



BODY BRAVE  
recovery for every body

## KAREN'S EXPERIENCE: NAVIGATING THE SYSTEM



*"With Sonia spending more time at home, my husband and I noticed many worrisome behaviour changes.*

*She was eating irregularly and avoiding many foods, often going for days without eating. She would go off to the gym to exercise for hours, returning home pale and exhausted. Usually a keen student, she seemed to have lost interest in her university studies.*

*We also noticed that she had stopped contacting friends and that she was becoming increasingly socially isolated.*

*"I'm totally trapped by this horrible illness," she said one evening, in a tone filled with despair. "I feel like just giving up...there's no way out for me."*

*"But Sonia, you haven't even been through a full treatment program," I said. "How can you say that there's no way out?"*

*She shrugged and turned away. As I watched her walk slowly back up the stairs to her room, I felt an overwhelming sense of sadness. Where had my brilliant, confident daughter gone?*

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*That evening, Pradeep and I talked about the changes we'd been noticing in Sonia's behaviour over the past few weeks. We'd never heard her express such a sense of hopelessness about the eating disorder before.*

*"I have a feeling that she's also struggling with a serious bout of depression as well as the eating disorder," I said.*

*Pradeep nodded thoughtfully, saying nothing.*

*I reflected about my family history of major depression. If Sonia had inherited genes that predisposed her to a mental illness, she would be more vulnerable to life events that might precipitate an eating disorder. At the same time, the distressing symptoms of the eating disorder can cause a worsening of the depression.*

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***The next day, Pradeep and I renewed our desperate search for information and resources to help our daughter recover.***

*Sonia was already on a waiting list for the eating disorders program at our local hospital in Hamilton, but the admission date was still months away. We studied the details about this program on the website. After receiving the referral information from the family doctor, the clinical staff would do a comprehensive assessment to determine if the patient was a good fit for this outpatient program. If the person's eating disorder was too severe, they would be directed to apply for a higher level of care at a hospital in either Mississauga or Toronto. If the person was accepted for treatment at the Hamilton program, they would then go onto a waiting list. Once a spot opened in the program, the patient would participate in weekly group therapy sessions as well as having some individual appointments with the dietitian and clinical psychologist. The therapeutic approach was termed CBT - Cognitive Behavioural Therapy adapted for eating disorders.*

*For people with more severe eating disorders, there were day hospital programs in Mississauga and Toronto, in which the patient would attend every day, involved in groups as well as supervised mid-day meal. These two hospitals also offered the most intensive level of treatment- inpatient care at one of their specialized units. There are limited beds, however, and all programs had significant waiting lists.*

*We did some research about a residential eating disorder treatment program in a neighbouring town. Although this program is partially government subsidized, there were still substantial costs involved - about \$30,000 for a 10-week stay. We also identified a private-*

pay option for residential treatment in Toronto. The cost of this program was more than \$1000 a day!

*“This is unbelievable!” I said to Pradeep. “These are dangerous illnesses – yet you either have to be wealthy to afford treatment, or else you have to wait for months for a publicly funded program. And just imagine if you lived far away from these treatment centres – what a barrier that would be!”*

*“Or imagine if you didn’t speak English well or had difficulty figuring out how to get treatment. It’s hard enough for us!” said Pradeep.*

*“We must try to find some help for her low mood,” I said. “This could be making the eating disorder worse.”*

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***Sonia’s therapist referred her to a psychiatrist who worked in the eating disorder unit.***

*He diagnosed depression, as we’d suspected, and prescribed Prozac. However, we noticed little improvement in her mood or her eating disorder symptoms. He had no other suggestions for what we could do to support Sonia.*

*In the meantime, Sonia continued to see the therapist, but her illness steadily got worse. She had been dieting and over-exercising in the first stage of the eating disorder, but now the bingeing and purging became more severe. These symptoms would result in a brief respite from her anxiety, but after each episode she would be overcome with shame and guilt. As the months wore on, she became increasingly withdrawn.*

*“It’s so frustrating that there is no support for her while she’s on this waiting list,” I said to Pradeep. “I’ve searched for community-based resources, but I can’t find anything at all.”*

*“She seems to be feeling so hopeless, and her symptoms are getting worse,” Pradeep murmured. “I am worried that a serious complication might happen before she even gets to treatment...”*

~Dr. Karen Trollope-Kumar



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