

**Glenn Livingston, Wendy Hendry, and
Kathryn Hansen Compare and Contrast
Their Approach to Binge Eating**
*(Three Authors Who Believe in the
Pig/Brat/Lower Brain Concept)*

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- Katherine Hansen – “Brain Over Binge” www.BrainOverBinge.com
- Wendy Hendry – “W.A.I.T. Loss” www.WendyHendry.com

Dr. Glenn: Hey, my name is Glenn Livingston from Never Binge Again. And I am here with two people you might be surprised to hear me interviewing and discussing things with, but they're two of my favorite authors in the binge eating and overeating space. And I will let each of them introduce themselves in turn. So, Wendy, would you like to go first?

Wendy: Sure. So, my name is Wendy Hendry and I am the author of a book called W.A.I.T.loss. W.A.I.T. stands for "What Am I Thinking?" And I'm so grateful to be working with Glenn and with Kathryn because personally, I couldn't have overcome my addiction without both of their book. Each one gave me something that I needed. So, I'm just glad to be here.



Dr. Glenn: And Kathryn?

Kathryn: Yeah, thanks Glenn and thanks Wendy. I'm so glad to be here too. I'm Kathryn Hansen. I've wrote the books Brain Over Binge and the Brain Over Binge Recovery Guide. The first book is basically my story of how I overcame binge eating and bulimia. And the second book is more of a self-help book to help you apply these concepts in your own life. I teach basically an alternative approach to binge eating, viewing binge eating in terms of the brain and really trying to simplify recovery and giving people a new perspective and a more simple way to overcome it.

Dr. Glenn: And I think that as we go through this conversation, you'll see there is a lot of overlap in our book, but there's also a lot of ways that were complimentary. And I found out about Kathryn and Wendy from my readers. They said, "You know, I read your book, but I also read these books." And I started to find that the people who were doing all three were doing better. And Wendy is actually the most proactive of all, as in, connecting us together and saying, "Hey, we should work together a little bit because if we can help even one more person stop binge eating, then we will all further our personal missions."

So with that, I would like to come start the conversation. One of the things that we did was we talked to each other about the most common questions and concerns that people had after reading our books. And probably the first one had to do with restriction or over restriction. And I thought that we should all talk about where we each stood on that, what does it really mean and how do we reflect the niche of our books. Who wants to go first?

Wendy: I can go first.



Dr. Glenn: Sure.

Wendy: This is what worked for me. And it was sort of a combination of the two of you, actually. So, it will be interesting to put all three things together. I sort of took a long time to find my groove. I mean, I've been bingeing for about 35 years. And I found Kathryn's book first. And so her concept of the lower brain and the higher brain, it rocked my world. I've never heard that before. I just thought my bingeing was a disease and I often use that as the excuse to binge.

And so I started working with that lower brain and higher brain and trying to listen, but I didn't stop bingeing right away like Kathryn did. Kathryn was able to recognize that -- now that she'll tell her story, but that's not what happened to me. I read her book and I did start hearing that lower brain, but I still just didn't necessarily had control. I had to find my groove. And so I decided that restriction wasn't working for me because it just made me upset with whatever I was trying to restrict. And I could go a few days, but then that was it, I would end up bingeing again.

And so, I started playing a game with myself where I would tell myself that I could have whatever I wanted, but first I was going to go put a little laundry in or walk outside and get the mail. I did whatever I needed to do to distract myself, but in my mind, I wasn't restricting that I did do so much better when I didn't consciously give myself up by the sugar. I'm just not somebody that can have one bite of something very easily. It takes a lot of mindfulness less than I usually have to be able to stop. So, playing that game really helps.



So, I sort of did restrict, but I didn't -- less restricting, if that makes sense. And one of the things, I think, that helped me the most -- and this I got from you, Glenn, I loved your book -- is that I just didn't beat myself up when I did. I would tell myself that it was normal. And that was coming from a conversation you and I had too. That has helped so much, tell myself that it's okay, it's just normal to overeat sometimes. And it makes it so that it really doesn't even ever end up being a binge. It might be overeating a little bit, but it's not binge, if that makes sense.

Dr. Glenn: Wendy, what I tell people -- this is something I first heard from Carol Munter, who's got a completely different philosophy about this. But what was really a pivotal insight for me was that it's almost impossible to binge if you're not yelling at yourself while you do it. And as I came to understand -- everybody knows that my book kind of separates the lower brain from the upper brain also. As a matter of fact, all of us does; we just call it different things. And I call mine the pig, which some people hate, so I tell them to call it their inner slacker or it could be b-i-t-c-h, whatever they want to call it. But I discovered that the purpose of the pig's yelling at you and degrading your character and saying that you can't help yourself and you'll never going to get over this and all that, the whole purpose of that is to binge. And really, the willingness to get up repeatedly as a sign of strength, not a sign of failure, but the pig will say, "You failed, you failed, you failed, you'll never going to get this."

And so I tell people that there are two different mindsets required. There's a mindset of commitment, which is really you want a 100 percent focus on the goal and total separation from that lower brain, so you can purge your mind of doubt and uncertainty. But there's a simultaneous kind of paradoxical understanding that if you do happen



to make a mistake, then you're going to take it seriously, but you're not going to allow the pig to degrade you and make it worst by beating you up. I just wanted to clarify that.

What I wanted to say about restriction, I really believe that there's some type of evolutionary mechanism which triggers inside binge eaters the desire to hoard calories and food if they had experienced the possibility of a famine. Virtually, everybody see a very strong correlation with the level of severity of people's binges and in terms of frequency and volume, they see a very strong correlation with how much they have seriously dieted in the past or gone through periods of restriction. And I talked to people who'll say, "Well, I can lose 4 pounds a week and it's really a high." And I go, "Uh-oh, that's going to be trouble."

So, even though my book, people will say is the harshest book, in as much as I really focus on clarifying your food rules and figuring out what's on your nevers, conditionals, sometimes and always, even though I'm kind of a stickler for saying, "Well, if you don't know exactly where you're going, then you'll probably going to wind up some place else." I also don't mean for people to use that clarity to develop a restrictive diet. So, if you kind of combine the understanding of the need for clarity with the dual mindset before and after a binge, then you should understand that I'm looking for a nutritionally complete, satisfying, enjoyable food plan that people can stay on indefinitely. Anyway, Kathryn, where do you stand on all this?

Kathryn: Yeah. I agree with what both of you said, especially with the survival reaction that you talked about. I believe -- I teach in my book that when you are strict calories, which is purposely eating less than your body requires, it creates that survival reaction. And that happens

Interviewer: he more primitive parts of your brain, which you can call



the animal brain -- I call it the lower brain. It's just when food is restricted, it becomes much more appealing. Cravings are heightened. We start to focus on food more than we ever did. Before dieting, I remember when I started restricting, I have never thought about food so much. So, it's just a normal part of my life. And then suddenly, it was all I wanted to do. And that made me feel crazy.

And anyone who diets, even if you don't binge, it can create overeating episodes or just like food obsessions that are stressful and that make you feel out of control. But in people who are susceptible, binge eating results, and that really can destroy people's lives. Looking at it from the standpoint of it was caused by calorie restriction, really can simplify things for people and make them realize that they're not crazy and that this is something that the brain is doing to protect them. It perceives famine when there really isn't a famine, there's actually food everywhere. And we're lucky enough to live in this society that we have food, but it creates this issue when you're trying to restrict and yet food is everywhere.

So, as far as what you mentioned about food rules and coming up with a plan that's pleasurable and satisfying, I completely agree with that because some people will create too many restrictive food rules. And even if it's intended to be healthy, if it creates a lot of obsession, a lot of stress, it can really lead to a rebellious mindset and a lot of stress. You want to make sure your food is satisfying and doesn't feel like you're just banning foods just for the sake of weight loss. When you are choosing to eat healthy, it's best to make sure that it's a choice and when you feel good about and it's going to add to your life instead of restricting it.



Dr. Glenn: Thank you, Kathryn. I love the way you said that -- and Wendy. But can we talk a little bit more about a practical basis about when your clients fight you on this. There is a very strong desire to restrict because the inner pig is saying, "Oh, you look horrible and you've got to lose weight." "Your life cannot possibly start until you lose 40 pounds or 20 pounds or what it is," and, "It's intolerable to do this slowly." How do you deal with that?

Wendy: Because this happens a lot with my clients, especially the ones that need to lose weight, like diabetics, people with health issues that need to lose weight quick, I don't mind helping them with some kind of restrictive nutrition plan, when there's a health issue, one kind of trumps the other. But as soon as they do get to that healthy weight or as soon as I see that diet mentality start to kick in and they get into that binge starve [inaudible 00:09:54], then any restriction comes off the table. And I think it's important at that point -- and this is what I tell them, to just be okay with where you are. Because if you're eating a healthy diet, it's because you're only eating a healthy diet 90 percent of the time, you're going to eventually get to a healthy weight. It's just going to happen if you follow the good health principles.

