

**Robin**

Hello?

**Claire**

Hello!

**Robin**

Hi Claire, how are you?

**Claire**

Hi, I'm good. Thank you. How are you?

**Robin**

Can you hear me okay?

**Claire**

Yes, I can hear well. Thank you. Thank you so much for talking to me about this. I really appreciate it.

**Robin**

Of course, of course. I'm passionate about it. I don't know if you know much of my background, but my sister had anorexia.

**Claire**

Oh, no, I did not know that.

**Robin**

Or if you just Googled and saw 'nutritionist' and that's why you reached out.

**Claire**

Oh, well, I'm sorry. Yes, I'd definitely like to listen to that more if you feel comfortable talking about that. First of all, would you mind if I record this?

**Robin**

No, please do.

**Claire**

Okay, thank you. Would you maybe be able to tell a little bit about your background and how you got to where you are now?

**Robin**

I originally wanted to be a nutritionist. I was getting my degree in nutrition and I was working. I was working during the day at Family Circle Magazine in their test kitchens and going to school at night at NYU to get my Master's in Nutrition.

And the reason I didn't continue on and start treating, working with clients and patients, is because I loved that food writing aspect. So it shifted my career, because my day job was so fun and I love writing recipes and cookbooks. So that's why I didn't continue on.

Also, I had to do a year-long internship in a hospital with the diabetes floor and I realized at that time that that's not something that I would want to do as a career. It was very troubling. There was noncompliance, it was heartbreaking. It just wasn't my jam. If you know what I mean.

**Claire**

Yeah. I guess to be constantly surrounded by that is a lot to take in.

**Robin**

Yeah. And, the situation I was in, none of those people were compliant. Their families were sneaking in food.

**Claire**

Yeah that makes it a lot more difficult.

**Robin**

Yeah. Yeah. Absolutely. It was really hard. So I love working with athletes, because they're compliant, they listen, they want to perform.

**Claire**

The motivation is there, I guess.

**Robin**

Yeah, much more motivated.

**Claire**

Were you interested in nutrition from the beginning, since you were young?

**Robin**

Yes, because I was also an athlete. I played lacrosse through high school, college, and a little bit for the women's US team, so my diet was important to me.

But again, my sister had anorexia when I was a senior in high school and I would cover for her when she would either not eat or make herself sick. I would cover for her because back then, no one really thought there were these dire outcomes of people that took it too far. So, she died from anorexia.

**Claire**

Oh, I'm so sorry.

**Robin**

Yeah, and so that's why I thought it was fate that you reached out. So, it became even more important for me to help out, and I think it's just so incredible what you're doing.

Because you will save us.

**Claire**

I'm so sorry. I think so many people are, like you were saying, completely oblivious to how severe it is. I was looking into statistics and someone dies from it every hour or so, something crazy like that.

**Robin**

Oh, I didn't even know that. Wow.

**Claire**

So I was like, oh my goodness, that's so troubling and not enough people know about this. So yeah, that's why I started this.

**Robin**

When she died, it was 1982. I was a senior in high school and, do you know Karen Carpenter? You probably do. She's the famous singer.

**Claire**

Oh yes. I've heard of her.

**Robin**

Yeah. She had anorexia. She died six months later and that's when everybody was like, oh. Damn. This is a serious thing.

Because with my sister, we were going to therapy. She was getting better. She was in a good place. She was engaged to be married. But, what it does to your heart, it just weakens your heart. And she died of an electrolyte imbalance, which is bad. Probably really common.

**Claire**

Yeah

**Robin**

So, I pivoted.

I thought that I wanted to be an orthopedic surgeon. I, working with athletes, pivoted and got a nutrition degree. It definitely changed my career path for sure. And again, I told you I didn't like working with patients. The diabetes was one thing, but then working with people with eating disorders, it was just too close to home back then.

**Claire**

Did you ever consider working with people with eating disorders specifically?

**Robin**

Yes, yes. I was a psychology major. A psychology nutrition major, because I was like, okay, that's it. This is what I'm going to do. No one else is going to die on my watch.

And then it was just too hard. I mean, I literally went off to college the fall after - six months after she died - and it was just too, too soon. And then my career just kind of went in a different direction, anyway. And I'm not even sure I would be that good one on one. I mean, I see some triggers now, like on Instagram. There's this really famous chef and she keeps getting thinner and thinner and thinner and I can't even look at her anymore.

**Claire**

Yeah. Yeah. It just reminds you and brings it back up again.

**Robin**

But I have helped so many, like my friends. My best friend's sister was struggling and reached out to me and many years had gone by, so I think I was good for her. But as a career, no.

**Claire**

Yeah. This is very eye opening to me as well, because I think it really just emphasizes how common it is and how so many people have it and a lot of times you can hide it. People hide it pretty well, so a lot of people don't even know that people are going through stuff like that.

**Robin**

They do hide it, yeah.

So my son runs track in high school and in college. I mentioned to him that all the girls look athletic.

There's only one girl on the team that I actually think looks anorexic, and I was kind of surprised and I said, "I'm so glad" - and this was recently, I said this a few months ago. "It's so great to see healthy girls without eating disorders. When I was in college, a lot of girls were really skinny."

He said, "Mom, eating disorders come in a lot of different shapes and sizes. There are plenty of girls on the team with eating disorders."

And I was like, "Oh, that's sad." Because they're hiding it. I mean, they're performing well, so that's why I thought they weren't anorexic, because they're still winning the races and stuff. But apparently there's a lot of stuff behind the scenes that he sees that is unhealthy.

**Claire**

I think so many athletes are so focused on their performance and develop eating disorders. I guess this is a common misconception, because a lot of people have this stereotypical image that you have to be super skinny and not eat anything to have an eating disorder.

