



QR code — Ivy Collaborative

IVY COLLABORATIVE HEALTHCARE

We help people Feel Good, Look Good & Function Well

2100 Central Avenue, Suite 6 | Augusta, GA 30904 | (706) 364-3461

www.IvyCollaborative.com

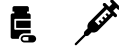


IDENTIFYING & MANAGING BINGE EATING

Self-Help, Traditional Approaches & Ivy Collaborative Support

1. What Binge Eating Can Feel Like

A stretch of eating past fullness, often fast and in secret, with a feeling that the brakes are gone—then guilt, disgust, or a plan to “be good tomorrow.” Binge eating disorder is the most common eating disorder in the U.S. It is not the same as extra helpings at a party, and it is not bulimia: there is no regular purge. Reward and impulse circuits, stress, restriction, and mood all feed the loop. This is brain and behavior, not a lack of manners.



2. Self-Help Strategies

- Eat regular meals; long gaps set up the next binge
- Keep a non-judgmental log of time, hunger, and trigger—not only calories
- Delay 10 minutes and change rooms when the urge hits; urge-surf, don’t argue
- Remove the most common binge foods from easy reach if that helps this week
- Tell one safe person; secrecy grows the cycle
- Know the myth: another crash diet will teach control—it usually trains the next binge
- See a clinician if episodes are recurrent or if weight, mood, or medical risk is rising
- Call or text 988 if hopelessness or self-harm appears

3. Traditional Medicine Options

- Psychiatric evaluation to diagnose BED and co-occurring depression or anxiety
- Evidence-based therapy (CBT, IPT) as first-line psychological care
- Medication when indicated (and monitoring of side effects)
- Medical screen for diabetes, lipids, and sleep apnea as needed
- Dietitian care that ends restriction cycles
- Understand limits: willpower talks and diet apps do not treat an impulse-control circuit
- Ask about FDA-cleared TMS when depression and loss of control travel together

4. How Ivy Collaborative Can Help

- Psychiatric evaluation of binge patterns, mood, and impulse control
- Exomind TMS (BTL) — FDA-cleared for major depressive disorder; considered when binge eating sits with depression or poor prefrontal control*
- Typical protocol: sessions under 30 minutes; often 6 treatments over 1–3 weeks; no downtime*
- Medication management and coordinated therapy when helpful

5. Helpful Links

Self-Help	Traditional Medicine	Ivy Collaborative
nationaleatingdisorders.org nimh.nih.gov / eating disorders Regular meals • Log • Support	mayoclinic.org (BED) apa.org / eating disorders CBT • Meds • Medical screen	ivycollaborative.com — Exomind TMS Schedule your Wellness Assessment Exomind TMS • Consultation Physician-directed care with Dr. Jocelyn Bayliss, MD dual board-certified psychiatrist

6. Contact Ivy Collaborative Healthcare

2100 Central Ave, Ste 6, Augusta, GA 30904 | 706.364.3461

Complimentary Wellness Assessments available • Psychiatric care for binge eating and mood

Loss of control around food is a treatable medical pattern—not a moral failure.



*Exomind (BTL) is FDA-cleared for major depressive disorder. Other uses (anxious depression, cognitive fog, binge-eating patterns, menopausal mood) are considered only after physician evaluation and are not separate FDA indications. Current clinic protocol is often sessions under 30 minutes, commonly 6 treatments over 1–3 weeks, and may be individualized. TMS is not emergency care. Metallic implants near the head, seizure history, and certain implanted devices are common contraindications. Crisis support: call or text 988. Serving Augusta, Evans, Grovetown, Martinez, North Augusta, Harlem, and Richmond, Columbia, and Burke Counties.