But if they stay in that diet mentality, it just gets worst and worst and worst. That's why I always say, "I dieted my way up to 200 pounds." If I had never dieted before, I would have never gotten into that bad cycle.

Dr. Glenn: Exactly. Kathryn, how about you? What do you do with people on a more practical basis to slow them down and prevent them from restricting?



Kathryn: It can be difficult because people do have this strong desire to lose weight, but the way I try to explain it to people to encourage them to eat enough, I always try to encourage people to eat enough to nourish their body. And the way I try to sort of convince them of that is to help them realize that if you're eating enough and you're eating healthy and you're nourishing your body, it's probably going to end up being less than if you're bingeing plus restricting. Not for everybody, but like for me personally, my binge eating plus my restrictive eating led to a lot more calories than just a normal diet was. So, just kind of knowing that in a little more of a mathematical way can kind of help people realize, oh wow, eating normally will actually be eating less and healthier. Like I said, it's not the case for everyone, everyone is different, but the main method is just that restricting and keeping yourself in a chronically calorie-deprived state is a losing battle. No one can live that way forever. Even if you initially lose some weight, it's not something you can maintain. The way to maintain your natural, healthy way is to eat well and nourish yourself and have healthy habits and it's really the only way to maintain a healthy weight.

Wendy: I've never [inaudible 00:11:39]. Do you suggest to people that they put their scale away for a while, or do you see keeping tabs on their weight as helpful?

Kathryn: I do think that everyone is a little different. In that area, I think that whatever creates the least stress for you is the most helpful. So, some people really stress out like, not knowing. So, maybe weighing every now and then just to have that knowledge and have that whole not knowing -- it's just whatever creates the least stress. Some people, it creates the stress to weight themselves every day. And there can be weight fluctuations that have no relation to actual gains in body mass. So, there could be fluctuations that are due to other things like water or



different times of the month, women, and it doesn't really mean you're gaining weight. So, to see that number everyday and to see those little fluctuations that really don't mean anything can be stressful. So, I would encourage people to come up with a way to use the scale or not use it at all that feels right for them and that creates the least stress in their life.

Wendy: Yeah, that's really good. Do you do the same thing, Glenn? I don't mean to get us off-track. I just didn't want to forget to ask.

Dr. Glenn: That's okay. I was going to ask you to remind me because I wanted to finish answering the question about restriction, but I'll answer this one first. I think that the problem is that in our natural states, people have difficulty thinking statistically. The scale is just a measurement, but it's a measurement, like Kathryn says, that fluctuates with regards to a lot of short-term variables, so it can obfuscate the weight loss trend, or regain trend for that matter.

However, if you think about Stephen Covey's analogy of a plane flying from New York to Los Angeles, and that plane would not get from New York to Los Angeles if it weren't for the pilots and copilots and even the computers constantly checking the instruments and making constant little adjustments. What I recommend to people if they're inclined to do this, is to choose some regular interval when they can weigh in. But to keep track of that and take notes about what they might have eaten the day before and salt and they're going through their menstrual cycle, et cetera, et cetera, so that they can start to save some of those patterns of short-term fluctuations and actually have a little spreadsheet -- which I could include with this audio. Actually, I have a little spreadsheet that I give them, which will calculate what's called the moving average.



So, in the stock market, there are so many ups and downs due to all these short-term influences, but real technicians, they look at something called the moving average. On January 30th, they'll average from January 1st to January 30th, and on January 31st, they'll average from January 2nd to January 31st. And so, what that does is it kind of mathematically smooths in -- and by the way, Kathryn, I love that you have this mathematical insight for people. It smooths out the trend so that they can actually see what's happening over a longer term sooner.

Some people just still get too stressed out about that. And I've got a whole audio on my site. It will be up soon. It's all about all the different things the pig can say to mess you up like that. And so, really I want people to understand that there is this other way of thinking about the scale, which is going to be incredibly useful because then you can make adjustments on your way from New York to Los Angeles just like the plane does. I certainly wouldn't want to get on a plane where the pilot says, "You know, it really stresses me out to look at those instruments. I'm not going to --" that's my thinking about the scale.

Kathryn: It might be for people who weight loss is a goal, then that's a good way to use it. And some people I work with, weight loss is not -- they just need to stop the binge eating. So, in those cases, maybe putting it away for a while and then using it again if weight loss becomes a goal in the future. I think most of the people you work with, Glenn, is weight loss a goal?

Dr. Glenn: Most of them have weight loss as a goal, but that actually leads me to what I was going to say about how I, on a practical basis, help them to avoid over restriction. I try to make people more aware of the extent to which food has become their mental life. And for those of us who have



binged, or still binge, you know that it just takes over and it's almost like not having a life. It's, what am I going to have next? Did I have too much? How am I going to protect myself? Who's going to stop me? Who's going to see me? It's just all of your mental energy gets driven to that. And I try to make people aware of the pain of that and then I help them understand that that's a bigger problem and it's the first thing that we have to address. And it's much easier to get that off your mind if you develop a plan which is substantial, nutritionally complete, satisfying and wholesome.

And people usually understand that, once they've really talked about the pain of the obsession, then they usually understand that they're willing to kind of back off of their aggressive diet plans. Wendy, did I answer your question well enough?

Wendy: Yeah, perfect. Thank you.

Dr. Glenn: Did either of you want to say anything more about restriction before we move on?

Wendy: You know what? I was thinking about -- I'm just sitting here thinking about your plane analogy. One thing that sort of goes along with that is the plane is never a hundred percent on-track; it's very rarely on the path that it needs to go. And I think it's some crazy number like, only 1 percent of the time is actually on path. It has to keep making corrections. That's a good way for us to think of it too, that we don't need to expect that we're perfectly on track. We keep bringing ourselves back to the path that we need to be on.

Dr. Glenn: That's exactly right. We do have to know, almost with perfection, a where to go list, right? We do have to kind of really carve that --



because you want to fly to Los Angeles, you need to know where Los Angeles is.

Wendy: Yeah. But it's okay to be off a few degrees on your way there as long as you bring it back, so you don't end up in Hawaii somewhere.

Dr. Glenn: Well, that wouldn't be so bad, right?

Wendy: Yeah, Hawaii wouldn't so bad actually.

Kathryn: No, not at all.

Dr. Glenn: It's Alaska that's the problem.

Wendy: Yeah.

Dr. Glenn: Okay, Kathryn, should we move on?

Kathryn: Sure, yeah. That was a great analogy. Thanks for bringing that up, both of you.

Dr. Glenn: Sure. Could we talk just a little bit more about how we understand the lower brain, the lizard brain and its role in binge eating and then we can talk about why it's so important to learn how to recognize and separate from it.

Wendy: Sure. Everything I learned, I learned from your books, especially Kathryn's books. I just will sit here and listen to the masters.

Dr. Glenn: Kathryn's book has a lot more science. I wrote down what really works for me and now it worked for my clients. And it's funny because I do



have a scientific background. I went to a science practitioner. Graduate school, and I thoroughly understand and appreciate the science, but I told myself that I just wanted to get this out and kind of wrote it as an allegory and explained to people how this all works. And I was actually really grateful when I found Kathryn's book after that, that someone has gone for a bit of trouble of putting that altogether. So, maybe we should turn it over to the masters for this.

Kathryn: Well, I appreciate it. And there's definitely a use for both the scientific perspective, for putting it in terms that are more useful or that people can really connect with. So, I'm very grateful that you wrote your book as well. I actually learned about it just a couple months ago, I guess. And it's just amazing to see that the similarities between how we're teaching people. And as far as understanding the problem, I teach a brain-based angle. And I do talk about the science, but I really don't believe that it's all that necessary. I mean, it's good to have a background and understanding of it, but you don't have to know the details of the neurons in your brain halfway. You just don't need it. You just need to know that there's a habit that's been created in your lower primal brain centers, but that you and your higher brain -- and this is the prefrontal cortex, the part of your brain that controls your voluntary muscles that really just allows you to have control and to not act on every impulse that you have, that that can override this habit.

And that's like the very basics of it. And Glenn, in your language, the lower brain is the pig and in mind, it's the lower brain and the higher brain. And the higher brain is you. That's the part of you. And so, it doesn't need to get overly scientific at all.

Dr. Glenn: In Wendy's language, the lower brain is the brat.