But, like your son mentioned, there are several different types and I think it involves having a preoccupation with food. And this is not really eating specifically, but I guess it is, because so many of those athletes have way too low of a body fat percentage to be healthy. They lose their periods and there are all these adverse effects on them.

**Robin**

You're right. You're absolutely right. And that could be going on and I wouldn't know it because they look fine. But they might have amenorrhea. You're absolutely right.

**Claire**

Right. I think it's definitely pretty hard, because you can't really tell just from looking on the outside.

**Robin**

I was of the Kate Moss generation, where, if you were anorexic, you looked like that. Rail thin, no boobs, no butt, but it's not always that. But you're right, it's that preoccupation with what's going in your mouth, constantly obsessing over it.

**Claire**

Yeah. I guess for me also, I'm kind of in the process of recovering right now. That's kind of why I decided to start this. I was originally considered anorexic, but then I started having binge purge cycles, so then I was diagnosed as bulimic. Now I've gotten rid of the cycles, but I'm still underweight and a little too preoccupied, but it's getting better.

But, with a lot of people, if it came up, they'd be so surprised. I didn't actively bring it up, but they'd just be like, "Oh, wow, you act and seem so happy." No one would ever have been able to tell.

**Robin**

Yeah. Well, it's a silent killer. But with my sister, you could tell. Because she got down to 90 pounds. 89 pounds, and she's 5 '8".

But it's great to hear that you're in recovery because there's so much more available to you, to people now. There's so much more information. There's ways to get healthy without rushing it. Because, I think she may have been getting... you can't go too quickly if you've been underweight or starving yourself. You can't just all of a sudden start eating, your heart is... I don't know, maybe not you, but my sister was also bulimic.

So she would starve herself and then overeat and then... so who knows what damage she did. But, slow and steady kind of wins the race when it comes to recovery, is what my experience is.

And it may always be on the back of your mind. But, if you're managing it, then it's almost like, who cares? If you can manage it and stay healthy, get your period, have a family and do all that stuff - if you're thinking about food a little more than the next person, but you're healthy, then I feel you can't have everything. That's enough.

**Claire**

Right, I think it never fully goes away, but it gets to the point where it doesn't consume one's life.

**Robin**

It doesn't consume you, right, and everybody has their thing. That would be your thing or my sister's thing and, I mean, I'm a foodie too. I think about it a lot too. I don't count calories anymore, but there were many years in college when I was turning things over and looking at fat grams.

Maybe age has mellowed me out. I don't do that anymore, but everybody has their thing. There's people that obsess about exercise and weight lifting and, you're probably right about the body fat percentage, that you and those girls know exactly what their numbers are.

But I do think slow and steady wins. My sister would go to therapy on her own, and then she'd go with her fiance, and then we'd all go as a family. So it was a little bit of everything. So we would see how she was doing and then we could share our thoughts. So, I mean, sounds like you have good people around you.

[12:37]

**Claire**

Oh yes, I think the support of the family and the people around you is super important. At least from a personal experience, I would not have been able to get out of the bottom, when I was down there, by myself, but my family, my parents really supported me through it. So that was definitely a very big part of it.

**Robin**

You gotta have that support group. Every, I don't want to call it ailment, but everybody needs friends. Regardless of what the issue is, you need someone to bounce it off of or you'll feel alone.

**Claire**

Right. It's great to have people who support you. Because I think a lot of times when people end up doing things, like taking their life, it's because they don't have people around them to give them the support that they need.

I think it's also really good that it's not as looked down upon now as it was back then, which hopefully is allowing more people to open up and not be ashamed of it.

**Robin**

I think you're right. I think across the board, whether it's anorexia, bulimia, or depression. I have a friend whose son is 19. They were afraid he was going to off himself all through high school, and he's gotten help. I think they were very open about it. They would put it, their thing, on Instagram, he was open about it.

And because they were so open about it and nobody judged them, and it was an open line of communication, he's never been better.

**Claire**

Oh, I'm happy to hear!

**Robin**

I saw him for his birthday this summer and he said, "I never thought I'd be sitting here right now, and now all I want is next year." So it was just his support group and friends and not hiding it, putting it out there. When he was having some dark times, his mom would put these quotes on. So, I think the more it's talked about and the more it becomes, what's the word I'm looking for? When it becomes more acceptable. Then, the healing and health can begin.

**Claire**

Yeah, because I think a lot of people are super scared that people are going to judge them negatively for it. Even though a lot of times I think we perceive that people will react much worse than they actually would.

**Robin**

Indeed. And people are much more forgiving than we give them credit for.

I mean, there are some idiots out there. My grandmother would say to my sister, "Why don't you eat a sandwich?" You know what I mean? It's just so, so dumb. There are those people, but they are just clueless.

**Claire**

They're ignorant. I think a lot of times it takes a personal experience to really understand it. Or, not that you yourself have, but someone you know, I guess. In your case, you seem very knowledgeable.

**Robin**

I think your website is unbelievable. It's amazing.

**Claire**

Thank you. It's still a work in progress. I haven't put in a lot of information yet, but thank you.

**Robin**

God, it's just so thorough. It really is. I mean, kudos to you because you're young and you've done so much already.

**Claire**

Thank you. I really appreciate it. I think that because I'm super into science, I kind of decided to figure out what actually is going on, what causes these issues. Because a lot of it is just science. With bulimia, for example, the reason - at least that I've learned from the internet and the research - the reason that people have the cycles is because of the restriction. And then, because our bodies are pretty smart, we just go for whatever is gonna give us the most amount of energy, and so then we end up consuming all this food, especially sugar, in a short period of time.

Which then leads to the restriction again, which further causes your body to be like, "Oh my goodness, I'm starving. I need to store up on food." And that sort of thing. So, understanding that and realizing that, at least for me, really helped me see what the cause was and then be able to make decisions based on that, and how to get out of it, and that sort of thing.

