

# Adult Anorexia

Once primarily a teen affliction, eating disorders are affecting women in their 30s and beyond



In January Bennett (left, in Del Mar, Calif., with her pug Francis and, above, at her lowest weight) started It Is What It Is Foundation, a nonprofit that provides support to recovering adult anorexics.

For Michele Bennett, it was all about control. Enmeshed in a relationship with an abusive boyfriend, the natural perfectionist responded by “being the absolute best at everything”—including restricting her calories. “The more he controlled me, the more I controlled my eating,” says Bennett. “It irked him.” And she was terrific at it: After a year her 5’5” frame had shrunk from 115 lbs. to a skeletal 89.

It’s a tale any anorexic teen might relate to, but Bennett’s story has a twist: Now 35, she was all grown-up, a genetics counselor and 34 when her eating disorder struck. What’s more, at San Diego’s Puente de Vida eating disorder clinic, where she spent 45 days last August, instead of roommates with acne and tongue studs, “I was in treatment with women in my age group,” she says. “Early to mid 30s.”

There’s a change going on in the world of eating disorders. Still most common in girls between 16 and 20, anorexia and bulimia have broadened their reach, affecting more women in their 30s, 40s and beyond. “At any given time we have between 50 and 70 percent adults [in treatment],” says Dr. Cynthia M. Bulik, head of the eating disorders program at the University of North Carolina. “This is strikingly different from 10 or 20 years ago, when all you would see would be adolescent girls.”

Why the change? Those sleek forty-somethings on *Desperate Housewives* provide one clue. “These days, you have to be young and gorgeous, even at 50,” says Dr. Holly Grishkat, clinical supervisor at the Renfrew Center, a treatment clinic in Philadelphia. Baby Boomers “are having a hard time dealing with getting older,” says Linda McDonald, a coordinator at Laurel Hill Inn, an adult eating disorder program in Medford, Mass. Instead of “beginning to put less focus on their bodies,” says eating disorders expert Dr. Ann Kearney-Cooke, “middle-aged women today have high

## Body

levels of dissatisfaction with them.”

Add increasing cultural pressures to the ordinary stresses of midlife, and you have a recipe for trouble. “Becoming an empty nester, the death of a spouse, a marriage falling apart are all triggers,” says Dr. McDonald. For Kathy Palmero, a Newville, Penn., administrative assistant, it was the call of size zero that made her spiral out of control. As she slimmed down after the birth

of her second child in 1993, the compliments poured in. “I thought, ‘Wow, I want to be one of those girls I never was,’” recalls Palmero, 42. Fanatic exercising and a diet of coffee and Jell-O took her from 150 lbs. to 89 lbs. in eight months. She had an arsenal of tricks to hide her habits from husband Chris, 47—including sneaking her dinner to the dog. “I had this saying,” says Palmero. “Nothing tastes as good as being thin feels.”

Until it doesn’t. Guilty about consuming a half slice of pizza and a beer one night, she induced vomiting using her children’s ipecac. It was the wake-up call she needed—the kind experts say middle-aged women may heed more readily than teens, who still feel they are invincible. “I remembered Karen Carpenter’s heart stopped, and she took ipecac,” Palmero says. “I thought, ‘God, what are you doing!’” The next



“I knew I needed help, and if I didn’t get it I wouldn’t be around to see my kids grow up,” says Palmero, at home (above) and during recovery (left).

day she signed up for a 30-day stay at Renfrew.

Despite health concerns, women like Palmero are often reluctant to seek help because of their age. “They feel they should be role models for girls,” says Dr. Grishkat, “and here they are.” They also worry

about the cost. Palmero’s insurance company paid for her treatment, but many providers won’t cover inpatient care. At \$1,000 a day Bennett’s hospitalization quickly depleted her \$25,000 savings; now 115 lbs. and happily single, she relies on family to help pay for the

therapist she sees regularly.

Even after costly programs, of course, there are no guarantees. At 120 lbs., Palmero must resist the urge to starve herself—and she worries about passing on her neuroses to daughter Emily, 11. (While making a sandwich one day recently, Emily asked her mom, “Do you want something to eat?”—then added quickly, “Of course not, you don’t like to eat.”) For now, Palmero is happy that Emily, a soccer player, loves food. As for herself, she’s optimistic, and so is her husband. “Before, you could almost see her thinking, ‘How can I get away from the table without having to eat?’” Chris says. “Now, she’s actually there. It’s nice having her.”

**By Ericka Souter.** Joanne Fowler in Newville, Sandra Marquez in Los Angeles, David Searls in Cleveland, Debbie Seaman in New York City and Nancy Matsumoto in Toronto

## SO IT DOESN'T HAPPEN TO YOU

Dr. Ann Kearney-Cooke, author of *Change Your Mind, Change Your Body: Feeling Good About Your Body and Self After 40*, says the best defense against midlife eat-

ing disorders is a healthy body image. Some tips:

- Determine a realistic weight goal. It is normal to gain some weight as you age.
- Don't be afraid to change

the meaning of sexiness as you get older. Accentuate your strengths.

- Don't expect results with the same exercise routine. More time and energy are required to maintain a healthy weight during midlife.

- Throw away anything that doesn't fit. Keeping clothes that are too small is self-destructive.
- At the end of each day, write down all activities you did that made you feel good about your body.