Help Your Teenager Beat an Eating Disorder.
James Lock and Daniel le Grange.
New York: Guilford Press (www.guilford.com).
2005, 295 pp., $16.95 (softcover).

The primary thesis of this book is that an eating disorder is not different from a medical illness. If one’s child’s life were in danger or he/she was suffering from considerable emotional pain and associated physical consequences, wouldn’t a caregiver want to do everything possible to help? The authors of Help Your Teenager Beat an Eating Disorder argue that while in some cases, providers have traditionally encouraged parents of teens with eating disorders to be uninvolved and to keep at a distance, the very opposite should be the case. Instead, Lock and le Grange empower parents to become active participants in restoring their adolescents' health. With ample empirical evidence, the authors clear up common misconceptions, illustrate exactly how parents can best be involved in their adolescents’ recovery from an eating disorder, and demonstrate how this involvement is markedly beneficial. Furthermore, the book is an excellent resource for parents who are either exploring various treatment options or already participating in treatment for their teenager - as well as a nice adjunct for clinicians who treat families and wish to involve parents.

The advice, guidelines, and suggestions given to parents by two of the premier experts in treating adolescent eating disorders in the field are invaluable because they are drawn from direct clinical experience and research trials with numerous teenagers and their families. As a result, this book summarizes recent developments in the field of adolescent eating disorders - and thus could not be more timely. It also does so in language extremely accessible to parents. For example, this book provides lucid explanations of how to recognize the signs and symptoms of an eating disorder in an adolescent and utilizes diverse and interesting vignettes that describe a typical teenager struggling with a particular set of symptoms. Parents should recognize their son or daughter featured in any number of these descriptions, which keeps the book going at a fast and readable pace. Furthermore, a unique feature of this book is that the concerns of both male and female adolescents with eating disorders are equally represented and advice to single-parent families is also given. In addition, references at the end of each chapter allow parents to see where the information is derived from, and a detailed list of resources and treatment centers is provided in the appendix.

The book is divided into three parts. Part I describes the seriousness of eating disorders, particularly in adolescence, and why urgent attention to these symptoms by parents is necessary. The book begins with vignettes that illustrate examples of teens presenting with symptoms of anorexia nervosa and bulimia nervosa along with a clear and specific list of warning signs of these conditions. Diagnostic criteria for anorexia and bulimia nervosa from the DSM-IV-TR (American Psychiatric Association, 2000) are outlined, as well as for the residual diagnostic category of eating disorder not otherwise specified (EDNOS), which includes a majority of eating-disordered teens. Parents are walked through steps such as questions to ask a clinician/pediatrician making a diagnosis, how to seek an evaluation, and what to expect from such an assessment – all of which a parent may have no way of knowing beforehand. Thus, parents gain from inside information without having to stumble forward blindly. This section also provides reassurance to parents once their adolescent does receive a diagnosis. Acknowledging that parents must feel angry, frustrated, bewildered and above all, helpless, the
authors argue that parents are not to blame and that eating disorders develop as a result of a variety of factors.

The multifactorial etiology of eating disorders is further illustrated in Part II of this book (beginning with Chapter three) and parents are encouraged not to 'waste time on why.' Chapter four supports the notion that eating disorders require immediate intervention by providing parents with a concise list of the severe medical consequences of untreated anorexia and bulimia nervosa along with common comorbid mental health conditions. The important differences between anorexia and bulimia nervosa are explained to parents, and the seriousness of each of these conditions is effectively conveyed. In light of this evidence, parents are encouraged to take an active and immediate stance towards their adolescent’s recovery. Further, in these chapters, Lock and le Grange demonstrate their years of clinical experience with this adolescent population as they describe the unique family dynamics of parenting a teen with an eating disorder. Parents will feel reassured that while a power struggle with an adolescent struggling for independence and privacy is extremely common, especially in the case of an eating disorder, they still must and should intervene. The authors follow this notion by providing empirical support for the necessity and effectiveness of family involvement. The Maudsley form of family therapy for adolescents with anorexia and bulimia nervosa is introduced and the ways in which parents are included in this treatment are briefly described.