**Robin**

Yeah. And also, it sounds like you have an appreciation of what your body needs. Especially because you're young, you would need fuel more often than, say, me, throughout the day.

It doesn't have to be all day. People can eat every two hours. I've just never really, unless it's just a handful of this or that, but I've never been that person. But, yeah, the fasting on a young person is so, especially a woman, is hard on the body.

**Claire**

Yeah. Because it just literally strips your body of all the nutrients it needs.

**Robin**

Right. Especially women. Bones and hormones.

**Claire**

Oh, right. The bones and iron and all that. And menstruation is a clear indicator of that, that you lose that when your body doesn't have enough of the resources it needs to support that system.

**Robin**

Right. And then usually that means - so if your estrogen is too low to support the monthly cycle, that also can lead to bone loss. Osteopenia, osteoporosis. I learned that because, I told you I was an athlete, a huge runner. So I played lacrosse. And then once I wasn't competitive anymore, I just turned to running.

And before I had kids, I would just run. I love, I mean, I was Forrest Gump, I just love to run. And I stopped hitting my period. And I wanted to have kids, so I immediately had to change. Once I got to that point, I knew it was too far, too much.



**Claire**

Oh, that's good that you realized that.

**Robin**

Yeah, so as soon as that happened, I went to the doctor to talk about it. I was like, "I'll just cut back or go slower. I'll just cut back on the mileage or I'll go a little slower."

I mean, the minute I did that, I started getting my period again. My doctor started to explain to me the impact it was having on my bones. And the lack of estrogens is... estrogen is carried in fat cells, and if you have too little, if your body fat is too low, that's when you lose the estrogen.

You stop getting your period, but you're also losing muscle mass and bone strength, all these things. And I was like, Oh God, so it's, it's more than just not getting your period.

**Claire**

Yeah, there's so many impacts that it has. And then it also just messes up with other hormones that are necessary, and just everything gets out of whack.

**Robin**

But you can turn it around. I mean, I was my own experiment. I was able to, all I had to do was cut back on the distance and my body adapted and went back to normal. It was interesting.

**Claire**

For that experience, do you think it was more because of the body fat percentage or the nutrients that you were eating?

**Robin**

I think it was body fat percentage because I have always eaten really pretty well. I mean I just love vegetables, I love lean protein, I love whole grains. And also, I've been writing cookbooks this whole time, so I'm always testing all the stuff that I'm cooking.

I think my diet was pretty good, I just think all it was was like a hair off, because it didn't take very long to get it back. So whatever it was, percentage wise - I never had it checked, so I really have no idea - was just a little tweak.

**Claire**

Yeah, it's crazy how fast our bodies can bounce back after that.

**Robin**

Yes. Yeah. And I wasn't young.

I was in my thirties. I mean, in my twenties it would've been even faster, but this was around my early thirties. But yeah, losing your period is a major red flag. If that happens, then you're like, okay, now I need to change it. My body's not doing what it's supposed to do.

**Claire**

Yeah. I think that's one of the biggest signs that your body's not getting what it needs. Because it just cuts it off since it's not essential. It's not that it's not important, but it's the least essential bodily function, I think.

**Robin**

And you don't have the hormone balance to make it happen.

**Claire**

Oh, right. I actually did not know that - about how estrogen is stored in fat cells. That's pretty interesting.

**Robin**

That's exactly what my doctor told me, and so, and I was doing a bunch of research on it, and I was like, 'Well, if I could just maybe, just get it back to the right ratio that I need for my body to function properly.'

And I still don't even know what that was. That, whatever it was, wasn't right for me - the fat percentage. So, maybe someone else could exist on it. Maybe those girls on the track team can, but for my body, whatever it was, it was wrong.

**Claire**

When you were an athlete, were you paying attention to the macronutrients?

**Robin**

Yeah, but just to make sure I had enough fuel so I could perform well. But, in college, I never counted calories. I mean, I would have pancakes on game days for the carbs. I would make sure I had protein the night before for energy, but I was never obsessed with it. I was working out, so I just ate whatever I wanted to without thinking about it.

It was when I was getting my master's that I would start to dig a little deeper, into the macronutrients and writing my stories. For a while, there was this whole - what years were these? the late nineties - when fat was the enemy.

**Claire**

Oh, yeah. I remember reading that somewhere.

**Robin**

And the fat free Doritos came out and whatever those desserts were, everything was fat free. It was so unhealthy, but that's what people were writing about. And what I was writing about, because I was writing for the latest trends.

People were counting fat grams, and not sugar. And now they're loading up on the good fats and counting sugar.

**Claire**

Can you maybe talk a bit more about the role that fat has in our bodies? Because I know it's very essential to have the fats - not just the fat cells or the adipose tissue itself, but the macronutrient.

**Robin**

Yeah, so there's certain vitamins that are only carried in fat cells. The fat solubles A, D, E, and K, are not water soluble. We need those, they are carried in our fat cells, our hormones. We need it for protecting our organs.

And here's something interesting. So, I moved across the country last September, and it was really stressful - a big cross country move, and it was partially stressful for that.

My first time I'm an empty nester, I moved my son, and my younger one into college. But it was good stress, right? It wasn't negative. All of it was good, but my cholesterol went up. I went for my annual physical, and she's like, 'Oh, your cholesterol.' And I just met another doctor, everything was normal. I'm like, 'Oh, no, this isn't good.' It's not like me. My cholesterol is usually really normal. And so I talked to her, talking about the stressors, like how I'm closer to my mom now and she's very stressful. And so I said, I'm a nutritionist. This is what I eat. And I said, 'Let's check it again in three months.'

