

The Double Whammy: Being Overweight & Diabetic

“I Don’t Want To Change my Life!” Diabetes and You

By Fran Weiss for Eating Disorder Hope

It’s hard enough to struggle with eating urges, weight regulation, being overweight, and/or having a negative body image. But when you discover that excess weight has led to an insensitivity to insulin and ultimately to pancreatic damage—to Type II diabetes—it’s unimaginable and frightening. You’ve been working so hard to regulate your eating and exercise, maybe with some success. You’ve finally gotten a handle on part of the problem of looking and feeling better, and now suddenly “the problem” is something truly dangerous.

Type II diabetes often goes hand in hand with having a compulsive eating diagnosis. It can be the result of many years of overeating and living a too-sedentary life, where weight gain has crept up slowly. It’s always a shock to discover you have a serious, chronic disease. But when that disease requires daily disciplined management, significant lifestyle changes and is as far from glamorous as a disease can be—that adds insult to injury. Type I diabetics certainly also know the requirement of daily vigilance and what it feels like to have a chronic health problem.

Many people do regard diabetes as both insult and injury—an insult to their control of their lives, an injury to their bodies and self-image, their celebrations and family dinners. If you have diabetes, you may have to lose weight, which is hard enough; you will definitely have to regulate everything you eat and drink. Many people are angry and sad about the loss of spontaneity—no more nights out drinking with friends without setting a strict limit, no restaurant meals without asking what’s in all the dishes and moderating portions. Maybe you can still have a bowl of ice cream while watching TV occasionally, but not in the old way, not that blissful momentary escape. Add to that the inconvenience and indignity of having to monitor one’s blood sugar frequently (especially embarrassing if you’re single and dating), perhaps having to inject oneself with insulin, and it’s not surprising many people have trouble accepting their diagnosis and sticking to the prescribed regimen.

Diabetes means taking care of *you* first. It means incorporating good habits into every area of life. Balanced eating. Regular exercise. Stress management, which may include biofeedback or meditation, or just more time put aside for relaxation. These are good habits for everyone, but most can afford to ignore them from time to time. Not diabetics. Small deviations can have huge consequences, depending on the severity of your disease. If you don’t put yourself at physical risk, you can put yourself at emotional risk; insulin affects the brain, and therefore mood. If you’ve been a mostly cheerful person, you may find dark moods are suddenly part of your life. If you tend toward bouts of melancholy, those bouts might get worse. It’s a lot to handle.

The good news is that it’s usually hardest at the beginning. Habit can be a terrible enemy but also a great friend. You may need help coping with overwhelming feelings—grief for

your old freedom, anger that this is happening to you, or help simply getting out of your own way. Maybe you're not a "rules" person. You feel your identity in flux. You're afraid of what the future may bring. And if you've been ill for years before being diagnosed, as too often happens, you might not be able to imagine feeling better.

Talk to your doctor if you have questions about your insulin levels or mood swings. It's crucial for a diabetic to have a good working relationship with her doctor and to mention any problems that arise. But the psychological aspect is also important, and one that shouldn't be ignored. This is not an illness anyone manages with ease. It's normal to feel overwhelmed. It's also important to know that if you have recently become a Type II diabetic, you do have a good chance, with eating and exercise management and weight loss, of maintaining good blood sugar control, with or without medication.

Being a diabetic doesn't mean being an invalid. It doesn't make you less of a person, or less of a sexual being. It means facing an arduous and life-long struggle with courage and determination (and a good laugh now and then). There's nothing wrong with needing support achieving this, and it can be surprising how helpful it can be to talk to someone who 'gets' both the physical and mental effects of diabetes. You've received a stunning blow, but it doesn't have to be a knockout punch. You may even discover benefits in being more in touch with your body than ever before. But the greatest benefit, of course, is life itself, always precious and worth protecting.

You can feel better. Help is available. Do call me to set up a consultation.

Fran Weiss is a psychotherapist in private practice for over three decades, an Associate Clinical Professor at Mount Sinai School of Medicine and Sr. Psychotherapist to the New York Obesity Research Center, St. Luke's Roosevelt Hospital Center, the latter in conjunction with the **Joslin Clinic and NIH research granted studies, *The Diabetes Prevention Program and Look Ahead Study***. She has worked with diabetics for many years, in partnership with nutritionists and endocrinologists, tackling the frequently devastating emotional fallout from diagnosis. She understands how against type it is for some people to nurture themselves, rather than a partner, children, or an elderly parent. It may stir up uncomfortable feelings—guilt, unease, anxiety—things it can be hard to talk about, especially when everyone is saying "diet" and "exercise." Diet and exercise are important, but so are peace of mind, self-confidence and self-esteem.

Fran has also worked with cancer patients and people with other serious health issues, so she has a broad understanding of the effect of illness on people's lives. She's a specialist in eating disorders, weight regulation, and body image, and brings that experience to her work with diabetics, Type I and II—who may not ever had "issues" with food, but who have to learn to think about eating differently.