SAMPLE PREVIEW

BED is the most common eating disorder — and the most *under-resourced*.

Structured eating, weight-inclusive care & the science of urge surfing. Built on NICE NG69 · AED Medical Care · HAES-aligned trials.

Inside this preview: the Clinical Guide cover, contents page and a chapter sample, two pages from the patient workbook, a complete recipe card with its allergen declaration, and a contents map of the full bundle.

SWIPE TO EXPLORE

VOL. Nº 02

Volume
Nº 02

BEHAVIOURAL CATALOG
EDITION · 2026.06

A CLINICAL GUIDE

The *Binge Eating* Nutrition Handbook

Fig. 53 · Hunger–satiety cycle

The Dietitian's Vault

FIRST EDITION
2026

Contents

APPROACH	DESCRIPTION	WHEN TO USE
Include "forbidden" foods	Deliberately include foods the person normally restricts or binges on (in normal portions, within meals). A biscuit with tea, a slice of cake as a snack, chips with dinner.	From early in treatment. Desensitisation to feared foods reduces their power to trigger binges.

CLINICAL TIP

"Eat the next meal." This is the most powerful instruction in BED treatment. After a binge, the person's instinct is to skip the next meal (restriction). Coach them: "Whatever happened at 3 pm does not change the 6 pm plan. You still eat dinner. Not a smaller dinner to compensate. Your normal dinner." This single behaviour change — eating the next planned meal regardless of what happened before — is the most effective way to break the restriction-binge cycle. It will feel wrong to them. It is the right thing to do.[5]

Flexibility Within Structure

Structured eating is a **framework, not a rigid regimen**. Build flexibility in from the start:

- Timing can flex by 30–60 minutes. If lunch is usually 12:30 but a meeting runs late, eating at 1:00 is fine.
- Meals do not need to be "perfect." A sandwich from a garage is still a meal. A packet of crisps is still a snack.
- Eating out, takeaways, and convenience food are all acceptable. The structure is about *regularity*, not *purity*.
- If a snack is missed, do not double-up at the next meal — just resume the pattern.
- Social eating occasions (dinner with friends, parties) fit within the framework. The structure adapts to life, not the other way around.

RED FLAG

If the person turns structured eating into another rigid diet (measuring portions exactly, eating the same foods every day, refusing to eat anything not on the "plan," feeling guilty if timing is off by 15 minutes), they are using the structure as a form of restriction. Address this directly: "Structured eating is a guide, not a rule book. The goal is regular, flexible eating — not a new set of food rules." Rigidity around structured eating is a sign that the restriction mindset is still active and needs therapeutic attention.

Workbook Sections

TIME OF DAY	WHAT I USUALLY EAT OR DRINK	HOW I USUALLY FEEL
Morning		
Mid-morning		
Lunchtime		
Afternoon		
Evening		
Night		

When Do I Eat and When Do I Skip?

Meals or snacks I regularly skip:

Why do I skip them? (Not hungry? Too busy? Trying to "make up" for eating too much? Don't feel I deserve to eat?)

What Food Rules Do I Follow?

Most of us carry unspoken rules about food — things we "should" or "shouldn't" do. Write down any rules you follow, even if they feel normal to you. We will work on these more in Section 8.

Fluffy Scrambled Eggs on Buttered Toast

Soft, creamy scrambled eggs on warm buttered toast — a simple, satisfying start to the day

SATISFYING | QUICK | BALANCED | COMFORT FOOD

I	10
SERVES	MIN

Ingredients

- 3 large eggs
- 1 Tbsp butter (plus extra for toast)
- 2 Tbsp full-cream milk
- 2 slices bread of choice
- Pinch of salt and pepper
- Fresh chives, chopped (optional)

ALLERGENS · Contains: Gluten (bread), Eggs, Milk. Always check labels on packaged items (stocks, sauces, plant milks, breads) and confirm with the patient.

Method

1. Crack eggs into a bowl, add milk, salt, and pepper. Whisk until well combined.
2. Melt butter in a non-stick pan over low heat.
3. Pour in egg mixture. Stir gently with a spatula, pushing eggs from the edges to the centre.
4. When eggs are just set but still glossy and soft (about 3 minutes), remove from heat immediately — they will continue cooking.
5. Toast bread and butter generously. Pile eggs on top and scatter with chives if using.

Recovery tip: Breakfast is the most commonly skipped meal in BED. Eating breakfast — even when you do not feel hungry — is one of the most important steps in structured eating. It sets the tone for the whole day.

END OF SAMPLE

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A CLINICAL REFERENCE FOR DIETITIANS

The *Binge Eating* Nutrition Handbook

You have just previewed 6 pages. Below is what's in the full bundle.

PART ONE

Clinical Guide

13 CHAPTERS · ~60 PP

- Understanding BED & differentials (DSM-5-TR)
- Assessment & screening (BES, EDE-Q)
- The restriction–binge cycle
- Structured eating & mechanical eating
- Triggers, urge surfing & mindful eating
- Body image & weight-inclusive (HAES) care
- Psychological approaches & counselling skills
- Special populations · case studies
- ADIME documentation & quick-reference cards

PART TWO

Patient Handout Pack

15-SECTION PATIENT WORKBOOK · 50 PP

- Welcome to your workbook
- Understanding your eating patterns
- My structured eating plan
- Understanding my triggers · my coping toolkit
- The binge urge diary · mindful eating practice
- Challenging food rules · self-compassion
- My body & me · support team · milestones
- 7-day meal ideas · food & mood diary
- Hunger–fullness log

PART THREE

Recipe Collection

47 RECOVERY-SUPPORTIVE RECIPES

- Breakfasts, snack bridges & midday meals
- Evening meals & winding down
- Fear food practice — normalising desserts
- Vegetarian & vegan mains
- Everyday snacks · batch-cook & freezer
- Allergen declaration on every recipe

$89

Three handbook parts · single instant download

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The Dietitian's Vault