So I started eating avocados. One or two every single day. I still do now, but for those three months, I was having oatmeal and avocados every single night, and my cholesterol dropped by 50 points. My triglycerides dropped by 80 points.

**Claire**

Oh my gosh, what?

**Robin**

Yeah. I was eating fat and dropping triglycerides.

**Claire**

How long did that take?

**Robin**

Three months.

**Claire**

Oh my gosh, what? That's crazy. Oh my goodness.

**Robin**

Three months. And now I still eat avocados every single day. Because that just changed my whole health. And I stopped seeing my mom as often, so that helped too.

**Claire**

Wait, so is that because of the fat content in the avocados?

**Robin**

Yeah, so, healthy fat helps bring down your triglycerides. Good fats don't raise your triglyceride levels - they actually help reduce them. So, because my mom's name is Dolly, the joke is now, 'More avocados, less Dolly.'

**Claire**

Oh! I love that mantra.

**Robin**

But, what amazes me is how your food choices can completely change your statistics - your cholesterol, your fat. It's just, it's unbelievable.

And fat was the enemy for all those years, and I think fat still is the enemy for a lot of people. There's still fatphobes out there.

**Claire**

Yeah, because I think there's just that perception, that connotation, that fat is just bad.

**Robin**

And french fries, yes. Today's National Burger Day, so burgers, yes, but, but olive oil, and olives, and avocados, almonds, walnuts - those are just so good for your heart and your triglycerides.

[27:18]

**Claire**

I know a lot of people with eating disorders are also pretty scared of fats, specifically because it has more calories than the other two. So I think people try to avoid them. When I was going through it, I definitely said no to nuts and anything like that because I was just like, 'Oh my God. The calories.'

**Robin**

Yes, I know, but you're more satisfied with less. Yeah. I mean, you could have a handful of nuts and be much more satisfied than an entire bag of pretzels.

**Claire**

Right. It's also not good, I think, to cut food groups out like that and to restrict yourself because that kind of just gets into the cravings.

**Robin**

Yes, I 100% agree with that.

That's my standard line when somebody says, 'What do you think of this diet?' And I'll say, 'Any diet that eliminates a food group, I'm not a fan of.'

**Claire**

Yeah, because they're all super important. They all serve their own roles.

**Robin**

Yeah, they all have a role. I have a really close friend in Arizona. I haven't seen her since I moved, and she's about, I don't know, six, seven years younger than me. And she was always in great shape - a little food obsessed, but not anorexic. She got pregnant, and wouldn't change her diet. She wouldn't eat all the things she should, and she didn't have a balanced diet. I remember she would eat a handful of almonds for lunch. And she was pregnant.

**Claire**

Was that because of the pregnancy? Was that related?

**Robin**

Yeah, she was so terrified she was gonna gain so much weight and then not be able to lose it. It completely changed her mentality. So she was athletic looking, and I used to run with her. And then she got pregnant and she just kind of lost it. So she had him - he's going into seventh grade now. I can hardly even look at her. She's 80 pounds.

**Claire**

Oh my goodness.

**Robin**

Yeah. It changed her whole body. And, she won't eat fat. And I mean, I think she just exists on fruits and vegetables, no sugar.

Her son wasn't allowed any sugar, and he's really little. He's half the size of his peers.

**Claire**

Sugar's also actually pretty important too. Not too much of it, and the right types of sugar, but it's still super important.

**Robin**

Yup. And so, I think it affected him.

**Claire**

Yeah. I think not having sugar just increases the cravings and makes you want it more, so then you just start thinking about it constantly.

**Robin**

Yeah, hang on. When the car service flags me down, we can even continue the call while I drive.

**Claire**

That would be great, if you feel comfortable with that.

**Robin**

Yeah!

**Claire**

Thank you so much!

**Robin**

Yeah, I'm excited to help. I mean, I think what you're doing is just incredible and groundbreaking.

**Claire**

Thank you.

**Robin**

Taking away the stigma, you know. The fact that my son said it's still really hidden - it needs to be addressed. People need to feel comfortable coming out and talking about it, getting healthy.

**Claire**

And, even now, there has been a major improvement in its acceptance compared to the past, but a lot of people still talk very negatively about this sort of thing. Even at school, people make comments like 'Oh, she's such a stick,' or 'Oh, she's gonna blow away in the wind,' just really insensitive comments like that.

**Robin**

But if they were thinking that you had depression, they would never say that, because they don't realize, I don't think, that it needs to be treated like you have depression in a way. Be more sensitive, don't make fun. They used to call my sister toothpick, because they didn't understand, but you would never say, 'Oh, cheer up,' to somebody who's depressed, right? Cause it's a struggle, it's definitely a struggle. It's something that you work on, and you need support.

**Claire**

Yeah, a lot of people, I think, also think that the person who's going through it is choosing to go through it, when literally no one who's gone through it would choose to be in that state. It's not something you can control.

**Robin**

Right. And, that's my point - my grandmother would say, 'Just eat a sandwich.' Like, no. She will not allow herself. It's such a control issue. It's just like there are other things that people do for control, that's just an anorexic's way: to control what you put in your mouth. It's a form of control. That's what we learned when we were going to therapy with her. She graduated high school a year early. She went off to college, super smart. And the therapist said, maybe she felt a little like her life was out of control and choosing what, when and how much to eat is a form of control. And it was the one thing she could control. And then that takes over.

**Claire**

Yeah, and it becomes an obsession.

**Robin**

Then, now you have an issue.

**Claire**

Yeah. If you don't mind me asking, did she develop it after she left for college?

**Robin**

Yes. Yep. Freshman year. Freshman year.

**Claire**

I see. Yeah, I think that the combination of the stresses and then also being away and all of that probably contributed.

**Robin**

Yes. And young. She was a year younger than normal freshmen.

