

Dr. Adrienne Youdim, Host 0:03

Hi, this is Dr. Adrienne. Welcome to Health bite the podcast where we explore all things health and wellness. Hey, their health white podcasters in anticipation of my upcoming book hungry for more, I'm taking a shift in the podcast to take a deep dive into our hunger. As always, we know there are many reasons we eat physiologic hunger being just one of them. Hunger, of course can be emotional, even spiritual, and overweight or not our relationship with food is symbolic of our relationship with ourselves. How do we care for ourselves? Are we worthy of the time and attention required for that care?

What boundaries are necessary to support the healthy relationships with others and with ourselves? And what true longing is our desire for food signaling? Our reckoning with food can be a way of opening up to these significant questions. And a change in our relationship with food can be a spark for broader change, creating a rippling effect to other areas of our lives. As always, my goal is to provide you with a small actionable health bites to support you towards your path towards physical, mental and emotional well being. In the next several episodes, we will dive deep together to explore these hungers more fully. I will draw from evidence based medicine, scientific research, patient stories and personal experiences to help you understand the universal stories and science behind our hungers. And I encourage you to head over to hungry for more dotnet where you can download an excerpt from my book hungry for more stories and science to inspire weight loss from the inside out. Now let's dig in. On today's episode of health bite, I speak with Robyn Goldberg. She is a certified eating disorder registered dietitian and supervisor through International Association of eating disorder professionals. She is also the author of the eating disorder trap, a guide for clinicians and loved ones. On this episode, Robyn and I talk about eating disorders, body image intuitive eating and the importance of identifying our true hunger. Let's dive in. Welcome back to health bite. I'm so excited to have you here. Robyn, it's great to see you.

Robyn Golberg 2:14

Great to see you. Adrienne, thank you so much for inviting me,

Dr. Adrienne Youdim, Host 2:17

you know, this is such an evergreen topic, right? always important, but so much more. So right now on the heels of a little bit over a year of the pandemic where we've noticed that the numbers of eating disorders have increased, right. And also I think people who had been in remission were kind of up ended again, as a result of all the stressors that they were facing.

Robyn Golberg 2:40

Very true. I mean, to respond to something you had said. So for a person to be recovered, that takes many, many years, but to work towards their journey of recovery, maybe an individual had been in what they would perceive in a place of recovery working towards being recovered. But the stressors of the last year from the perspectives of losing control of seeing friends, going to school, being able to travel with family, go to a restaurant, all these elements that have been taken away from each and every one of us, for individuals that do not have a solid foundation in

their recovery. It's been very common for people to have their eating disorder return, and have that voice become very dominant and loud in their lives.

Dr. Adrienne Youdim, Host 3:34

Yeah, and I wonder if you know, like so many things in life, there's never really like this book, and the closes the door on that journey. It's something that people deal with lifelong, and it may change right in the way it presents itself or the severity of it. But it is something that I imagine and I know from my work on the other end of the spectrum is a long-term or a lifelong journey.

Robyn Golberg 3:58

It is a lifelong journey. But also it's having for example, for someone who struggles with an eating disorder, the idea of having a team that specializes in disorders is very, very important to get to a place where it's not the ongoing thought narrative in their mind. So that team consists with an eating disorder train registered dietitian and these sort of trained mental health care provider eating disorder trained internist or pediatrician as well as potentially any sort of trained psychiatrists if medications are recommended.

Dr. Adrienne Youdim, Host 4:32

Yeah, like it really is the whole team approach. Right. So we talked a little bit about the different eating disorders and you know, binge eating disorder is something that I see a lot of the other end of the spectrum. I think when we think of eating disorders, our minds do go often towards anorexia, which you can speak to, but talk a little bit about, you know, what are the most common eating disorders and yeah, maybe we can get into that a little bit.

Robyn Golberg 4:56

So the most common eating disorder that's not disgust is binge eating disorder and 60% of women that have troubled relationships with food and body struggles, binge eating disorder and 40% of men who have unresolved relationships with food and body shrug with binge eating disorder. And a person can exist in any body shape or size and struggle with not just binge eating disorder, but any type of eating disorder. They don't have to live in a larger body or look quote, unquote, emaciated, they can appear normal, they could put in rabbit here as normal or be an athlete. And unfortunately, the media portrays people to appear in a certain manner, which is not necessarily the case, it affects all genders, all ages, all body shapes and sizes, all different cultures. And I think that's very, very important to be able to expose individuals to that knowledge, which is one of the reasons I wrote my book, the eating disorder trap to be able to debunk the myths that people are not informed about,

Dr. Adrienne Youdim, Host 6:02

can you talk a little bit about the myths around binge eating disorder, and maybe just start with defining it because I think binge eating is a term that we kind of throw around. And so but there's a clinical definition for binge eating disorder.