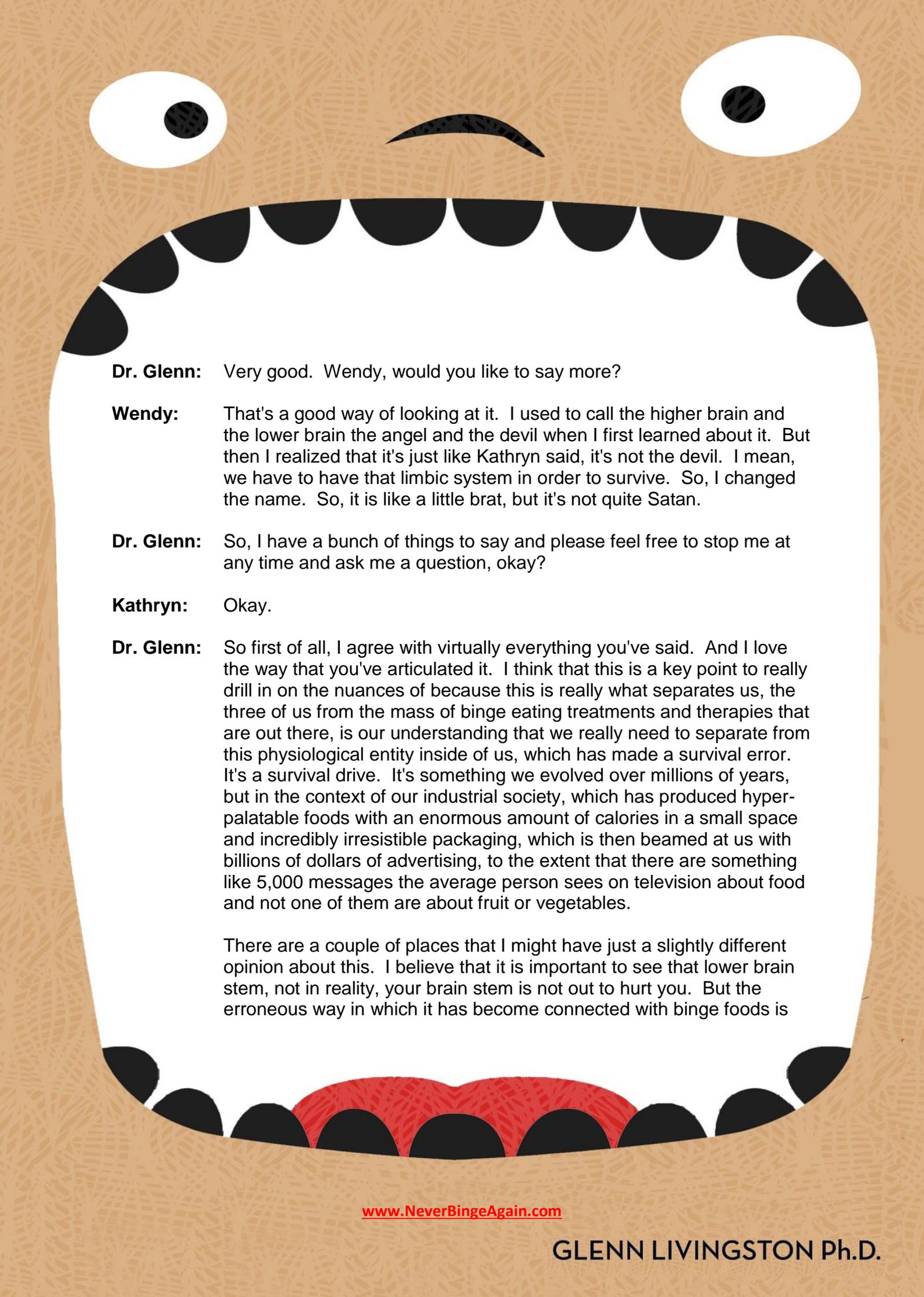


Kathryn:

And that's the perfect explanation for it because that's how it acts most of the time. What really happens in this habit, is that the lower brain gets wired as if binge eating is as necessary for survival as oxygen or as water. And if you don't understand what's going on, it really makes you feel completely out of control. It makes you think you need it. It makes you think that you're going to die if you do not binge. To anyone who hasn't experienced this, it's very hard to explain, but anyone who has, it needs no explanation.

And what happens is that every time you want to binge, you have these incredible urges to binge. And in my book, I talk about an urge being any thought, feeling or physical sensation that encourages binge eating. The brain wants to have its condition. It's just sending out these urges an automatic way. And it's just trying to maintain the habit because it's been taught that you need it. In my opinion, it doesn't really have malice against you, it just is doing what it's been taught to do. And what it's been taught to do is harming you very much, so it's very important to separate from it.

The urges to binge is incredible sensations and feelings and thoughts that leads you to the refrigerator or fast food restaurant. These are urges and these are the only direct cause of binge eating. And in therapies and in different approaches to this that people are traditionally heard, there's lots of causes. There's suppression, anxiety, a need to cope, emotional issues. There's lots of complex causes, but when you boil it down to it, the only thing that causes binge eating is an urge to binge, a desire to binge. You could have any emotion on the planet and not have an urge and you wouldn't binge. So it's really this primal drive, this lower brain driven urges that are the problem and that we need to overcome.



Dr. Glenn: Very good. Wendy, would you like to say more?

Wendy: That's a good way of looking at it. I used to call the higher brain and the lower brain the angel and the devil when I first learned about it. But then I realized that it's just like Kathryn said, it's not the devil. I mean, we have to have that limbic system in order to survive. So, I changed the name. So, it is like a little brat, but it's not quite Satan.

Dr. Glenn: So, I have a bunch of things to say and please feel free to stop me at any time and ask me a question, okay?

Kathryn: Okay.

Dr. Glenn: So first of all, I agree with virtually everything you've said. And I love the way that you've articulated it. I think that this is a key point to really drill in on the nuances of because this is really what separates us, the three of us from the mass of binge eating treatments and therapies that are out there, is our understanding that we really need to separate from this physiological entity inside of us, which has made a survival error. It's a survival drive. It's something we evolved over millions of years, but in the context of our industrial society, which has produced hyper-palatable foods with an enormous amount of calories in a small space and incredibly irresistible packaging, which is then beamed at us with billions of dollars of advertising, to the extent that there are something like 5,000 messages the average person sees on television about food and not one of them are about fruit or vegetables.

There are a couple of places that I might have just a slightly different opinion about this. I believe that it is important to see that lower brain stem, not in reality, your brain stem is not out to hurt you. But the erroneous way in which it has become connected with binge foods is



out to hurt you. I believe that it's important to consider developing a kind of repulsion for it because at the moment of impulse, we don't necessarily have access to our prefrontal cortex and the neocortex as a whole, which is the higher brain where all of our goals and aspirations and ability to love and nurture and think about relationships and all the things that we want to be. Make it even simpler, our lower brain is not where our soul lives. That's not us. That's not where our soul lives. That's kind of a survival remnant from primitive times.

The lower brain sees something in the environment and it says, "Do I eat it? Do I mate with it? Or do I kill it?" " Do I eat it? Do I mate with it? Or do I kill it?" It's very primitive. It's not concerned with love. It's not concerned with self-actualization. It's not concerned with society. It's not concerned with all the people in your life or your children or your pets or the fact that you'd like to live long enough to see your grandchildren get married. It's not concerned about any of that. It's just, eat, kill or mate.

I do like to view that as sociopathic, at least as a thinking technique, so that at the moment of impulse, we feel like a little jolt of repulsion. And that jolt of repulsion gives us the time to jump back up into the part of us that is us and connect with our souls and make the decision not to binge.

Wendy: How do you get your clients to feel that jolt of repulsion? Is it something that just becomes a habit or how do they do that? Because I know a lot of times, stopping a binge is like trying to stop a train. I mean, you just don't even think at all. How do you even have time to stick in that little bit of repulsion?



Dr. Glenn: At the moment you're about to do it, if you haven't done the work before hand, it can be difficult. And by the way, I learned this -- I know all of us have read Rational Recovery by Jack Trimpey and we're overly careful not to infringe any trademark terms and everything like that, but we all have a lot of respect for what he does, particularly with the black and white addictions, alcohol, drugs, cigarettes, the things you can quit for good.

What I do, as I'm interviewing people about what it would mean to them to never binge again, if they have this set of rules and what if they could just stay with it for a full year, how would their life change, what would be different. I go into great detail and I try to get them to emotionally connect to that. And then I ask them to let their pig talk freely for a few moments and tell me all of the reasons that they can't do this, shouldn't do this and won't do this. And as the pig is talking, it becomes abundantly clear that the pig was willing to sacrifice all of his future because people will typically say, "Well, I'll be more confident and I'll be thinner and I'll have more relationships. I'll probably make more money because I'll be less frightened about going out and connecting with people. I would be a better role model for my children. I would be a better partner to my husband. I would just feel like I was operating with more integrity. I feel like I was becoming the person that I was really meant to be."

And inevitably, after you go through that exercise and then you go back to the pig's reasons for having whatever the binge food is, all the pig can say is, "Well, that really tastes good. You're going to miss out on all the fun." And the pig starts to say things that are just obviously without morals because the pig would have you sacrifice that whole, soulful future for a few bites of its slop. So, that's how I do it, Wendy. I anchor them in their soulful future and then I contrast that with what the



pig would have them do and they start to develop that sense of repulsion and disgust.