**Claire**

Oh, right. Yeah. So then there's also the pressure.

**Robin**

I think she was 17.

**Claire**

Oh, my goodness. So she must have been a very bright girl.

**Robin**

Yes, she was. Yeah, it's really sad. And what bums me out is that it's avoidable, you know what I mean?

What was it really? Because we were doing everything we were supposed to do, doing the therapy, doing... She was getting better. It just was just unlucky because the electrolyte imbalance just stops your heart. That's what happens.

[34:26]

**Claire**

Would you mind elaborating on that a bit more, because I'm not sure I understand that too much?

**Robin**

No, so what happened was, her appendix ruptured, which could happen to anyone. It happened to me five years ago. It just happened, right? She was on the road to recovery for anorexia. But she had appendicitis, they took the appendix out, she was getting better.

She went in for a follow up a week later for EKG, just to check the heart rate - just a follow up after the surgery - and her heart rate was through the roof, pounding. And they sent her home. They should have immediately admitted her, but they sent her home. Yeah, because they're looking at this beautiful 21 year old girl looking fine, 'Ah, you're probably just whatever,' and so they sent her home. And she went home and passed out. And that was the end of that.

So, apparently what happens is when your electrolytes are out of balance, you are not able to do the sodium potassium pump, which keeps your heart beating. And they were whacked. I can't even believe that it takes so little to stop the heart. Right?

**Claire**

So, electrolytes - what exactly are electrolytes?

**Robin**

So, sodium and potassium work together to pump the heart. And when they're out of whack, your heart can't pump effectively, efficiently, or in her case, at all. You can look it up. Look up the sodium potassium pump, and you'll see.

**Claire**

So is that purely from her just not eating enough of the right foods? Or is it a longer term effect?

**Robin**

Well, so we also found out she was taking diuretics. Which anorexics do. She was supposed to be off them, I'm not sure if she was. A lot of them do that, so they... I don't know if you ever have...

**Claire**



There's a lot of ways that people can hide it. So, for example - I'm a little bit ashamed to admit this myself, but for weigh-ins...

**Robin**

Don't be. Your secret's safe with me.

**Claire**

It's okay, I'm pretty open about it now. But a lot of times, people have weekly weigh-ins to be monitored to make sure they don't go too low. But, there's so many different ways that you can fake it.

You can literally put on five or ten pounds just from chugging a bunch of water, which is actually another pretty big issue because some people have had seizures and have just died from water intoxication because they're trying to increase their weight.

**Robin**

I've heard that. That just happened last week, a woman did it. Did you read that last week?

**Claire**

I don't think I've heard any news about that recently.

**Robin**

And I always tell people that there's a difference of four to seven pounds just in water. I didn't know that there were weigh-ins and that's really scary, but I can see how people would do that.

**Claire**

Yeah. Do you know if the case from last week was specifically because she was trying to make her weight seem higher?

**Robin**

No, she was thirsty and drank. I forget how much she drank. She was out on a boat all day. Something about the story doesn't seem right, though. Because a lot of people get really thirsty and drink too much but they don't die. You know what I mean?

**Claire**

Yeah. Maybe, I don't know. But it's definitely because these girls are trying to make it seem like they reach the weight that they're supposed to be at, so that they don't get admitted or anything like that.

**Robin**

It's really scary.

**Claire**

There have been cases where people have died because of all of this water intake in such a short amount of time.

**Robin**

That's terrifying and I've never heard that before. That's really scary.

You might want to mention something like that on your website, too. There needs to be public information that this is deadly.

**Claire**

Okay, let me write that down. That's a good idea, I'll put that on the website.

[looking at diagram of sodium potassium pump]

Okay, so this is very interesting, this diagram of the sodium potassium pump.

**Robin**

What is it showing you?

**Claire**

It's just that it's very important and required for normal functioning, I guess. And I think that this is for all cells, not just those in the heart.

**Robin**

Oh okay, yup. You're probably right. Yep. I think so.

**Claire**

Yeah. Which means that it's even more important, because I guess your organs just start failing.

**Robin**

Yes, which is the whole problem. When you have too much water, it's the same thing. It's too much, your sodium levels drop.

**Claire**

Would that also be an electrolyte imbalance, then?

**Robin**

So this woman, from last week - she was with her family and everything, she had kids. She screwed up her balance because it was way too much water too soon. I mean, I saw it on Instagram and then I googled her to find out what the hell happened.

**Claire**

Right. Yeah, I think it also causes seizures and messes up the brain.

**Robin**

Yes, that's true, too. Yeah.

**Claire**

So, in terms of electrolyte imbalances, I guess it would probably cause complications if you both have either too much of the sodium and potassium or too little, right?

**Robin**

One or the other, right. So, if my sister was taking diuretics, it was probably that she didn't have enough sodium, I'm guessing.

**Claire**

Oh, I see. Yeah, that's also an issue with fasting, because when you fast - especially if you're just doing a pure water fast - then you just don't get enough of those electrolytes. I was reading about fasting and how it's important to replenish your electrolytes, and maybe have some electrolyte additives in your water to make sure that you don't have the imbalances.

**Robin**

Yeah. Yes.

**Claire**

When I was fasting, at the end I was just like, 'Oh my God, food!', and I would eat way too much at once - which also causes electrolyte imbalances, but anyways - and then I had a bunch of problems.

**Robin**

It gives you discomfort.

**Claire**

Yes, because all of it expanded a lot more than I wanted it to. Also, my digestive system got totally messed up. I was having diarrhea and constipation and all that.

**Robin**

Yes, that's what happened to her, too. I remember one time, she hadn't eaten for a couple of days, probably. I mean, she would just have tomato soup and saltine. That would be what she'd eat.

