



# Food Addiction Reset

## WHY EXERCISE?

**Goal.** The goal of the Handout is to educate food addicts about the benefits of exercise. It is important that food addicts cease exercising to ‘burn calories’ as this has been shown to promote overeating. Instead, food addicts can be motivated to exercise to improve brain health and well-being.

For food addicts, it’s good to know that there is a strong body of research showing that exercise can reduce cravings and hunger (Cornier, Melanson, Salzberg, Bechtell, & Tregellas, 2012; Evero, Hackett, Clark, Phelan, & Hagopian, 2012; Killgore, Kipman, et al., 2013; McFadden, Cornier, Melanson, Bechtell, & Tregellas, 2013; Oh & Taylor, 2012, 2013).

- There is also evidence that exercise can improve sleep (Kline et al., 2013).
- Exercise can even reduce stressful illness (Holmes, 2006).
- Create activities away from cueing television and kitchen (Manios et al., 2009)
- Reduce isolation (Goldfield, Adamo, Rutherford, & Murray, 2012)
- Improve identification with normal eaters
- Another important function of exercise is to improve cognitive functions. This makes it easier to make good decisions about abstinent foods and cue-avoidance (Annesi & Tennant, 2013; Goldfield et al., 2012; Killgore, Olson, & Weber, 2013).
- Food addicts often suffer from issues related to being able to move around easily. Exercise can improve mobility as a result of improved muscle, joint, bone, heart, and asthma conditions. Exercise also provides an alternative to watching television. (Earnest, Blair, & Church, 2010; Knobf, Insogna, DiPietro, Fennie, & Thompson, 2008; Manini et al., 2010; McAuley et al., 2009; O'Donovan et al., 2005; O'Keefe, Gheewala, & O'Keefe, 2008)
- A great benefit of exercise can be to improve and stabilize mood and self-esteem. This can reduce stress and eating triggered by emotions (Goldfield et al., 2012; Jerstad, Boutelle, Ness, & Stice, 2010).
- Exercise also helps our own body chemistry to work better. It can reduce production of consumption-stimulating peptides such as insulin (Earnest, Poirier, Carnethon, Blair, & Church, 2010; Goularte, Ferreira, & Sanvitto, 2012)
- Believe it or not, exercise also favorably impacts DNA and cell function. It has been shown to repair DNA which then avoids passing obesity on to children genetically. This can help overcome genetic predispositions to obesity (Mitchell et al., 2010) Exercise and even help repair mitochondrial function in the cell. The mitochondria produces the energy that the cell needs to function (Konopka et al., 2015; Voisin, Eynon, Yan, & Bishop, 2015).

## **Barriers to exercise in food addicts**

- Negative associations (Jackson, Gao, & Chen, 2013)
- Fatigue (Landis, Parker, & Dunbar, 2009)
- Loneliness, time (Kruger, Blanck, & Gillespie, 2006)
- Joint pain and damage
- Muscle atrophy (Bayol, Macharia, Farrington, Simbi, & Stickland, 2009)
- Depression
- Safety
- Unhealthy gym environments
- Exposure to processed foods
- Exposure to body obsession
- Amateur coaches with harmful expectations
- Amateur trainers making harmful nutrition recommendations
- Trigger to body obsession and weight loss obsession
- Weight gain from muscle mass

## **Application**

- Food addicts would benefit from knowing about the advantages of walking vs other forms of exercise (Oh & Taylor, 2013) There is no cost to walking. It's easy to access. And walking can be adapted to pace, available time, and difficulty.
- It is important to adjust exercise to progress (Hill, 2009)
- It is also help to refrain from weighing to reduce loss of confidence due to weight gain from muscle development.
- People seem to do better when they exercise in groups (Cowart et al., 2010; Goldfinger, Arniella, Wylie-Rosett, & Horowitz, 2008; Sbrocco et al., 2005)
- At the same time, food addicts should be conscious of avoiding the development of exercise addiction (Fuqua & Rogol, 2013; Mathes et al., 2010; Mussap, 2007)
- Education about exercise is helpful in motivating people to exercise. (Slater et al., 2010)
- It is wise to situate exercise in the context of lifestyle (Stice, Presnell, Shaw, & Rohde, 2005; Wing & Phelan, 2005).

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