bulimia usually maintains a normal weight range. Likewise the person with binge eating disorder may be overweight, perhaps significantly so.

**Q: You say the face of eating disorders has changed? How so?**

**A:** For a very long time it was thought that eating disorders—anorexia and bulimia in particular—were the exclusive property of privileged adolescent girls. Nothing could be further from the truth. Today I treat men, middle-aged women, and children as young as five. My patients cut across all spectrums. It’s important that we understand that eating disorders can affect anyone: any age, any gender, any ethnicity, any religion.

**Q: Why do you think there are more eating disorders affecting women in midlife?**

**A:** Contrary to what many people think, these women are typically not relapsing back into an illness they had when they were younger. In fact, most have had no previous history and develop their disorder as adults, often over the age of forty. In almost every case these women are facing a time of major transition in their lives. It may be that their role as a mother is changing as their children grow up and leave; or it may be that their role as spouse is changing as they face divorce or the death of a loved one. It’s back to the idea of a conflicted identity, I’m afraid; and of course the emphasis on youth doesn’t help, with all the pressure on women to look young, thin, and beautiful.

**Q: Can eating disorders be cured?**

**A:** We use the term recovery—not cure—because the underlying eating-disorder identity never fully goes away. This is a disease that has great power, so the challenge is to show the person struggling with an eating disorder that there can be more power in recovery than in the illness. In other words, recovery is about much more than just maintaining a healthy weight—it’s about regaining your self.

**Q: Does your book offer anything to the families and friends of people with eating disorders?**

**A:** *Regaining Your Self* follows the healing process not just from the perspective of the patient, but also from the patient’s community of family members, friends, teachers, and others. It’s important that the individual suffering from an eating disorder feel understood and supported, and it’s important that those who care for the person with an eating disorder know that they are not alone.

**Q: You provide a lot of case studies in the book, but you don’t give away a lot of details about your patients, such as how much they weigh, what they eat, or how they may have fooled the scale. Why is that?**

**A:** It was very important for me to offer the reader a safe place. I wanted to present accurate portrayals of eating disorders so that readers may find hope in these pages, to see that there is indeed a way out. But there are difficulties, as depictions of these disorders may sometimes prove to be triggers to the very individuals who are struggling against them. That’s why I have avoided the number game, and the use of specifics such as pounds, calories, weight loss, weight gain, and so on.

**Q: What do you want people to take away from *Regaining Your Self*?**

**A:** That we all have to take eating disorders much more seriously than we do. People need to realize that eating disorders have the highest mortality rate of any mental illness—20%. This is not an illness of entitlement, it’s not an illness that goes away easily, and it’s an illness that does not discriminate. The good news is that there is not only hope, there’s really a method that can help. I want individuals to regain their identities not only through my voice, but also through all the other voices that are part of this book. With *Regaining Your Self*, I hope to give a voice to the voiceless.