Robyn Golberg 6:15

So binge eating disorder, I think the classic how I hear people describe it, which is not necessarily cases they perceive it's a person in a larger body going to a fast food establishment or sitting in their car. And it can be like I was listening to a client who was telling me that she binged on the big baking sheet of roasted brussel sprouts that she made, she was feeling anxious and stressed and overwhelmed. And it's being able to suppress any kind of uncomfortable feeling, or a person is trying to escape and to be able to be with themselves is very, very difficult. So it's not about what the food choices that a person's eating, but they're eating a concentrated amount of food in a very short period of time, rapidly and oftentimes moving from one item to another. But it could be like, in this case, this person, this is, you know, the only item she had in the house, and then after the fact like to sleep but you know, oftentimes it could move on to another food choice. And again, it's not about what the food choices, it's the behavior and you know, the psychological process that a person is going through to get to that place.

Dr. Adrienne Youdim, Host 7:26

So would you say that part of the kind of definition of it is what's driving the binge or what's driving the eating? It's not so much to your point, like bingeing on chips, per se, like your example is brussels sprouts, which, you know, we don't typically think of as a binge, but there you go, you experienced it in a client, but what's driving it correct,

Robyn Golberg 7:46

it's what's driving it and Munich could be chips, but also, it's the idea that the discomfort of the emotion that is occurring is too much to handle and deal with so a person is looking for escape, and that's been their coping mechanism is, it has been their way to provide comfort for themselves and it has served a purpose for them in their lives, or wouldn't be behavior that an individual would engage in.

Dr. Adrienne Youdim, Host 8:11

Can you also speak to, you know, like, classically is defined as like a certain amount of calories or the number of times per week or doing it alone is that relevant in your world in any way

Robyn Golberg 8:24

mean all listen to clients, Adrienne talk about like, today, another person was speaking about, Oh, I got together with friends. And it was associate watching the Academy Awards with bingeing. And it could be like you associate certain people in your life or those that are like eating friends, but also for many it could be, you know, eating alone or with others in their life, and also what's available, or I have clients that have Postmates over because they feel too shameful to go to the market, or to get takeout from a restaurant or I was listening to another person who was telling me they were waiting for their neighbors in their apartment building to go in the house because they were too embarrassed that one of the fast food establishments was going to deliver to her so there's so much shame centered around it, a person may or may not be with other people. And you know, when you're speaking about, you know, the number of calories, I mean, it's really the behavior. I feel like these other parts are irrelevant, because there could be smaller binges or could be larger. But I mean, there's so many levels and degrees of it.

Dr. Adrienne Youdim, Host 9:28

Yeah. And I think to your point, the shame is the primary features or factors, so if somebody suspects that they have binge eating disorder, or something along that spectrum, you speak to the kind of multi disciplinary approach but and of course, we always, you know, remind people that if they're in you know, trouble and need help, they should seek professional help, but can you just kind of take us through what that process looks like? What are some of the exercises that you might recommend or what are some of the things that you question or have the person introspect on Well, when

