

The Evidence for Intuitive Eating
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Traditional weight loss dieting programs are typically ineffective in producing consistent long-term weight loss and maintenance. In addition to being ineffective, dieting often results in psychological distress and disordered eating behaviors. This dieting paradox has led to interest in non-dieting approaches to health and weight.

This past March, the Journal of the Academy of Nutrition and Dietetics (2014), published “A Review of Interventions that Promote Eating by Internal Cues” by Schafer and Magnuson. The authors reviewed all the published studies that examined intuitive eating interventions. They included all randomized controlled trials (RCTs), quasi-experimental controlled trials, and prospective cohort studies of adults published before December 2012 that taught participants to recognize and follow internal cues of hunger, fullness, and satiety. The researchers excluded studies of participants with clinical eating disorders. The authors searched for relevant articles using the terms: *intuitive eating*, *mindful eating*, *nondiet*, *non-diet*, *Health at Every Size weight intervention*, and *attuned eating*. After searching the published literature and excluding non-relevant studies, the authors found 24 relevant articles about 20 different peer-reviewed interventions that they included in the review.

The authors concluded that, overall, overweight or obese participants who learned to eat intuitively achieved significant decreases in weight or maintained their weight. Only 5 studies assessed cardiovascular risk factors. Despite a lack of weight loss, one study found that participants significantly decreased total and LDL cholesterol, while the traditional diet group did not improve on either measure. The other studies did not observe long-term changes in cardiovascular risk factors for either intuitive eating or traditional diet programs. Most studies that assessed blood pressure reported improvement in the intuitive eating intervention groups and only one study did not observe a change. Intuitive eating interventions resulted in significant increases in physical activity. This is likely due to the emphasis on exercising for pleasure and energy, which may be a more effective motivator than weight loss. Only 2 studies did not report increases in physical activity.

Intuitive eating was associated with positive effects on measures of eating behaviors and eating pathology. Participants in most studies experienced decreased dietary restraint and decreased restrictive dieting; several studies reported increased interoceptive awareness. Only one study reported increases in cognitive restraint and one study found no change. Many studies found that intuitive eating interventions were associated with decreased disordered eating behaviors including disinhibition, loss of control, binge eating, and symptoms of anorexia. Improvements were also found in psychological wellbeing; participants in programs that emphasized body acceptance reported improved self-acceptance, improved body satisfaction, decreased body image avoidance, decreased body preoccupation, decreased drive for thinness, and decreased negative self-talk. Several studies also observed improvements in depression, self-esteem, negative affect, quality of life,

ineffectiveness, anxiety, interpersonal sensitivity, and general wellbeing. Intuitive eating programs have lower rates of attrition than control groups and participants evaluate intuitive eating programs more favorably than control groups. The authors posit that unrealistic weight loss goals are associated with higher attrition in weight loss programs.

Of the studies that included long-term follow-up, participants in intuitive eating programs experienced decreased cholesterol levels, decreased blood pressure, increased physical activity, improved eating behaviors, increased self-esteem, decreased body dissatisfaction, and increased weight loss at 1 year follow-up. Participants also reported maintaining a non-diet approach 1 year after the intervention. Few studies followed participants for longer than 1 year, but those that did reported similar sustained improvements.

Overall, the authors of this review article conclude that intuitive eating helps participants develop a healthier relationship with food resulting in improvements in blood pressure, lipids, and cardiorespiratory fitness-- even in the absence of weight loss. In addition, intuitive eating has positive psychological benefits including decreased depression and anxiety, increased self-esteem, and improved body image.

It should be noted that this article is a review, not a meta-analysis. This means that the researchers do not use any statistical analyses to aggregate the data, determine results, and form conclusions based on statistical significance. Rather they simply describe the results of each study, which limits the strength of this study and the conclusions taken from it. This review, like any other review, is limited by the strength of the studies that make up the review. In my opinion, this review emphasizes some important gaps in the research literature. For starters, the authors only found 24 published studies on intuitive eating. This is far fewer studies than have been conducted on weight loss dieting. In addition, few studies utilized a RCT methodology, which is considered to be the "gold standard" of research methodology. Without RCTs, it is often difficult to determine effects of the intervention from other confounding variables. Many of the studies did not include any control or comparison groups, which makes it impossible to determine effects of treatment from effects of time or other variables. In addition, many of the studies had small sample sizes (some as low as 10 participants) and did not include follow-up assessments. So, while this study highlights the potential benefits of intuitive eating, further research is very much needed to provide clear evidence to support the benefits of intuitive eating approaches. Ideally, new research will use RCT methodology, but at a minimum should include a control or treatment as usual comparison group. In addition, future research should include large sample sizes and long-term follow-up assessments. I hope this review will inspire IAEDP-NY members to pave the way with the next generation of research on intuitive eating.

Reference:

Schaefer JT & Magnuson AB. (2014). A review of interventions that promote eating by internal cues. *J Acad Nutr Diet*; 114: 734-760.