And then, she would make a pie and then eat the whole damn pie and feel horrible. And get sick. So, obviously you're not gonna have a good bowel system if your body is... and also, you're gonna wanna hold on to any kind of fuel you get.

**Claire**

Right. Yeah.

**Robin**

I mean, we all have off days. So, we used to do 'Sunday Funday' when my kids were little. It was kind of like an off limits day. We'd do whatever we want - we'd have pizza, and all this stuff. I would almost always have two more pizzas, and then I'd feel totally stuffed.

But, it wasn't like I starved all week because it was Sunday Funday. It was just one of those, 'let the kids have what they want - we all can have ice cream for dinner if you want,' one of those things.

**Claire**

Aw, that's fun. That's a good idea, actually. That's cute.

**Robin**

Yeah, so, if it's regular and it's weekly, then there's never gonna be like my sister with that pie, you know what I mean? It's something to look forward to. Some people call it a cheat day. Some people don't believe in it. Some people think you shouldn't do it. I'm all for it if it's still a balanced diet during the week.

**Claire**

Yeah, I agree with that.

**Robin**

One of my acupuncturists is this super famous acupuncturist in Arizona. She worked with Muhammad Ali. She's Michael Phelps' doctor. When I first met her and we were talking, she said she had a cheat day and I was like, 'What?'

I was like, 'Oh, I have Sunday, Funday!' And she's like, 'No, it's my Friday cheat day.' She's like, 'I have wine, I have whatever.' And I was like, 'That is so cool to hear!' Yeah. A doctor. .

**Claire**

I think that's super reassuring.

**Robin**

Yeah, it's kind of like a little treat, but if it's coming then you kind of just plan.

**Claire**

I think something that a lot of people with eating disorders struggle to see is that one day of 'off' eating or eating a little bit more than you should have isn't gonna make you gain 10 pounds or cause a noticeable difference in your appearance. You shouldn't just go and, like you said, starve yourself for the rest of the week because you had one extra piece of cake.

**Robin**

Right, exactly. Especially if you know it's coming - it's not like, 'Oh, it's my last chance. I have to do it all right now.'

**Claire**

Yeah. One of the big parts of bulimia is the whole restrictive mindset, like 'Oh, I have to have all of this now because I won't be able to have it for who knows how long again.'

**Robin**

And because 'I'm gonna throw it up, right? Yeah I'll have it now so I can throw it up.'

**Claire**

Yeah, a lot of people pre-plan - not pre-plan, I don't know if that's the right word, but they plan their binges. They're like, 'Oh, I'll binge on this night, but it's okay, because I'll throw it up,' and then, I don't know, it's just...

**Robin**

No, I know, I've heard that, too. I've heard people have binge parties. I think that's really weird - I mean, they all do it together, they eat everything and then they all get sick. I've definitely heard of that, which I think is really weird.

**Claire**

That's interesting, I have not heard that one before, binge parties?

**Robin**

Yeah, and maybe for some girls, that's the only time they'll ever do it, but for the other ones, or the ones that then it becomes a habit or a pattern... I remember researching it. If you throw up too many times, first of all, your teeth, right, you ruin your teeth.

**Claire**

And your esophagus.

**Robin**

And your esophagus, but you can actually flip your stomach.

**Claire**

Oh, what?

**Robin**

Yeah, look it up, because I remember this is so gross. How do you turn your stomach inside out? It can start to come up a little bit. Yeah, you have to Google that. It's been a while, but I remember seeing that. And definitely the teeth. Thankfully, my sister had beautiful teeth.

It wasn't often, she just did it, maybe, I don't know how often, only on those binges. She mostly starved herself. I was just telling somebody that last week. She mostly starved herself.

**Claire**

Yeah. It also affects your fingers, and you scratch your throat. There's just so many negative impacts of it.

**Robin**

Yeah. So that chef I told you about - that it's hard for me to look because she keeps getting thinner and thinner - she has marks on the back of her hand. And people are starting to write, 'I can't follow you anymore. Those are bulimia marks. I know those are from your teeth and not the oven.'

It's so sad and you just want to scream, 'Get help, get help,' and you're wondering why she's not. She's this public figure with millions of followers. How is this happening? Obviously this goes to show you it can happen to anyone.

**Claire**

What's interesting also is that for a lot of people, it's not that they don't want to recover, but there is a little bit of anxiety about recovering, which sounds kind of backwards. I guess I kind of experienced this too - the disordered processes that you're doing are kind of normal, and so breaking that routine is scary, even if it means getting better.

Also, I think a lot of people are terrified that they're going to be forced to gain all of this weight, and so that's not something that they want to do. And the control thing, like you said, which is what gets a lot of people into it in the first place.

**Robin**

Yeah, because I think if you don't have the control then you're going to lose control and you're going to go too far.

**Claire**

Yeah, so I think that's why a lot of people keep going and it keeps getting worse. The control just keeps getting more and more restrictive and then it turns into something really unfortunate.

**Robin**

Yeah. Yeah.

**Claire**

So for the macronutrients, like you were saying before, I was trying to determine what a good balance for that would be, because I know each of the macronutrients are super important. So what do you think a good ratio of that would be?

[51:37]

**Robin**

Well, I mean, what I tell people is, 'What's gonna make you feel satisfied and not miss something.' So are you a 60% carb person? Are you a 40% carb person? Do you like 40 percent protein? Do you know what I mean? Because everybody's different.

I could live on carbs. I mean, I love protein, but I could live on grains and vegetables and stuff. I do love chicken and turkey, but if somebody told me I had to give up one or the other, I would give up protein. Only if I had to. I don't know if that answers the question, but I think everybody's different.

**Claire**

I guess there's no magic number, really.

**Robin**

There's no magic number because some people that went on these all carb diets - and they eliminated the protein - they were craving. I mean, when Atkins was out and the whole keto diet, that's the extreme on the other way.