Robyn Golberg 10:00

I'm working with someone I mean, I like to go through what I would call is their blueprint of their psychology pertaining to how they approach food and the reasons they select what they select. But also, you know, the the bigger part backtracking is, I like to ask about each family members relationship, what is your mom's relationship to food, what is your dad's relationship, food, your siblings, etc, and learning about their upbringing, because so much of our upbringing, our culture is correlated in to how we approach food and body. And if, you know, we were put on a diet at a young age, and we've been guilted and shamed pertaining to various food choices that were considered forbidden and taboo in our house that shapes every person that makes the choices they do. So I really like to explore what their upbringing was like, and also know what what beliefs Do they have centered around food, because diet culture impacts each and every one of us. It's something we hear about day in and day out, whether it's through our friend, our family, our teacher going on the computer, social media, we're bombarded with messages, and unfortunately, many of them are not valid. And that feeds into our confidence and belief system, about our worthiness based on our appearance, the choices we make, I have failed because I'm not eating X, Y, and Z. So I really like to be able to, you know, hear what each person's belief system is, in addition to food rules they have, and they practice because a lot of my job is to clarify misconceptions that they have centered around carbohydrates, proteins, fats, versus them feeling that they have to be a human calculator. As you know, the example I was like to give is when we were babies and small children and you think of a baby, a baby's not going to be afraid that the boob will be there. Again, I better continue nursing because I won't be able to nurse later. It's like we were all intuitive eaters of being able to eat when we're hungry and stop when we're satiated. But slowly through the aging process, we become more and more disconnected to stop paying attention to our body's hunger and fullness signals, whether we're picking up messages from family members, or the medical community or trauma that we've gone through and diet culture, this influences how each person approaches any choice they're going to make for me, Adrienne, I go through so much of how they approach life and food now and what their earlier years have contributed to and when you're speaking about, I mean, it's not like a 1230 try these exercises in your on your way. I mean, I have people in my practice for years. I mean, I'm like a part of fit many families, because again, I want individuals to feel like they can go to a restaurant or order takeout or travel or what have you is opposed to Nope, I can only this amount of this, this amount of that has to be playing in I mean, because again, any kind of diet has a short term outcome mean, if a person was told, you know, if they had, you know, cancer, and their oncologist said, This chemotherapy medication is only 5% effective.

What would you take it? I know, I wouldn't, and actually mean, that's what diet culture and the dining industry is. I mean, the research shows that anytime a person goes on a diet, they might keep weight off for a few years, but that weight will come back and then stop. I mean, I want clients to succeed versus feeling okay, I can only do this for a shorter amount of time. And it's really being able to have that full life.

Dr. Adrienne Youdim, Host 13:46

Yeah, I mean, there's so much to unpack in what you just said, I don't even know where to begin, because it is it this is really a complicated issue. I think, you know, one of the things that kind of resonated it is this concept of like balance, you know, and we I think by human nature, it's easier to kind of be at the extremes in some ways at the, you know, polar ends and really navigate that middle line, whether or not you're talking about eating disorders or not, or whether you're talking about really anything relationships or education. I mean, there's so many different examples and ways that this can go. So I agree with you there. But I wanted to touch on this concept of intuitive eating and pick your brain a little bit because there is a culture or there is a narrative that people have around negative belief systems around food, but there's also a lot of positive belief systems around food, right? Food is also like you said community or ritual or religion. They're all these positive associations with food. And so I'm interested in kind of how do you navigate that concept of food is love, right? And somebody may come and tell you, I don't have an issue with food, right? I eat because I enjoy food and if I follow my intuition. You know, it feels good when I consume chocolate, for example, right? So there's of course, all that dopamine response to these foods, right? So you get this feeling of reward. How do you and I know there's so many questions in this but how do you tease out kind of that habitual pneus of consuming which can lead to overconsumption? Right? How do you reckon with that, in terms of intuitive eating,

Robyn Golberg 15:25

I think the long term goal is to feel like I can be carefree eat what I want not feel guilt, or shame or second guess or question what I had, especially when, you know, we talk about families, and I'm Jewish, and you know, when my dad was alive, you his whole thing was like, Go big or go home. So, you know, if my mom was having a dinner, there was always left, you know, always extra desserts always because that's what we do want to have just the abundance. So you know, whether it's like a Shabbat dinner, or you know, no rooms, like, that's fun. It's like what you do like it would be not pleasurable to go somewhere like, I'm hungry, I, you know, filled up, but I'm not emotionally satisfied. So being able to explore, like, sometimes we eat because it feels good, and it takes us back to a happy time, our life, like that's normal to do where it becomes a problem is when it becomes a reoccurring coping mechanism. Like when you said, the habitual part, many people are habitual, and especially in the last year, the pandemic feel fortunate like you and I, we have a schedule with we're seeing our patients, you know, throughout the day, whereas I've had many clients that either they're not working, or they're now homeschooling their kids, and that becomes their job. And

Dr. Adrienne Youdim, Host 16:49

the routine definitely affects there has a direct impact on their on their food and their diet,

