The Anderson Method

New book shows overweight people how to reprogram addictive habits, eat less without suffering, and lose weight for good.

There is a guaranteed way to lose weight—no ifs, ands, or buts. It helped Rennie Carter lose 55 pounds. It helped Linda Carson lose 70. Louis Yeostros lost 77. And husband and wife Celia and Paul Marchese lost 35 and 38 pounds, respectively.

It is the revolutionary weight loss approach developed by psychotherapist WILLIAM ANDERSON, LMHC, who lost 140 pounds more than two decades ago and has kept the weight off ever since.

In his popular new book, The Anderson Method (Two Harbors Press, 2009, $14.95), with a foreword by esteemed endocrinologist Mark Lupo, MD, Anderson says people who are chronically overweight and obese: (1) are addicted to food, and (2) have a weight problem because they overeat. Once you accept these two facts about yourself, the rest gets easier.

With The Anderson Method, you tackle the first issue—food addiction—by applying what he calls Therapeutic Psychogenic techniques. These are tried-and-true psychological tools that help you unlearn bad habits and replace them with new ones, which eventually become permanent through repetition and conditioning. And you stop overeating by following a simple, flexible eating program that's based on your own schedule, food preferences, and dietary needs.

In The Anderson Method, readers learn how to:

• Gain control over habits and compulsions that caused you to overeat in the past.
• Set up mechanisms that help you crave what makes you fit and feel repelled by what makes you fat.
• Quit dieting forever—and learn to eat whatever you want in ways that are healthy.
• Adopt new habits—from speed shopping with a list, to actively fasting between meals—that help you lose weight.
• Use Therapeutic Psychogenic tools that get your brain helping instead of hindering your weight loss efforts.
• Stop using food for pleasure, comfort, stress relief, pain management, and other non-nutrition needs.

For countless overweight people who have tried everything else and failed, The Anderson Method provides the first real hope and help. This book offers the secret to permanent weight loss—using the power of your mind to help you lose weight.

www.theandersonmethod.com
About the Author

WILLIAM ANDERSON, LMHC, is a licensed mental health counselor who specializes in helping people overcome their food addiction, lose excess weight, and regain their physical and emotional health. He is author of The Anderson Method (Two Harbors Press, 2009, $14.95).

Anderson has a remarkable personal story. When he was in his early thirties, he tipped the scale at more than 300 pounds. Having been overweight most of his life and obese for much of it, he had tried to control his weight starting as early as age seven. Nothing worked. In 1983, all his years of being overweight, dieting, failing, and then suffering the emotional aftermath reached critical mass. When he finally understood the psychological and behavioral components of his condition, he “got it” and lost 140 pounds.

That was more than 25 years ago, and Anderson has maintained his ideal body weight ever since. After this life-changing experience, he devoted his professional studies and practice to helping others with serious weight problems. He has helped many people lose weight and regain their health and happiness using his method, and he and they have shared their success stories and before-and-after images on television, YouTube, and in print.

His success led Anderson to write The Anderson Method so his proven techniques could reach a much wider audience. Since its publication, the book has sold out at several Florida Barnes & Noble bookstores, is a regional best-seller in the diet, health and self-improvement categories, and is already in its second printing.

Anderson loves talking to all kinds of audiences about food addiction, emotional eating, and the psychology of weight loss, and has an upbeat, refreshing take on how to lose weight by eating in a new, healthy way—instead of by dieting.

Anderson has a private psychotherapy practice in Sarasota, Florida, and is currently training other therapists to provide The Anderson Method in their own practices. He serves Sarasota’s community mental health efforts as a clinical volunteer at Genesis Health Center for the uninsured and medically indigent, and is an avid fisherman, cook, and lifelong student.
Six Behaviors of a Successful Undereater

Conscious eating.

Don’t put anything in your mouth without knowing how many calories it has.

Planning ahead.

Don’t eat spontaneously. Plan the night before what you’ll be eating the next day, and write it down. When you wake up, you’ll already know everything you’re going to eat today.