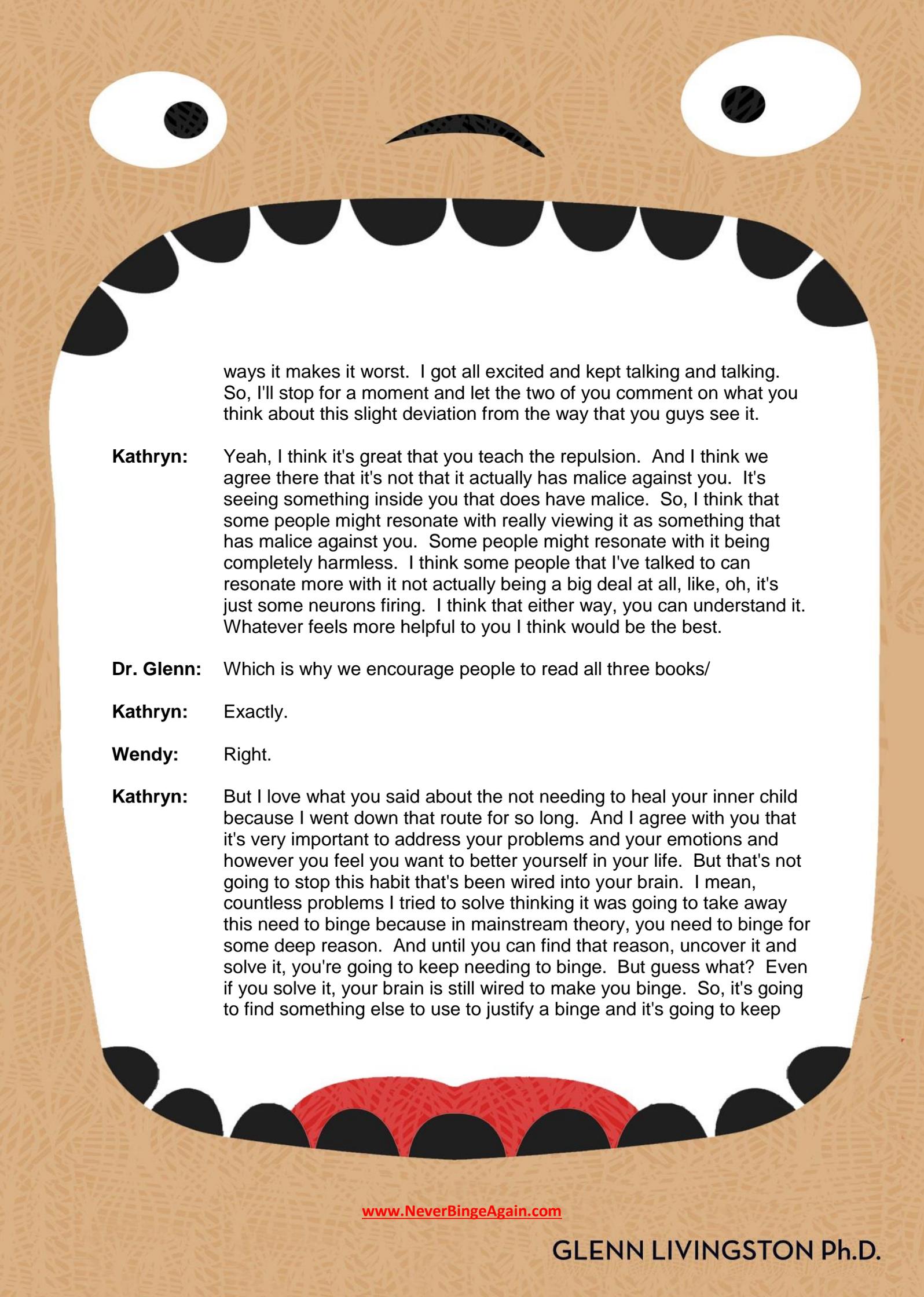
Wendy: Okay. Yeah, I hate it just listening to you.

Dr. Glenn: That's funny. Well, I hate your brat also.

Wendy: Thank you.

Dr. Glenn: So, the last piece I want to say about that is that when you frame it in this context and you really understand that, I think it becomes clear why trying to nurture your inner wounded child doesn't really work for most people because what you're really doing is you're giving the pig an opening. And I think that people should nurture their inner wounded child. I think that food is a really good opportunity to understand things about yourself. I know for example that I've always had a problem with chocolate because I grew up in the Army and my mom was frightened of my dad going to Vietnam and she was really overwhelmed. There was a lot of times when she just handed me a chocolate bar or pointed me to the chocolate Bosco, when I needed a hug or I was crying and I needed some sympathy.

And so I know that I was trained to do that and I learned that about myself a long time before I could stop bingeing. My pig said, "Well, if there must be some other ways that your mama didn't love you and until we can figure that out, we're going to have to keep bingeing, got to fill all those holes first." I've got a lot of compassion for my inner wounded child and everybody else's inner wounded child. And if you want to talk to me as a psychologist and work on your past and how it affects your present, then I can do that. But I'm not going to tell you it's going to stop you from bingeing. As a matter of fact, I think in some



ways it makes it worst. I got all excited and kept talking and talking. So, I'll stop for a moment and let the two of you comment on what you think about this slight deviation from the way that you guys see it.

Kathryn: Yeah, I think it's great that you teach the repulsion. And I think we agree there that it's not that it actually has malice against you. It's seeing something inside you that does have malice. So, I think that some people might resonate with really viewing it as something that has malice against you. Some people might resonate with it being completely harmless. I think some people that I've talked to can resonate more with it not actually being a big deal at all, like, oh, it's just some neurons firing. I think that either way, you can understand it. Whatever feels more helpful to you I think would be the best.

Dr. Glenn: Which is why we encourage people to read all three books/

Kathryn: Exactly.

Wendy: Right.

Kathryn: But I love what you said about the not needing to heal your inner child because I went down that route for so long. And I agree with you that it's very important to address your problems and your emotions and however you feel you want to better yourself in your life. But that's not going to stop this habit that's been wired into your brain. I mean, countless problems I tried to solve thinking it was going to take away this need to binge because in mainstream theory, you need to binge for some deep reason. And until you can find that reason, uncover it and solve it, you're going to keep needing to binge. But guess what? Even if you solve it, your brain is still wired to make you binge. So, it's going to find something else to use to justify a binge and it's going to keep



creating this desire over and over no matter what you solve in the rest of your life.

Wendy: I think it's important listening to all of the excuses that that lower brain gives. It's hard to catch all of them. I mean, I use that as an excuse for a long time. I had a crappy childhood, so I deserve this binge. And this is sort of an entitled little thing, isn't it? I think that it deserves it, but it's sometimes hard catching the tricky excuses that it gives.

Dr. Glenn: Yes. And when you think you've caught them all, it gets busy making up more.

Wendy: Yeah.

Kathryn: Exactly.

Dr. Glenn: That kind of leads to the next topic, which is actually developing a food plan and defining a binge. Talk to me a little bit about it in both of your ideology. How do you do that?

Wendy: You start, Kathryn. I like your story on this.

Kathryn: Okay, sure. Well, as far as defining a food plan and a binge, I try to get people to define the binge first. And binge eating is very subjective. I encourage every person to come up with their own definition of their binge and encourage people to make the distinction between binge eating, which is very problematic, creates the most pain in their life and really feels like a behavior that's completely out of control and is usually in very large quantity. I encourage them to distinguish that behavior from what I call less than ideal eating because everyone sometimes eats in a way that isn't perfect, that isn't the ideal, healthiest way to eat.

