Food, Fullness and Feeling Different in Your Body

Body image, self-perception and eating-disorder recovery

Eating, digestion and fullness create normal sensations, yet an eating disorder may interpret them as danger. Bloating, warmth, pressure or temporary changes can trigger fear even when the body is simply digesting and restoring.

What may be happening

- Fullness is a body signal, not a moral consequence.
- Restriction can make digestion feel more noticeable; individual medical advice matters.
- Trying to compensate for discomfort can maintain the eating-disorder cycle.

A sensation can be uncomfortable without being unsafe, permanent or a reason to punish yourself.

A gentle reminder

Body-image distress can feel convincing and urgent. You do not need to solve your relationship with your body in one moment. The next helpful step may simply be to pause, reduce checking or comparison, eat according to your support plan, and tell someone that the thoughts are loud today.

Ways to respond with care

Try these small steps

- Use loose clothing, a warm drink if appropriate, calm distraction and slow breathing after meals.
- Describe sensations neutrally: pressure, warmth, movement - rather than “bad” or “huge”.
- Follow your agreed meal plan and speak to your clinician about persistent pain or digestive symptoms.

A short reflection

What triggered me? Think about the situation, conversation, image, sensation or emotion that came first.

What did the eating-disorder voice ask me to do? Name the urge without automatically following it.

What would protect my recovery? Choose one small action involving nourishment, rest, connection, boundaries or professional support.

Words you can borrow

- "A sensation can be uncomfortable without being unsafe, permanent or a reason to punish yourself."
- "A thought is not an instruction."
- "My body deserves care even when my feelings are difficult."

Use this resource alongside care

This guide is supportive information, not a diagnosis or a replacement for individual medical, nutritional or psychological care. Eating disorders can affect people at any body size and can become medically serious. If you are worried about your eating, compensatory behaviours or physical symptoms, contact your GP or eating-disorder team as soon as possible.

Support and next steps

You deserve support before things become "bad enough". A GP can ask about eating and wellbeing, check physical health and refer to a specialist service when appropriate. You can take someone you trust to the appointment.

Seek urgent medical help now if you are

- fainting or close to fainting, confused, extremely weak or unable to stay awake
- experiencing chest pain, breathing difficulty, a very fast or irregular heartbeat
- unable to keep fluids down, severely dehydrated, or feeling at immediate risk
- thinking you may harm yourself or cannot keep yourself safe

In an emergency, call 999 or go to A&E.; For urgent mental-health help in England, call NHS 111 and select the mental-health option. Beat offers UK eating-disorder information and support; its helpline is 0808 801 0677. Availability can change, so check the organisation's website.

Trusted information

NHS: Eating disorders overview - www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/
NICE guideline NG69: Eating disorders - recognition and treatment - www.nice.org.uk/guidance/ng69
Beat: www.beateatingdisorders.org.uk

Until next time, give yourself space to breathe.

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Space to Breathe Therapy