Robyn Golberg 16:55

their routine. And like, I was asking someone this morning, cuz she was telling me, oh, I woke up at four o'clock, I had a banana and I had my breakfast, I said, Were you hungry? And she said, That's a really good question. I don't know, I just wake up. And I always have the banana because I've never thought of that if I'm hungry. So if a person's hungry, and when they're eating, or why they're eating, oftentimes, I see light bulbs go off like, Hmm, that's a that's a good point. So I think to be able, there are so many questions that I asked each person to be able to help them feel confident about. Yes, you know what, I'm going to my family's Friday night, we sit around the table for hours, and we're chatting, we're eating, we're having dessert and tea and coffee, whatever. Am I at that point? No, it's like what we do. But you know what, I look forward to it. And it's learning how to create boundaries and limits with not only honoring what their bodies time, and maybe the person's having, you know, half of the piece of cake versus all the cake because they just want to get the taste. And it's about the experience, like this is what we do on Friday nights. So I think it's really important to be able to look at what when we become intuitive, it's like, it's a lot of work to get back to that place. But it's the practice with anything like being a college tennis player, say, Yo, I didn't develop my wicked forehand cross-quarter, right, it was years and years of tennis lessons and hitting against the back wall and the ball machines. So my point is, it's the repetition and the practice of being able to say, you know, I know every Friday night, we meet for dinner, and it's many courses and the food sits on the table. And it's easy to just sit and mindlessly grab something, to be able to even take a few moments within yourself to be able to think about like, you know, a little check in is what I would say how am I feeling? Where am I at? Am I wanting a different taste in my mouth? Is it a craving? Is this a different dessert or food choice that I haven't seen or I've missed in a while there's so many factors contributing to how and why a person mindlessly or socially and such. So I don't know if I answered all your questions.

Dr. Adrienne Youdim, Host 19:06

Yeah, I mean, I you know, sometimes there can be a push back to that, right that for example, my personal ritual, and I have a lot of patients who you know, maybe they're empty nesters or they're older, right, their kids are out and so their ritual with their husband is to go out to eat, you know, on a nightly basis so it's not even just the once a week you know, treat and and at the same time, they might be kind of and I want to know what your impression is of the word trigger or trigger foods but maybe by being out there tempted repeatedly by sweets or desserts that are accessible to them now because they're out maybe they don't keep it in the home. How do you tease that out? right because I think someone can still say you know that this is not an emotional piece. This is not a you know, it's not driven by emotion. It is driven by the habitual pattern

Robyn Golberg 19:58

of their personal routine. When you said they're empty nesters they go out I listened to him to many of my clients that have felt like I'm leaving my house now over the pandemic. And we're out for dinner every night. I've now started seeing friends like I was listening to someone the other day who told me a few days a week she has Rami q she's marshawn. And she's Oh, and

it's in a different person's house. And you know, the different stacks and the food and I had said, Are you hungry? She's no, but it was so great to like, be with people. Everyone's snacking and thought. So sometimes we become like a chameleon, we see what other people are doing. It's like, Well, you know, the fear of missing out like felt like, yeah, yeah, I want to have some pistachios, and I'm gonna go grab the lavosh. And to do it, or is you're speaking about the accessibility. And not everyone has accessibility. But for those that do with when they're fortunate to be able to go out and know they can order dessert, I think it's single. Is this something that's, like, so delicious and special to me? Because my whole thing is like, Don't settle for bread. If it's not amazing. If it's not something that you're like, you know what, Robyn ? I really crave, like, you know, my friends ship me this chocolate from Switzerland. Amazing. It's not? Yeah, there's a lot of great chocolate stores in Beverly Hills in places, but also knowing where it's, there's that symbolic this like, Oh, my friend thought of me on her trip. And this is like from that country. So it's so authentic, to be able to say, look, we're always going to have temptation, but I think also to be able to look at am I eating it? Because it's there? am I eating it? Because I'm bored? am I eating it? Because I'm afraid I won't be given another opportunity to have this again, or this is my last opportunity. Where is it coming from?

Dr. Adrienne Youdim, Host 21:48

Yeah, I have a similar mantra, I think, which is make it matter, right? Like the eating chips on a couch maybe doesn't matter that's mindless. But that enjoyable meal with your husband or you know, the Friday night to your previous example matters. So like making it matter. And another thing that you brought up that I actually talked about in my book that's coming out this month hungry for more is this concept of I mean, the word that I think of is restriction and scarcity. But it tied into your comment about FOMO and how we respond to like free food at the supermarket or like the Costco right or how we respond to buffets. When people see this in front of them. There's almost this like fear or this compulsion to take advantage as if it's like the last time that they will see it right and not really thinking about it. Do they want that hotdog Cinnabon at Costco, but just the availability of it, that and the feeling that they'll miss out if they don't take advantage?