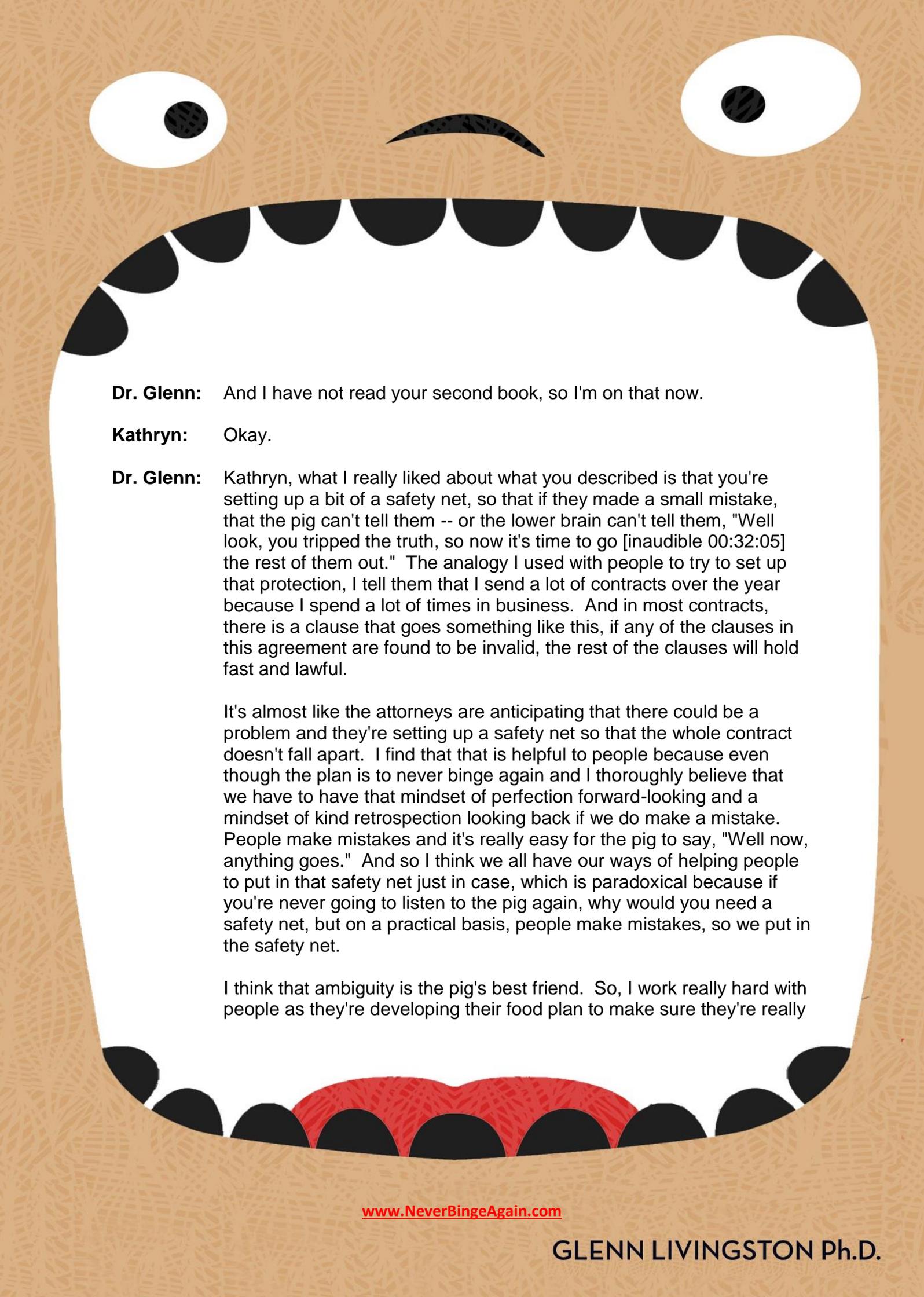


So, I work with a lot of people who come from a strong background of restriction. So, in doing this, I'm trying to separate binge eating, just ways of eating that might not be perfect, but they might really get upset about because they come from that background of wanting to restrict and deprive themselves. So, I really try again to focus on just the binge eating first. I ask people, if you never binged again, what would you never do? Once they can come up with that, like, "I will never eat this, this and this out of the food pantry. I won't drive through fast food restaurants one after the other," just defining what a binge is for them.

So when you can define that, then any urges to binge can be recognized because you know what a binge is, so the urges that come to do those things must be disregarded. So, you still have to eat, right? So that's where it gets complicated because some eating habits might be less clear. But for my personal approach, I tell people not to worry so much about that right now while bingeing is being stopped. And then once binge eating is under control, once you've really reined in that really harmful behavior, then you can move on to using some other approaches or different ideas to rein in the overeating or just eating habits that don't make you feel the best. But to get away from deprivation and restriction and all that, I really encourage people not to worry too much about their other eating habits as long as they're eating enough, feeding their body adequately and then to ignore the urges to binge.

Dr. Glenn: Very nice. Very nice. I haven't heard that before, Kathryn. That's wonderful.

Kathryn: And my first book was mainly my story, but that explanation comes from the Brain Over Binge Recovery Guide.



Dr. Glenn: And I have not read your second book, so I'm on that now.

Kathryn: Okay.

Dr. Glenn: Kathryn, what I really liked about what you described is that you're setting up a bit of a safety net, so that if they made a small mistake, that the pig can't tell them -- or the lower brain can't tell them, "Well look, you tripped the truth, so now it's time to go [inaudible 00:32:05] the rest of them out." The analogy I used with people to try to set up that protection, I tell them that I send a lot of contracts over the year because I spend a lot of times in business. And in most contracts, there is a clause that goes something like this, if any of the clauses in this agreement are found to be invalid, the rest of the clauses will hold fast and lawful.

It's almost like the attorneys are anticipating that there could be a problem and they're setting up a safety net so that the whole contract doesn't fall apart. I find that that is helpful to people because even though the plan is to never binge again and I thoroughly believe that we have to have that mindset of perfection forward-looking and a mindset of kind retrospection looking back if we do make a mistake. People make mistakes and it's really easy for the pig to say, "Well now, anything goes." And so I think we all have our ways of helping people to put in that safety net just in case, which is paradoxical because if you're never going to listen to the pig again, why would you need a safety net, but on a practical basis, people make mistakes, so we put in the safety net.

I think that ambiguity is the pig's best friend. So, I work really hard with people as they're developing their food plan to make sure they're really



setting up rules as opposed to guidelines. I think it's okay to have guidelines that guide you, for example, I won't eat when I'm not hungry and I'll stop eating when I'm full. But the problem with that is it's not really verifiable, observable behavior because how would someone following you around know whether you were hungry or you were full. It's really kind of subjective and it's well intentioned and it's a good thing to do, but it gives the pig too much wiggle room to get through.

So, I work really carefully with people to figure out more objective, observable behaviors like, oh maybe, it's that I put my fork down for 90 seconds before I go back for a second portion. Or, I'll only have one plateful at dinner, something like that that's more objective and clear so that the pig can't say, "Well, you know, you're really not that full. You've got room for X, Y and Z." Wendy, I think it would be your turn to say a little bit more about how you help your clients develop a food plan.

Wendy:

Well, like I said before, it depends on what their goal is. If I have somebody that's obese that needs to lose weight for health issues, I'll do something different. But for the most part, I just have simple, basic rules that I try to teach them. For example, eating every two to three hours, making sure that they get a carb and a protein together, helping them learn portion sizes. I do something called the peace plate rule. I explained it in my book. I divide it up into a nine-inch plate into something that looks sort of like a peace sign, and that kind of helps them with portion control.

Water is huge. I try to teach them to get enough sleep. Exercise is an interesting one too. I don't stress hardcore exercise, but activity and movement, maybe parking a little farther away in a parking lot or taking



the stairs instead of the elevator. So, I think the whole health, optimal living principle sort of all come together. Does that make sense?

Dr. Glenn: Yeah.

Wendy: I stress more just healthy living. I have a program that I use for my clients that want to lose weight and where we use meal replacements and it's more of a structured and restrictive plan, but like I said before, if they can't do that, then we just go to living these good, healthy rules. I think eating every two to three hours and making sure that they have enough protein in there is key because if a binger gets hungry, it's all over. It's really important to make sure that you're not stuffed, but that you're not hungry either. I kind of like the intuitive eating scale, one to five, try to keep them at about a three.

Dr. Glenn: Nice. Kathryn, is there anything else you'd love to say before we move on?

Kathryn: Yeah. I love hearing both of your opinions on helping people learn to eat because it is so it's not a black and white addiction when you can just quit it and you're done with it forever. You obviously have to get up every day and eat. And I love that Wendy just teaches some healthy guidelines and you help people, Glenn, really define how they want to eat in a way that works for them. I just think if any of our approaches can be used, different pieces of our approaches could be used, the most important thing is that you develop a plan that works for you and feels right for you.

Dr. Glenn: And I believe that the most important thing is that you keep getting up until you get it. From the bottom of my heart -- I think I could speak for the three of us -- from the bottom of all of our hearts, as much as it



feels like you'll never get it. As much as it feels like you're lost in some abyss and there's a gun to your head and it's forcing you to do this, you absolutely, positively, 100 percent can do this. I really, really mean it. I find it helpful to tell people that also because I really want you to. I really, really want you to. It means the world to me when people recover.

Kathryn: Yeah, I totally agree.

Wendy: Yeah. If I can do it, anybody can do it. There's hope. I didn't have hope for a long time. Your books gave me hope, so thank you.

Dr. Glenn: I think all of us suffered for years, right?

Kathryn: Yeah, I did. I was about six years of binge eating, not as long as a lot of people. I was lucky enough to get these principles when I was still pretty young.

Dr. Glenn: Mine was about 30.

Kathryn: So yeah. That was long. I feel very fortunate, but it sort of became my mission since then. It was about 11 years ago that I've recovered that it's just been my mission since then to spread as much as I can and help as many people as I can because I've known how painful it was to be there and I just don't want other people to have to go through that.

Dr. Glenn: That's my mission too. Well, okay, just 100 percent clarified, could we just talk about the specific techniques that we use to recognize and ignore the lower brain?