Chapter five provides an “inside look” into the mind of a teenager with an eating disorder. The authors do an excellent job of illustrating how starvation and an unrelenting drive to lose weight adversely affect a teenager’s thinking, giving direct examples of these types of disordered thoughts. These examples demonstrate how debating a teenager with an eating disorder is often fruitless and encourage parents to replace their anger at their teen’s seemingly bewildering behavior with empathy. Chapter six continues this trend with a comprehensive guide to various treatment options. Maudsley family therapy, individual psychodynamic therapy, cognitive-behavioral therapy, interpersonal therapy, nutritional counseling, pharmacological medication and inpatient (including day and residential) treatments are all summarized, along with the empirical support available for each. This chapter is well-balanced, allowing parents to compare the different options and select what is best for their child, while noting which options have the most support in the literature.

Part III of the book, which consists of Chapters seven through ten, focuses on making treatment work both inside the therapy office and at home. In order to most effectively help their teenager maintain treatment gains and to maximize recovery, parents are encouraged to develop a united front. This is achieved through vignettes depicting all-too common disagreements that parents may have about how to approach their teen’s disordered eating. Sibling involvement is encouraged and bolstered by specific examples of ways brothers and sisters can provide support. Perhaps most helpful in this section are the extremely practical suggestions parents are given for how to make their teen’s eating disorder their top priority, from structuring meal times at home to helping adolescents expand their food choices. Thereafter, Chapter eight outlines specifically how parents can be involved in treatment, with examples for each therapy modality presented earlier in the book. Consistent with the overall theme of the book, the authors view parents as experts in their own children and the therapist is viewed as a consultant with expertise in eating disorders. Thus, parents and clinicians are encouraged to work together as a team. Chapter nine again emphasizes parental unity in approaching their teen’s eating disorder, and Chapter ten tells parents how to troubleshoot problematic treatment scenarios that may arise, such as providers giving parents conflicting advice.
The Resources section at the end of this book is excellent. It provides contact information for treatment centers across the United States, Canada, Australia and the United Kingdom, along with information about education and advocacy in all of these places.

Overall, this book is a first-rate account of how a parent can help his/her teenager with an eating disorder, and it remains quick, easy and informative reading while being comprehensive and thorough. Perhaps the only limitation to the book is that it can’t tell parents everything! For example, parents are encouraged not to debate with their teen, but few examples for alternatives (what to say instead) are provided. Parents are urged to be persistent and help their teen stop binging and purging, but few guidelines are given for how to do this via monitoring or other methods. Finally, although the authors do point out that many adolescents fall into the DSM-IV category of EDNOS, the book does not include suggestions for how to help adolescents who are overweight as a result of an eating disorder and instead emphasizes those who are at a normal weight or underweight. However, numerous other questions are answered, and I could not recommend this book more strongly, both for parents and for clinicians. This book should provide parents with a great place to start learning before treatment begins, and is also a relevant resource for any therapist or provider who is approached by a parent with questions.

In summary, with the prevalence rates of anorexia nervosa and bulimia nervosa in adolescence estimated to fall between 0.5-1% and 1-3% respectively (American Psychiatric Association, 2000) and increasing pressures for teens to achieve impossible standards of physical attractiveness, more and more parents are faced with the complexity of parenting a teen with an eating disorder. This book is an excellent, empirically based and thoughtful guide that provides parents with something extremely valuable - tools to help their adolescent.

References


Terri Landon Bacow, Ph.D.,
Eating and Weight Disorders Program,
Mount Sinai School of Medicine,
One Gustave L. Levy Place, Box #1230, New York, NY 10029.
Email: terri.bacow@mssm.edu

http://www.the-iacp.com/CBTBR.html
Copyright 2008 by the International Association for Cognitive Psychotherapy