Robyn Golberg 22:47

Well actually, the research shows that individuals that grow up around food scarcity are more likely to struggle with binge eating disorder as adults. So you know when you say that, even so, you know, I can relate to the Costco example and places with samples but I've been anywhere where there's samples now I don't even know what's happening with that. But I do remember when the pandemic first started and you see the empty shelves in the stores and no toilet paper and PRL first time ever in my life that I became a hoarder was like I have to buy all those yogurts because I see my flavors not any it's like you get in this state of panic because I mean and now you know my husband are talking like I have all these vacuum sealed bags of rice and beans. And we're going through them now you know, I know you haven't used the rice cooker over here. You know this is easy I'm throwing in the microwave but yes, it's true I you know, I'm a little tuna fish out you know from a whole cans of tuna. But yeah, first time I ever felt I gotta get it because you may not have access.

Dr. Adrienne Youdim, Host 23:52

So I want to switch gears a little bit and talk about body dysmorphia and and dysmorphic disorders. And particularly because the data is so strong and how early it starts in children as early as like six year olds, can you talk a little bit about your experience with that different types of people that you see and what are your thoughts?

Robyn Golberg 24:14

I mean, in my practice, I see kids and their families starting at the age of six. So all ages, all genders and mean, I think part of your your discussing dysmorphia, or this fixation oftentimes is the comparison to your friend. Oh, you know, I see my friends. I was listening to a kid the other week that I was seeing and she's talking about she's comparing now she's at school, she's comparing her fingers to her friends fingers and my fingers don't look like hers. And I'm seeing well Now I understand why my legs look different from hers. And it's really I think oftentimes any kind of dysmorphia can oftentimes be derived for a child derive from their parents that haven't resolved Their own body image issues and they hear the parent or parents talking about what they don't like about their body and body checking, and oh, my nose is so big and you know, I just I hate this double chin, I'm on zoom all day. And kids are a lot more savvy and sophisticated than when you and I are kids. I mean, they're like Bible sponges, they soak up every message. And you know, we, of course,

Dr. Adrienne Youdim, Host 25:25

we always throw the mother's under the bus, right? Because as mothers, that's, you know, where we go, but it doesn't even have to be the family. Right? This is it is so ubiquitous, but also, I mean, we always blame social media. But the truth is, I remember growing up, you know, it was teen magazine that made me start feeling twitchy, you know, like comparing myself to images in teen magazine. But now it's like, everywhere, everywhere, everywhere, and kids have access to it million times a day. How do you I mean, this is this is, you know, a question of boundaries, of course, but how do you manage that when it is when kids are so inundated not just by maybe their parents, his, you know, his narrative, but just societal narrative?

Robyn Golberg 26:07

Well, it's hard because it's everywhere in society. And I've had number of clients that are on social media that are old enough to be they are unfollowing accounts that can be activating slash triggering for them. They know their parents have, but you probably know the term better than I, they have like a cap on how much time they have access to with being on their phones or different programs. I mean, I guess those apps have really come a long way too, with boundaries in regards to that. But also, it's really important to have role models in your life that fear to say, you know, I was listening to someone who's telling me her fourth grade teacher, who has been her role model, she's in seventh or eighth grade. And I asked her The reason How can this teacher is your role model, she's really nice. She's really smart, all all the qualities It was never like, because she has a flat stomach or her butts, the rides, it was nothing physical, it was all these qualities. So

Dr. Adrienne Youdim, Host 27:06

that's such a good strategy. I like that.

Robyn Golberg 27:08

Definitely. But also to my adult clients. And you know, we talk about and this, you know, helps them with their kids is being able to speak to someone you truly love. Like, how would your 100 year old self speak to you the way you're condemning your appearance or nitpicking apart physical parts of yourself? Would you speak that way to your child? Would you speak that way to your dog? Absolutely not

Dr. Adrienne Youdim, Host 27:32

absolutely a good point that I always bring up to, if you're not going to say it to your friend, and you know, your best friend, then you probably shouldn't be saying it to yourself. So the last thing I kind of want to hit on is there's this article that sends in my mind that I can't I wish I had it. But maybe like nine years ago, I was training for the marathon. And so I used to get runners magazine. And I remember this article that was comparing like healthy eating and runners to like disordered eating. And they were comparing these two concepts. And we're making the point that a good proportion of athletes had disordered type eating, but then the counter to that was that it's not disordered type eating, they eat a certain way, because they're competitive or, you know, for their craft or for their sport. It's another one of those kind of fine lines, you know, and I wonder how, what your response to that is? How do you kind of reconcile that, that it is restrictive, that it is narrow that it is focusing on certain food groups, but to their defense, it's in service of their craft or their work or their hobby?