Kathryn: Yeah, absolutely.



Wendy: Sure.

Kathryn: Why don't you go first this time, Glenn? We've been going first every time.

Dr. Glenn: Okay. Mine is relatively simple. You strive for eliminating all ambiguity from your food rules. And a food plan in my nomenclature is the collection of food rules that protects you and provides you with a nutritionally complete and satisfactory plan where you can accomplish all your health goals and stop you from bingeing. And with that clarity, you say, okay, there is this inner enemy that I've got. I call mine the pig. And anything that's even one bite or swallow off of your food plan is a binge. And the food itself that's off of the plan is pig slop. And when you hear the pig telling you that you should have some food off of this plan, that's a pig squeal and basically you just stop listening to farm animals tell you how to eat and how to live.

And if you happen to hear the pig squealing, you say, "Well, that there that you're squealing for is pig slop and I don't eat pig slop. I don't listen to farm animals. And pig slop belongs in a pig's trough and not on a human's plate." I'm always a little embarrassed when I tell people this because I'm such a sophisticated psychologist and I've done all this sophisticated things. But that's what works for me and that's what works for my clients. I don't --

Kathryn: We're talking about the lower brain and it's not very sophisticated, so it makes sense.

Dr. Glenn: Exactly. You don't have cravings your pig does. A craving is the desire to eat something off your plan. You don't have those, your pig



does. You have 100 percent confidence that you'll never eat pig slop again and your pig has other ideas. I think Jack Trimpey called this a lurking presence. You can't get to the point that you feel absolutely confident because the brainstem is always there. And every now and then, it will lunge at something. But you can solve that problem by artificially declaring that all of those urges, all doubt, all uncertainty comes from the pig. And so you're a hundred percent certain and your pig has other ideas. And the more you kind of get that algorithm, the more you consistently shift the language of, "Oh gee, I'm afraid I might have to eat this, or I really want to eat that too. Oh, it's the pig that wants that and that's pig slop. I don't eat pig slop." The more you shift that, the easier and easier it gets and the more permanently the pig stays in its cage. That's my basic technique.

Wendy:

I love that. What worked for me is when I read in Kathryn's book how she sat and just listened to her two brains having a conversation with each other. I did that. I went and I sat on my couch. It was so weird. I'm almost 50 -- I guess I was 45 or whatever at the time and it was the first time that I realized that I had two separate voices in my head. And it actually worked for a little while. I quit binging for a couple of weeks. And then I started back up again and I realized it was different though. This time, my binges were more conscious because I could hear that voice and I was making a conscious decision to ignore it. And I tried so many different things.

I read a study on habit reversal. And so I thought that I could just replace my habit, my action with something else. And so I tried everything. There's three parts to a habit. You have the trigger or the cue and then you have the action or the routine and then you have the reward. In a lot of circumstances like nail biting and different habits like that, they can replace the routine with a different habit. For example,

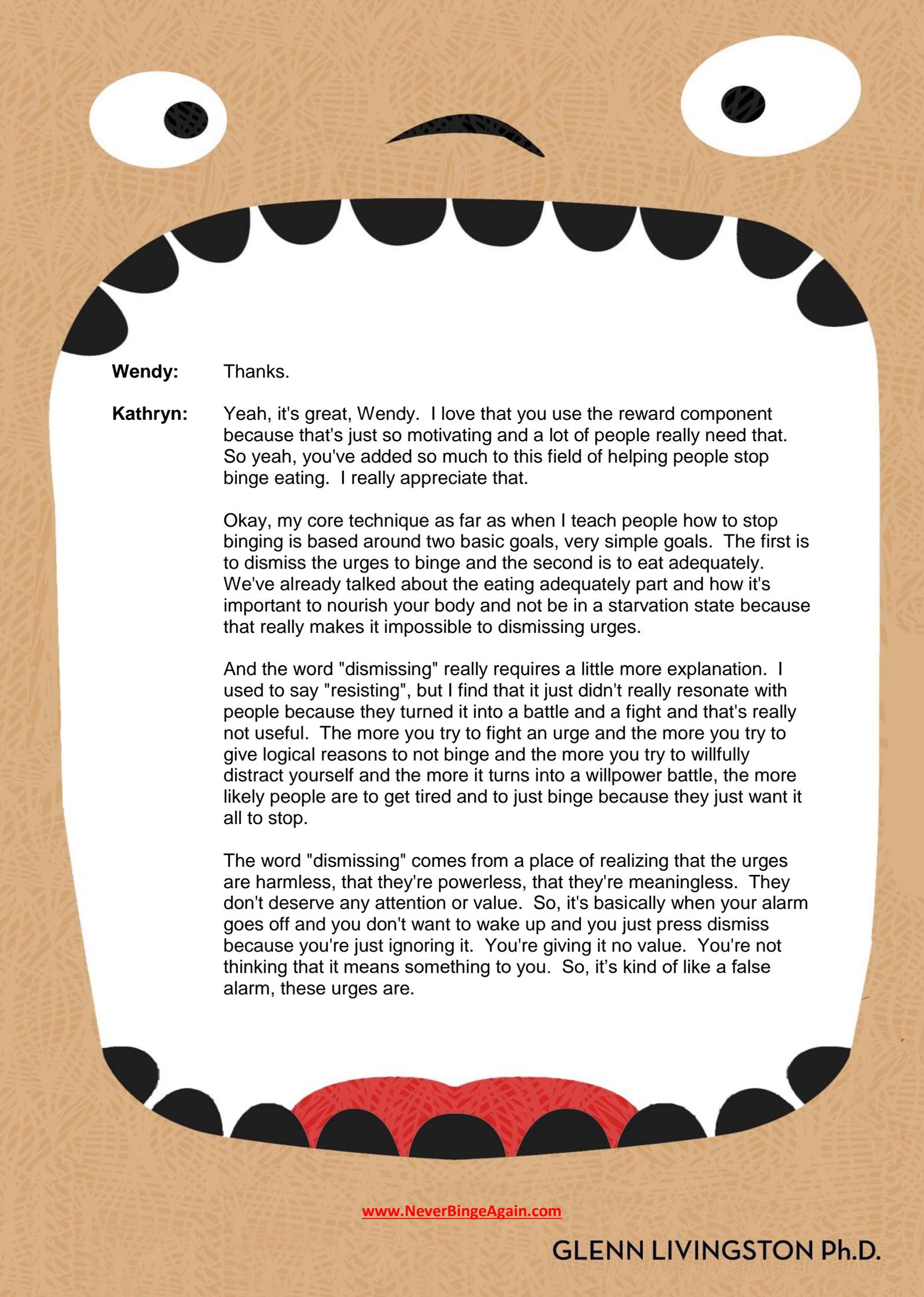


my daughter used to bite her nails. And now, instead of biting her nails, she clips her nail on her front tooth. It just sort of replaced that routine. But what I learned was that in addictions, we don't have rewards. There is no reward. Instead, it's the urge that continues that loop.

That's when I realized, yeah, I need a reward. Because I would try things like doing push-ups or taking a walk and none of that stuff worked because there was never the same reward that I got with a binge. And so, what I started doing was tracking my triggers. So, either when I was about to binge or after a binge, I would write down -- sometimes it was the time of day. Sometimes it was a fight with one of my kids. Whatever it was, I wrote that down. And then I would force myself to consciously acknowledge that whatever it was the lower brain had said, whatever it was that gave me that urge. And then I would consciously ignore it.

And then I found this silly little clicker thing, like a counter. And so every time I consciously ignored that urge, I would give myself a click. And it turned into this little game, like me against the urge. And so that's what I write about in my book. And I know that's helped a lot of people. It's like with any of this. You need to find what works for you. The pig has helped me so much recognize a lot of those squeals. So, maybe even it's important that we implement all of these ideas. Maybe it depends on the day that you use whatever you can to overcome this addiction, whatever you want to call it. So, that's worked for me.

Dr. Glenn: Wendy, I love your technique and I'm running into people who are using it and they love it also. I'm glad that you invented it and decided to share it.



Wendy: Thanks.

Kathryn: Yeah, it's great, Wendy. I love that you use the reward component because that's just so motivating and a lot of people really need that. So yeah, you've added so much to this field of helping people stop binge eating. I really appreciate that.

Okay, my core technique as far as when I teach people how to stop bingeing is based around two basic goals, very simple goals. The first is to dismiss the urges to binge and the second is to eat adequately. We've already talked about the eating adequately part and how it's important to nourish your body and not be in a starvation state because that really makes it impossible to dismissing urges.

And the word "dismissing" really requires a little more explanation. I used to say "resisting", but I find that it just didn't really resonate with people because they turned it into a battle and a fight and that's really not useful. The more you try to fight an urge and the more you try to give logical reasons to not binge and the more you try to willfully distract yourself and the more it turns into a willpower battle, the more likely people are to get tired and to just binge because they just want it all to stop.