I'm starting to think, the way I eat now, I think it's 30, 30, 30. And then there's whatever that tends to be. But I eat an equal amount of carbs, protein, and fat now if I'm eating all these avocados.

**Claire**

Avocados! That's funny.

**Robin**

I'm trying to up my protein too. I just want to be more mindful of high quality protein, so I'm doing a lot of eggs, and chicken, and turkey, and steak, and stuff like that. For any given day, it could be different. I could be more carb heavy one day. But typically they say 20, around 20 to 30 percent fat, and then the way you want to split up the other two.

**Claire**

That makes sense. Thank you.

I think that one of the ways that some people get more comfortable with putting on some weight is by building muscle. I think a lot of people have recovered from their eating disorders by starting to work out.

Do you know the role that protein plays in building muscle? I don't know if this is in your field, but...

**Robin**

Well, it replenishes. So, after you've worked out, carbohydrates are great for your energy. But when you strain, for example, the way to replenish is through protein. You need a longer lasting source of energy to replenish the muscles that you've just worked.

**Claire**

It repairs tears or something, right?

**Robin**

Yes. Right. So when you're strengthening, you're making small micro tears. And for healing, you need to provide a protein source of fuel, because it's a longer lasting source of protein. So, muscle burns more calories than fat, and if you gain weight, a little bit of weight, it's a more efficient way to burn calories.

**Claire**

Yeah, I think that's how a lot of people have gotten over this. So, protein is important when trying to build muscle, basically?

**Robin**

Yeah, so, the protein is to replenish the muscle, not necessarily to make it a big muscle, to make it a strong muscle. So, for me, I'm not trying to be big when I do weights, I just want to stay strong.

**Claire**

But I think it also depends on how you train, because I think there's more of the endurance training versus the hypertrophy, where the muscle actually expands. So, I guess that's different depending on each person's goals, too.

**Robin**

Yeah, but definitely part of your recovery needs to be high quality protein. A lot of people do smoothies and stuff that have soy or almond milk or some protein powder in it, or egg whites, dairy, and that's for a reason.

**Claire**

Does it matter from which source you're getting protein from? So, the smoothies, for example, versus just chicken?

**Robin**

No. I'm a big fan of a whole food. So, a chicken or an egg versus a smoothie with, you don't know, a whole bunch of crap in it.

**Claire**

I feel like they're not as filling either.

**Robin**

I especially love egg whites. Because growing up, I was allergic to egg yolks. So I got really, really excited about the whites. Even last night I had an entire plate of egg whites.



**Claire**

And egg whites have all the protein too, right?

**Robin**

They have all the things you need.

When I was getting my masters, we based everything off of the egg. Egg was considered the gold standard.

**Claire**

Egg does so much for you, it's crazy.

**Robin**

Yeah, so last night, literally, I bought those cartons of 100% egg whites and I just cooked a ton. It was an entire skillet of egg whites with salt and pepper. And avocado.

**Claire**

Of course the avocado! Egg white omelettes are really good too, actually.

**Robin**

Yeah, omelettes. And so, yeah. Because eggs used to get a bad rap for a long time because they have high cholesterol. But, the cholesterol in an egg doesn't translate to cholesterol in your body. We don't make cholesterol from cholesterol, we make it from saturated fat.

**Claire**

Oh, what? I did not know that. Wait, so what happens to the cholesterol from the egg then?

**Robin**

Our body doesn't break it down or transfer it into cholesterol. We just don't absorb it. We get cholesterol from breaking down butter and heavy cream and steak, that's how our body manufactures cholesterol.

**Claire**

Oh. So is cholesterol good for you?

**Robin**

We have good and we have bad. We have the low density, the LDLs - those are the ones that can clog your arteries and can lead to heart issues. And then there's the HDLs, which carry the bad cholesterol out of the body. So, a high HDL and a low LDL number is good.

**Claire**

Oh, okay. That makes sense.

**Robin**

But, you do need cholesterol in the body. It does perform functions, we just need more of one than the other.

**Claire**

Yeah. Earlier, you also mentioned something about good fat vs bad fat, I think?

**Robin**

Yeah, so the mono-saturated fat is found in nuts, and olive oil, and -

**Claire**

And avocados!

**Robin**

And avocados! So that's heart healthy, good healthy fat - it lowers your triglycerides. And then there's the unhealthy fats. Of course we're learning more, but there's the trans fats that are made in a lab to make oil turn to margarine. Those are fats that our bodies can't process and they raise our triglyceride levels.

**Claire**

Oh. So those are bad.

**Robin**

Yeah. And then there's new studies that are coming out about palm oil and coconut oil. Coconut oil we used to think was bad because it was a saturated fat. But, we're finding that the body does not turn that into cholesterol, so that's why coconut oil has kind of become more popular.

So, there are the unsaturated fats that are good for the body, and then the saturated fats that you find in butter and steak, that raise the cholesterol levels that can lead to all those other problems. So it's that, in part, but then there's also weight gain that can lead to diabetes and all the other associated things.

[1:00:18]

**Claire**

Is there any way to tell if it's saturated or unsaturated without memorizing all of the foods that are in each group?

**Robin**

Well, I mean, I would think if you don't want to memorize it, you just think about where it's coming from. If it's coming from an animal or a lab, then it's saturated. If it's coming from a nut or a seed, or a fruit, like an avocado, a walnut, or an almond, it's unsaturated. So that's a good way to think about it.

**Claire**

Yeah, that's actually pretty helpful, because I did not know that. So, are all saturated fats bad?

**Robin**

In terms of animal fats, yes, but what they're finding out now is that... we used to say coconut oil was bad, but now we're finding out...

**Claire**

Oh, right. Yeah.

