Plan tomorrow tonight

A regular eating planner

Fill this in the evening before. Aim for something to eat every three to four hours while you're awake, and keep it simple.

Tomorrow is: _____

Eating occasion	Time	What I'll roughly have	Where I'll be	Back-up if plans change
Breakfast				
Mid-morning snack				
Lunch				
Afternoon snack				
Dinner				
Evening snack				

Three questions for tonight

What time do I wake up tomorrow?

_____

Where could a long gap sneak in?

_____

What will I carry with me?

_____

If the plan slips

- Have the next planned meal or snack at its usual time.
- Don't skip one to make up for another, and don't squeeze in extra to make up for a missed one.
- One missed snack doesn't undo a day. The next time on the plan is a fresh start.

Tomorrow evening, looking back

What made it easier?

_____

_____

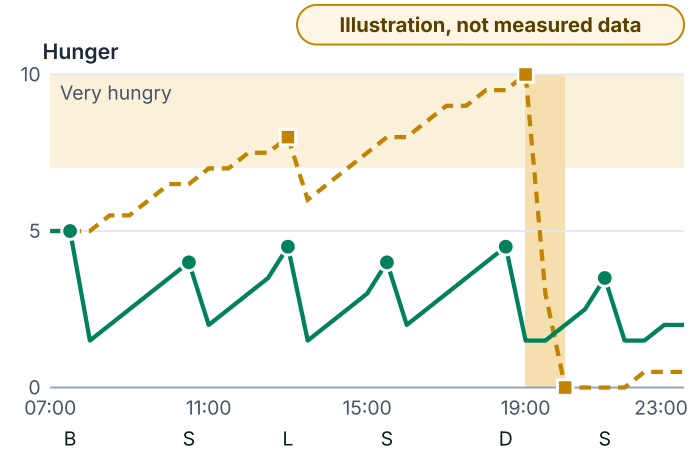
_____

What got in the way?

_____

_____

_____



How hunger can move through a day (0 means not hungry at all, 10 as hungry as you've ever felt). Dots and letters mark meals and snacks: B breakfast, S snack, L lunch, D dinner. The shaded hour is a binge. This shows the pattern in the CBT model of binge eating; it is nobody's data.

1. Regular eating is the first step in CBT for binge eating, and it's in the UK's national guidance.
   NICE NG69 (UK), 2017, updated 2020
2. Going long stretches without eating tends to come before binges in people who binge.
   Zunker et al. 2011; Stice et al. 2008
3. Your hunger hormones seem to learn when you usually eat.
   Frecka and Mattes 2008
4. Grazing all day doesn't calm hunger. Clear meals and snacks work better.
   Munsters and Saris 2012; Ohkawara et al. 2013
5. The body pushes back against weight loss mostly through hunger, not a 'shut down' metabolism.
   Polidori et al. 2016

On a GLP-1?

Small planned meals and snacks make it easier to get enough food, and enough protein, when appetite is low. If you're coming off, set the pattern up before your last dose, while the medicine is still doing some of the work. Talk to your prescriber about any change to your medicine.

Before you use this sheet

This is information, not treatment. If you're in treatment, your therapist's or dietitian's plan comes first. If you're underweight or have been eating very little for a while, don't use this without your treatment team: increasing food then needs medical support.

Worried about your eating? Talk to a doctor, or call the eating disorder helpline for your country. **United States:** ANAD, 1-888-375-7767, 9am to 9pm Central, Monday to Friday. **United Kingdom:** Beat, 0808 801 0677 (England), 0808 801 0432 (Scotland), 0808 801 0433 (Wales), 0808 801 0434 (Northern Ireland), 3pm to 8pm, Monday to Friday.

Ireland: Bodywhys, (01) 2107906. **Australia:** Butterfly Foundation, 1800 33 4673. Anywhere else, most countries run a free, confidential eating disorder helpline. You don't need a diagnosis to call any of them, and none of them is an emergency service.

The full article, with all the research: healthcount.app/blog/regular-eating-binge-restrict-cycle

Partly inspired by the Centre for Clinical Interventions' Regular Eating for Recovery information sheet (cci.health.wa.gov.au). This planner is original and isn't endorsed by CCI.