The word "dismissing" comes from a place of realizing that the urges are harmless, that they're powerless, that they're meaningless. They don't deserve any attention or value. So, it's basically when your alarm goes off and you don't want to wake up and you just press dismiss because you're just ignoring it. You're giving it no value. You're not thinking that it means something to you. So, it's kind of like a false alarm, these urges are.



So that's basically what I teach people. I teach the five components of dismissing urges to binge, and the first is to view the urges to binge as neurological junk. And that's sort of what we've been talking about as far as it's a habit and the urges come automatically. It's not your fault, but this is just the reality of your brain right now. But that the urges are basically false messages, that they're just junk from your brain. They're just stuff your brain is getting out there and it doesn't have any great meaning or value to you.

The second component is to separate the higher brain from the urges to binge, meaning to know that this neurological junk, these urges are not really you. This is just your primal brain, your lower brain doing what it's been taught. The third component is to not react to the urges, to stop reacting. And the reaction is just fighting it or getting really emotional about it or just trying to battle it and letting it get you upset or angry. Because when we have all those reactions, we want to binge to make it go away. Most of the time, a binge is just to get relief from this urge. But the more you can step back and not react to it and just let it flow through you and accept that experience without reacting to it, the more you can let it pass.

The fourth step is really the cure and it sounds overly simple, but stop acting on urges to binge. And that's the cure because to develop a binge eating habit, you have to act on urges to binge to develop these strong pathways in your brain that drive the behavior. So, to de-condition that habit, to erase the habit, you have to not act. You have to feel the urge and not act. And when you do that, the brain learns. When it comes to the brain, what you don't use, you lose. It's this basic concept called neuroplasticity that is well-researched concept that the brain changes based on the actions we take. And in this case,



we're not acting and then the brain will stop sending urges to do that action.

Dr. Glenn: I just want to say, I think that's such an important paradigm shift because in some ways then, you can almost welcome an experience of having an urge because it's an opportunity to deprogram yourself. You have to go through those experiences in order to deprogram yourself. So, you almost get a little bit excited that okay, well, as I go through these five components, I'm actually going to be less likely to binge in the future. Anyway, I didn't mean to interrupt your flow, but I just had to say that.

Kathryn: It actually led me exactly to my fifth step, which is to get excited. And it's sort of a bonus step, but it's just what you said. Getting excited about new change, new learning really kind of cements that learning in your brain. It's why we praise babies and children for doing good things because when you're excited about something, it's like glue that holds this new habit together. So, getting excited is kind of a bonus, but that's my fifth step, that every time you do have an urge and you don't act on it and you let it past and get excited about it, oh my gosh, you're on your way to creating a new habit in your brain and you're on your way to these urges going away and stop bothering you and just to be able to get on with your life.

Dr. Glenn: And as Sartre said, everyday is an opportunity to remake our self and this is how the remaking happens.

Kathryn: Exactly, yes. So that's my basic dismissing urges and then the other component is eating adequately. And the basics are just you need to eat enough to nourish your body. But in my second book, *The Recovery Guide*, going to a lot more detail because people often have



questions about overeating. And I think a lot of your ideas, Glenn and Wendy, could apply in helping people really develop a plan of adequate eating that helps them. And I call it adequate because it doesn't have to be perfect, ideal, healthy all the time. It just has to be enough and it has to be good enough, then you can make whatever changes you want once binge eating is gone. It really frees you up, frees up your mental energy. It frees up your physical energy to really make other changes in your life that just could lead to a better life.

Dr. Glenn: It's amazing what you can do with your life when you overcome the binge. It's amazing what you can accomplish and how much more presence you are and what happens to your relationships and your workability and even how your nieces and nephews and children and pets are to react, that's really amazing. Wendy, do you want to see anything more about the core technique?

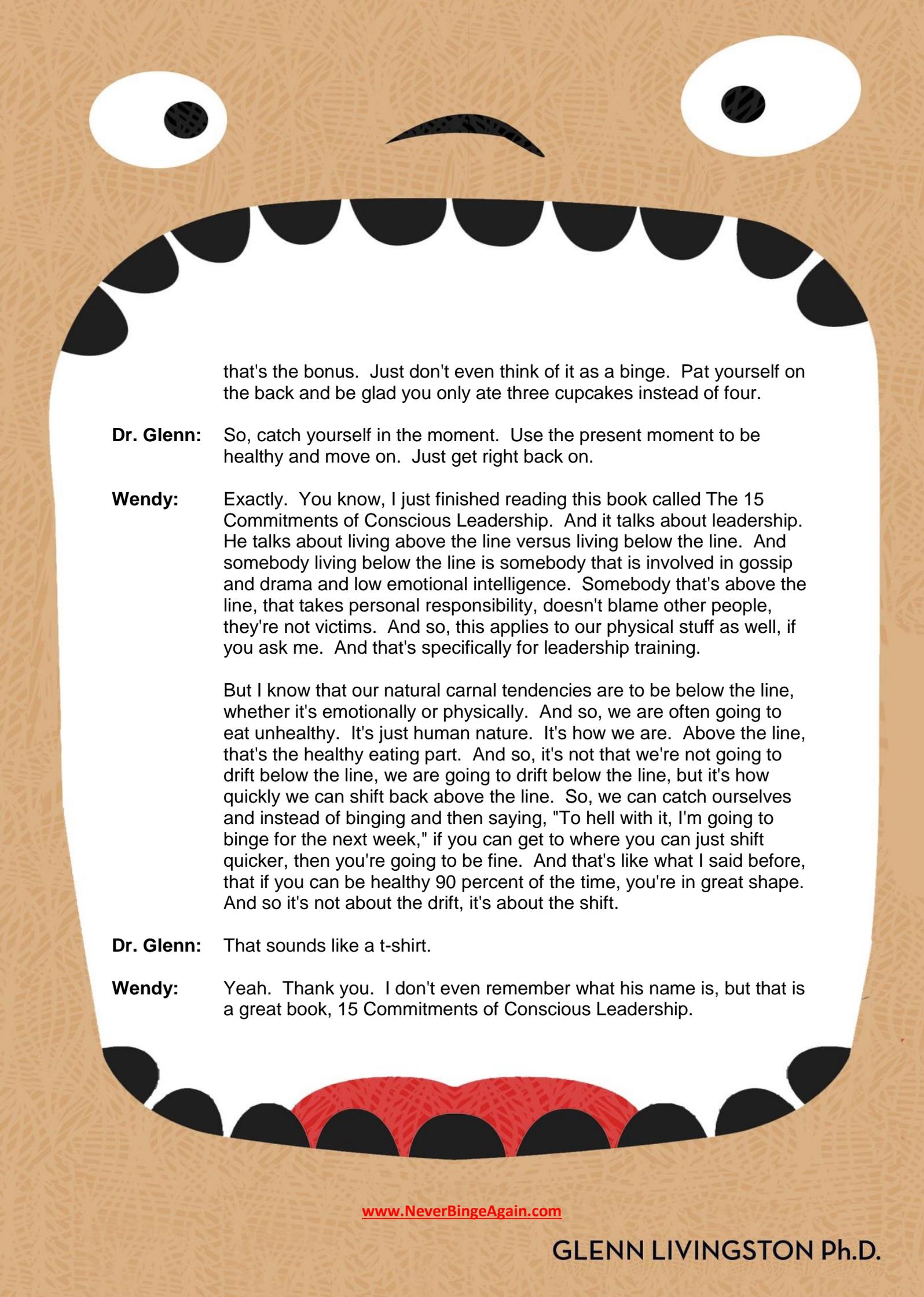
Wendy: No. I'm learning so much just listening to you guys. Wow! That's all I have to say. Wow!

Dr. Glenn: Wendy is a really good fan.

Kathryn: So many of her own amazing ideas too. She's just very humble about it.

Dr. Glenn: Yes. That's what I was trying to say. We're going to have to figure out how to say more really nice things about Wendy because she's a little shy about it. Last but not least, I was hoping we could talk a bit about how you work with people to help them recover when a binge happens.

Wendy: How do I say it? You don't say it's a binge. You just say -- I just tell my clients to say, "Well, that was normal." Any kind of healthy eating, then



that's the bonus. Just don't even think of it as a binge. Pat yourself on the back and be glad you only ate three cupcakes instead of four.