**Robin**

Yeah. Palm, and coconut oil.

**Claire**

Okay, yeah. I guess everything's really about just having stuff in moderation.

**Robin**

Yeah. Unless it's your cheat day. [laughs]

**Claire**

Sunday funday!

**Robin**

Sunday funday!

**Claire**

I think I'm gonna have to ask my parents to start doing that, because ice cream for dinner sounds so nice.

**Robin**

Oh my God, and they still talk about that one time we did that. Usually, they want something else, but they still talk about the one time they did that. Like 'I remember that one time you let us have ice cream for dinner.'

They would turn it into a big day when they were younger. We would go and buy a game that we didn't know how to play, and we would go home and learn how to play the game, and order pizza, and I would make chocolate chip cookies. It was all kind of wrapped around a game or an activity or something fun, so it's not just about the food.

**Claire**

Oh my God, that sounds so good. Honestly, my parents would want to do anything that gets the family together, so I think they'd be down.

**Robin**

Oh, and one time, we played Bananagrams! That was fun.

**Claire**

Oh my gosh, we love Bananagrams! We literally play that, like, every week. It's turned into such a competitive thing.

**Robin**

Oh my God, that's so funny, I love it! I have it sitting on my counter because we have my younger ones coming up on Sunday, and it's the first thing I wanna do, because I don't think he's ever played!

**Claire**

What?! Oh my gosh, whenever we go on trips we always make sure to bring it, like 'Don't forget the Bananagrams!'

**Robin**

That's perfect! And it's so travel friendly.

**Claire**

Yeah, because you can just bring it anywhere because it's in such a small container.

**Robin**

That's so funny. Alright, so Sunday Funday you must include Bananagrams. Or Uno. Uno's always a good one to stick in your bag, too.

**Claire**

Oh yeah, Uno's pretty easily transportable.

**Robin**

So, yeah. So it wasn't always about the food, it was definitely about, like, 'Let's just chill, let's not work, let's not do homework for a little while, let's just relax.'

**Claire**

Aww. I think that's so nice, because it just releases so much stress. And then, also, they're going to remember that for the rest of their lives, probably. They'll always look forward to Sunday.

**Robin**

Yeah, I hope so. And hopefully they repeat it too.

**Claire**

Yeah, start a tradition. I'll definitely do that with my kids, that's such a good idea. Food in general just has such a big impact on your mood.

**Robin**

Yeah. It's very social. I'm Italian, so we used to go to family dinners on Sundays. We'd go up to New York, and she'd been up cooking since 2 in the morning. It's definitely a social thing when you have that, you know what I mean?

**Claire**

Yes, and whenever you go out with your friends it's always, 'Oh let's grab lunch,' or something. It's just always such a social, cultural thing.

**Robin**

And it can make anorexics uncomfortable.

**Claire**

Right. That's, yeah I was about to say that actually. That brings so much fear to people struggling with eating disorders

**Robin**

Yeah. So, what I do, if I don't know, is I'll say, 'Let's go for a walk.' Because I know my one friend in Arizona, I'm never gonna meet her anywhere where there's food. Going for a walk is nice and low-stress. You're not staring at each other, it's kind of open, you can say whatever you want, you know what I mean? It takes the pressure off of the food environment.

**Claire**

I used to be terrified to go out to hang out with my friends, because when I was bulimic, going out to eat anywhere meant that I would come home and go totally insane with the food. So, it was such a big stress, and is probably a big stressor for so many people out there.

Not only do you constantly stress about food, but then you also start distancing yourself from people and a lot of times, you lose close relationships, and then you have even less support. It's just not great.

**Robin**

You're 100% right. Yeah, because you probably don't eat much when you're out, and then you go home and you grab whatever, and you're up later, and you don't sleep well. It's a vicious cycle, it really is. And, I mean, I lived through it, so.

**Claire**

Maybe that's something that I can actually include on the website - suggestions about asking to go for a walk instead of going out to eat.

**Robin**

Yes. I'm happy to help you with your website, if you want me to help you with some things. Since I've been there, and I still have current friends that are struggling.

**Claire**

Yeah, that would be so great, thank you! Because I don't really know too much of what I can include on there, so any ideas or suggestions or anything would be so, very much appreciated.

**Robin**

Of course, yeah.

**Claire**

Thank you so much! So I don't want to take too much of your time, because you said you had to go at 5.

**Robin**

Oh, yeah, well, I'm gonna be there in 5 minutes. I already said I was gonna be late because of the whole screw in the tire situation. But yeah, we don't have to have this be the only call. I'm here for you, I'd love to help. You can email me questions if it would be hard for us to get on a call, and then if you wanna jump on a call then we can schedule another one. But in the meantime, you can email me.

**Claire**

Thank you so much! I really appreciate all of this, and I honestly learned so much from hearing all of your insights and stuff, so I really appreciate it so much.

**Robin**

Of course! I'm so glad you reached out, I think it's fate. I've been through it, I'm on the other side of it, I have friends, it's just, as you said before, it's really common.

**Claire**

Yeah, it's really eye opening to me also.

**Robin**

My friend is in her 50s and she's anorexic, so, I mean, it's really common.

**Claire**

I guess that's another common stereotype - that it has to be teen girls, but it's not. My cousin, who's a guy in his 20s, is also struggling with something similar.

**Robin**

Yup. Men make up a very small percentage, but they are out there.

**Claire**

Yeah. They exist. Well, thank you so much, I really appreciate you talking to me!

**Robin**

Yeah, of course, let's keep in touch! Let me know of anything else you need, and I'm here!

**Claire**

Thank you so much! It was so nice talking to you!

**Robin**

Nice talking to you too. You take care.

**Claire**

Thank you, bye!

**Robin**

Okay, bye!