

SPACE TO BREATHE THERAPY • SUPPORT HUB

Early Warning Signs of Relapse

Noticing change before a difficult period becomes a crisis

A lapse or return of symptoms does not erase recovery. Stress, change, loss, illness and transitions can make old behaviours feel appealing again. Recognising early signs creates a chance to increase support sooner and reduce secrecy.

UNDERSTAND**NOTICE****SUPPORT**

INSIDE THIS GUIDE

- Possible early signs
- Make signs personal
- When to act

Use this guide to understand, begin a conversation, or help someone feel less alone.

You do not need to read it all at once. Pause whenever you need to and return when you feel ready.

A compassionate information guide

This resource offers general information and does not replace individual medical or specialist eating-disorder care.

Understanding what may be happening

Possible early signs

- Skipping or delaying meals and snacks.
- More body checking, weighing, comparison or mirror avoidance.
- Food rules becoming stricter or the range of foods shrinking.
- Increasing exercise, pacing or distress about rest.
- Withdrawing from meals, treatment or trusted people.
- Mood changes, poor sleep, rising perfectionism or renewed secrecy.

Make signs personal

- Write down the thoughts, behaviours and situations that changed before previous difficult periods.
- Include less obvious signs such as overworking, cancelling plans or consuming more diet content.
- Ask trusted people what they notice first, while keeping decisions collaborative.

When to act

- Do not wait for weight change or a medical emergency.
- Contact your GP or eating-disorder team when symptoms return or physical health changes.
- Fainting, chest pain, confusion, severe weakness, uncontrolled vomiting, blood, or immediate danger needs urgent assessment.

Gentle, practical ways forward

Support should always be adapted to the person, their diagnosis, physical health, culture, neurotype and treatment plan.

WHAT MAY HELP

- Return to the last helpful structured plan with professional guidance.
- Reduce access to triggering scales, apps or content.
- Increase supported meals and check-ins.
- Name the lapse without shame: "Something is getting harder and I need more support."
- Write crisis contacts and practical steps where they can be found easily.

A gentle reminder

A relapse plan is not pessimistic. It is a compassionate safety net made while the recovery voice is easier to hear.

Please seek urgent help for fainting, chest pain, confusion, severe weakness, uncontrolled vomiting, blood, serious dehydration, or immediate risk of harm. In the UK call 999/A&E; for an emergency, NHS 111 for urgent advice, or contact your GP/eating-disorder team.

Trusted information

NHS: Eating disorders overview

<https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/>

NICE: Eating disorders: recognition and treatment (NG69)

<https://www.nice.org.uk/guidance/ng69>

Royal College of Psychiatrists: Medical Emergencies in Eating Disorders (MEED)

<https://www.rcpsych.ac.uk/improving-care/campaigning-for-better-mental-health-policy/college-reports/2022-college-reports/cr233>

Beat: Eating-disorder information and support

<https://www.beateatingdisorders.org.uk/>

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