Robyn Golberg 28:41

If you're a female and you're losing your menstruation, then in addition to the high amounts of movement they're doing their diet would want to be re evaluated for those

Dr. Adrienne Youdim, Host 28:54

with this more extreme cases? Of course,

Robyn Golberg 28:57

yes, I think what I was Division Two tennis player in college and then I was traveling for six years. And I remember when I stopped the triathlons, I thought there's a lot of issues in the sport, you know, hearing just the culture of what people he what they Doni and it was more just like a personal goal, but it became what what a person is speaking about, like no, no, I can't eat here because it's such and such like they're not flexible, adaptable, able to go with the flow. Again, that's a toss up to I think there is positive sports nutrition, but learning how to approach it like I have colleagues that are eating disorder registered dieticians and they help athletes be able to be the best they can be be able to be there optimal without having disordered eating, thinking and rigidity and rules.

Dr. Adrienne Youdim, Host 29:51

What it really comes down to is how you hold it in mind. You know, I think two people can be eating the same plate of food and one person can approach it from a Place of like abundance,

health nourishment, and another person can be approaching it from this perspective of like restriction. And I think just that nuance really matters in your relationship with the food. So it's interesting, I mean, something that, you know, I think about all the time and as a physician who specializes in weight loss, right nutrition and weight loss, I've kind of really started to incorporate the understanding of the underlying hungers, you know, from where I used to be trained, which was really just medications and, you know, dietary approaches, which I still believe in, but really incorporating, you know, what is that underlying hunger. And it's so interesting that when people come in with this desire to lose weight, you can unpack in every instance, the underlying, you know, drive, whether it's a hunger for self acceptance, or a hunger for autonomy, or a hunger for it, right. I mean, there's so many, I think there's about 30 that I talked about, and 30 chapters that I talked about, but it definitely is a

Robyn Golberg 31:00

universal human experience. Yes, that's true. That's a whole other episode. It's true.

Dr. Adrienne Youdim, Host 31:05

100%, I'm so glad you came and shared your expertise. And I wanted you to just highlight once again, your recent book, we will put a link to it in the show notes. But

Robyn Golberg 31:16

can you just talk about that a little bit? Sure. So my book is called the eating disorder trap, a guide for clinicians and loved ones. And it was written for basically what all healthcare providers are not trained in and being able to help support a person that struggles with any kind of eating disorder or someone that's been entrenched in diet culture. And it's nice because you don't have to be a clinician in the field. You could be a parent or a coach or a religious person to understand it was written in a very simplistic manner. And really, there haven't been enough resources in my book and I have included it comes from a nongender conforming perspective, a colleague of mine who's transgender, they went through my manuscript to make sure that everything is written in gender-affirming pronouns, I have illustrations that encompass all body shapes and sizes, it's directed from what's called the Hayes perspective, Health at Every Size. And really, I think this is just a starting point for families and all ancillary healthcare providers and anyone involved with someone that they feel like might be struggling to be able to have this as a resource. And then I also have a podcast too It's called the eating disorder trap podcast and each episode is 15 to 25 minutes all with clinicians in the eating disorder arena or body-positive field that have different topics that feel like can be certainly helpful to those that are struggling or those that want to help someone that is struggling

Dr. Adrienne Youdim, Host 32:53

and so that probably be found on your on your website. So go ahead and give us that

Robyn Golberg 32:57

Okay, so I've seen my book website which also includes my podcast is the eating disorder trap calm and my private practice website is askaboutfood.com they link together but yes, those

were there and I can also be found on Instagram Robyn with the Y Goldberg rdn and Twitter Robyn with a Why are gn wonderful.

Dr. Adrienne Youdim, Host 33:20

Thanks again for joining me. I appreciated having you.

Robyn Golberg 33:23

Thank you so much, Adrienne, it was great.

Dr. Adrienne Youdim, Host 33:25

This episode of health White is sponsored by Dehl nutrition, a line of functional nutrition bars and supplements I have personally curated to enhance health and well being You can find out more at Dell nutrition calm. As always, thank you so much for listening. I love having you with me and sharing these conversations with you. I hope that you have taken away a health bite as small actionable steps that you can implement in your life to help improve your own health and well being if you want to know more about me or get more inspiration, please follow me on Instagram at Dr. Adrienne Youdim You can also join me on my website at dradrienneyoudim.com and look out for my book coming up hungry for more a blend of story in science to inspire weight loss and well-being lots of good tidbits and actionable health bites that I'm super excited to share. Talk to you again next week.

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