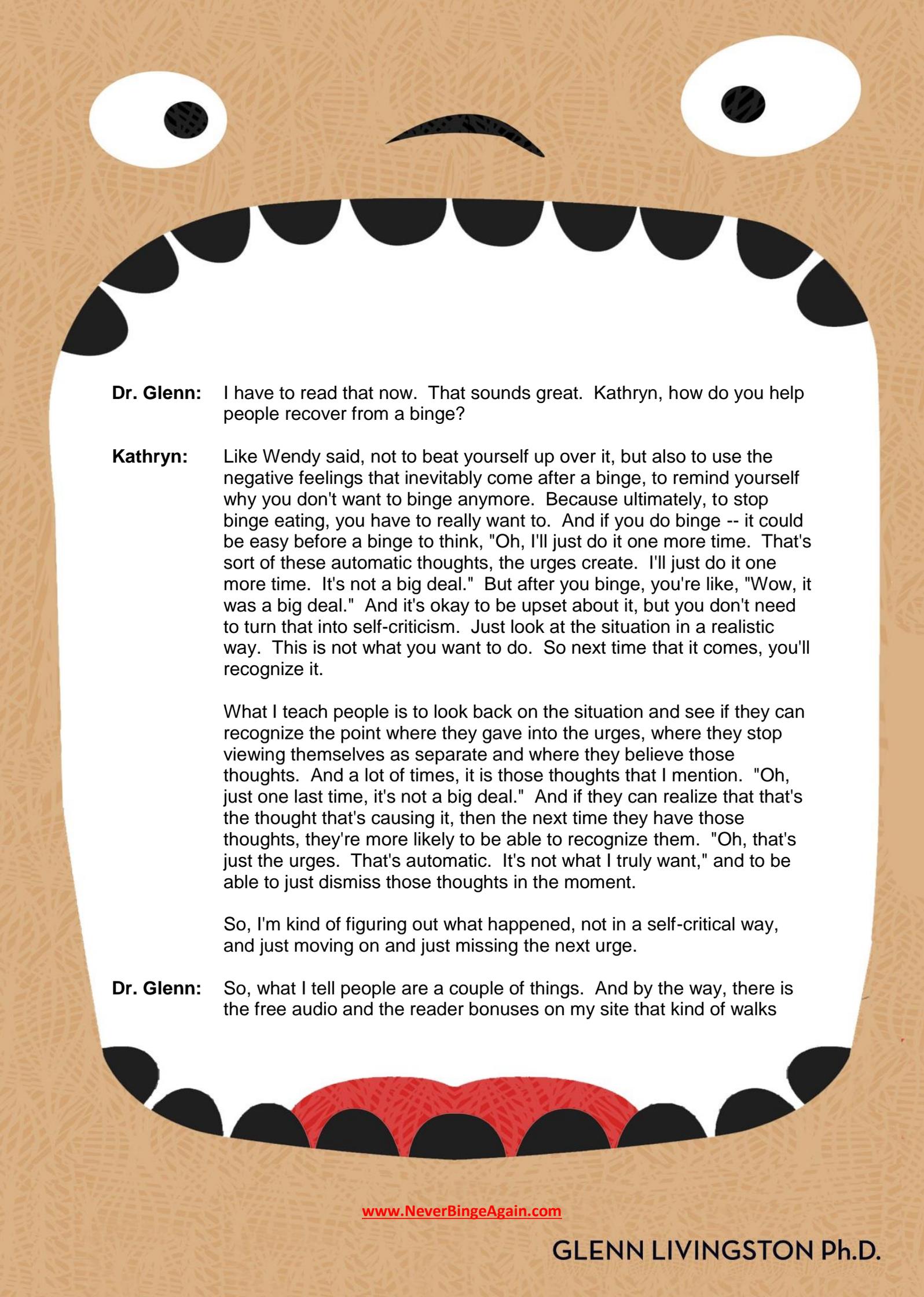
Dr. Glenn: So, catch yourself in the moment. Use the present moment to be healthy and move on. Just get right back on.

Wendy: Exactly. You know, I just finished reading this book called The 15 Commitments of Conscious Leadership. And it talks about leadership. He talks about living above the line versus living below the line. And somebody living below the line is somebody that is involved in gossip and drama and low emotional intelligence. Somebody that's above the line, that takes personal responsibility, doesn't blame other people, they're not victims. And so, this applies to our physical stuff as well, if you ask me. And that's specifically for leadership training.

But I know that our natural carnal tendencies are to be below the line, whether it's emotionally or physically. And so, we are often going to eat unhealthy. It's just human nature. It's how we are. Above the line, that's the healthy eating part. And so, it's not that we're not going to drift below the line, we are going to drift below the line, but it's how quickly we can shift back above the line. So, we can catch ourselves and instead of binging and then saying, "To hell with it, I'm going to binge for the next week," if you can get to where you can just shift quicker, then you're going to be fine. And that's like what I said before, that if you can be healthy 90 percent of the time, you're in great shape. And so it's not about the drift, it's about the shift.

Dr. Glenn: That sounds like a t-shirt.

Wendy: Yeah. Thank you. I don't even remember what his name is, but that is a great book, 15 Commitments of Conscious Leadership.



Dr. Glenn: I have to read that now. That sounds great. Kathryn, how do you help people recover from a binge?

Kathryn: Like Wendy said, not to beat yourself up over it, but also to use the negative feelings that inevitably come after a binge, to remind yourself why you don't want to binge anymore. Because ultimately, to stop binge eating, you have to really want to. And if you do binge -- it could be easy before a binge to think, "Oh, I'll just do it one more time. That's sort of these automatic thoughts, the urges create. I'll just do it one more time. It's not a big deal." But after you binge, you're like, "Wow, it was a big deal." And it's okay to be upset about it, but you don't need to turn that into self-criticism. Just look at the situation in a realistic way. This is not what you want to do. So next time that it comes, you'll recognize it.

What I teach people is to look back on the situation and see if they can recognize the point where they gave into the urges, where they stop viewing themselves as separate and where they believe those thoughts. And a lot of times, it is those thoughts that I mention. "Oh, just one last time, it's not a big deal." And if they can realize that that's the thought that's causing it, then the next time they have those thoughts, they're more likely to be able to recognize them. "Oh, that's just the urges. That's automatic. It's not what I truly want," and to be able to just dismiss those thoughts in the moment.

So, I'm kind of figuring out what happened, not in a self-critical way, and just moving on and just missing the next urge.

Dr. Glenn: So, what I tell people are a couple of things. And by the way, there is the free audio and the reader bonuses on my site that kind of walks



people through all this. And a lot of them find it helpful to kind of carry it around and the moment they realized that they made a mistake, if they listen to it right away, it kind of helps them arrest it and get back to it quickly. I tell people, very similar to what Kathryn is saying, that it's critical to identify the language that went through your head before you made the mistake, before you binged. That language was by definition, pig squeal because it suggested that you do something that was off of your plan.

And there are only two causes of a binge. One is the failure to recognize the pig squeal, the language that suggests that you do binge, to thinking that it's you and therefore lending the pig your arms and your legs and your mouth and your tongue. The other cause of a binge is something in your food plan that doesn't really adequately protect you. The pig found a legitimate hole in the food plan.

And so, you need to review specifically what happened, what the language was and then ask yourself, is that just a pig squeal that I have to ignore in the future because I don't eat pig slop, I do not listen to farm animals. If that's the case, then just resume where you were with confidence and determination and knowing that your esteem and physical wellbeing will return in a day or two when the poison leaves your body. Or if there was something legitimately wrong with the plan, then go back and in a very careful and slow way, give yourself a day or so to analyze what was the problem and how do I need to change the plan to protect me better.

That is essentially what I do. The other thing that I do is I look very carefully for the self-denigrating things that the pig is throwing at the person. And I ask them to challenge that and ask if those are very real, then we help people get back up and they do.



Okay, well, do we have any parting thought for today? I'm hoping we'll get to do this again, but are there any parting thoughts? I certainly read a lot from both of you. I want to go back and reread your books and figure out what I can borrow and integrate. What else would you like to say, any of you, before we stop for today?

Wendy: It was a good ending just to say that we can do this. If the three of us can stop bingeing, we're no different than anybody listening and they can stop too. And I loved what you both said about how bingeing frees up your life to do so many other things. I look back and I have so many regrets about the time wasted thinking about food or eating in secret or not going to certain events because I knew there was going to be food there. It's so nice to be free from all of that.

Dr. Glenn: Yeah. And when you stop bingeing, then you absolutely can.

Kathryn: Absolutely. I think all of our mission is very similar and that we want to make this a little less complicated for people. I know all of us kind of spent time in the more traditional route in trying to solve other problems. And it just can turn into this endless cycle. We just want to get people out of that and give people a more simplified approach. Nobody's recovery is going to look exactly the same, so just take what you've learned from Glenn or me and Wendy and just kind of create your own recovery plan and that works for you.

The most important thing to know is that you don't have to act on these impulses that you can overcome. As like Glenn and Wendy have both said, we all did it and everyone that's listening, we know you can do the same.



Dr. Glenn: You can be master of your own faith, completely in control and 100 percent restore your sense of freewill, responsibility and power over your inner pig or brat or lower brain depending upon whose book you're reading. So, Kathryn and Wendy, I dearly want to thank you. I learned so much. I'm hoping that everybody else does also. And until next time, I think we'll say goodbye.

Kathryn: Thank you, Glenn.

Wendy: Thanks so much.

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