No diets.

You are not eliminating carbs, drinking shakes for meals, or living on cabbage soup for days. You are eating foods you want to eat for the rest of your life while you’re losing weight, and making permanent lifestyle changes instead of dieting.

Fasting between meals.

In between meals, you are not doing without or doing nothing. Instead, you are actively engaged in an important activity that supports your success. You are fasting—consuming nothing but noncaloric drinks until the next meal you’ve planned.

Undereating during the week, eating just about anything on weekends.

By budgeting your calories Monday through Friday—eating one third of your metabolic burn rate—you can eat up to your burn rate the other two days. Food and eating become extremely enjoyable this way, and it gives you a chance to relax, unwind, and reward yourself for practicing great habits all week long.

Establishing an undereater’s habitat.

Don’t stock your cupboards and fridge with goodies to forage through. Make your house a “safe” environment that supports your ongoing success.

For more information, contact:
CATHY S. LEWIS
CLEWIS1333@AOL.COM
(845) 679-2188
CSLEWISPUBLICITY.COM

www.theandersonmethod.com
Nine Therapeutic Tools to Achieve Goal Weight

Self-image and body image. Your brain takes its orders from your imagination and thoughts. If you imagine yourself at your goal weight, your brain knows what to do to make that happen.

Modeling. Consciously decide to stop copying role models you’d rather not follow, and intentionally choose models who are trailblazing the path you’d like to take.

Written goals. This can be as simple as a to-do list, a letter to yourself, or a Post-It on the mirror saying “120 by December 1.” Something very powerful happens to the mind when you write down goals and revisit them daily.

Vision mapping. Make pictures of what you want to look like (find a body you like in a magazine, and paste a photo of your head on it). Looking at these images each day is the equivalent, for your brain, of typing in the destination for a GPS and pushing “enter.” Your brain will help your body arrive at that visual goal.

Stimulus control. You may need to drive home a different way, quit bowling, or quit coffee hour at church. You may even need to avoid certain friends. Remove eating and craving triggers.

Aversive conditioning. If you are considering eating something that’s not on today’s plan, say to yourself—out loud, if you’re alone—“Wait, if it’s not planned, then it’s overeating. Overeating is what made me fat. I’m on my way to 120.” Then form a mental picture of what you were going to eat that’s unappetizing. Imagine the food crawling with bugs, or think of who handled it before you.

Self-talk. Be conscious of everything you think, because if you think it enough, you will believe it. If the scale reads higher than yesterday, even though you’ve stuck to your plan, say out loud, “Liar. I know I’m burning fat because I stuck to my eating plan. This is water weight.” Don’t let negative thoughts intrude.

Self-hypnosis. Good self-hypnosis would involve saying every morning, “I’m getting better at this undereating every day. It’s not even hard anymore. I’m losing weight like crazy.”

Reframing. Practice changing the meaning of something by looking at it in a new way. Instead of feeling deprived when you feel a twinge of hunger, reframe it by thinking: “That means I’ve burned the calories from my last meal, and now I’m burning fat!”

Examine and change your beliefs. You can’t lose weight? Wrong. Your metabolism is to blame? Wrong. Tell yourself that these statements are irrational and untrue, and you will soon stop believing them.

For more information, contact:
CATHY S. LEWIS
CLEWIS1333@AOL.COM
(845) 679-2188
CSLEWISPUBLICITY.COM
Suggested Interview Questions

1. How did you come to write *The Anderson Method*?
2. What are the basics of The Anderson Method?
3. Are there any food restrictions with The Anderson Method?
4. What is food addiction, and how do we become food addicts?
5. How does a person with no willpower develop it?
6. Talk about “positive brainwashing” and how to use it to combat food addiction.
7. How can people use behavioral psychology tools such as reinforcement and conditioning to change their eating?
8. How do you break a bad food habit, such as snacking at night?
9. How can we change our body by changing what we think?
10. Give a concrete example or two of how to use thought to reprogram the brain.
11. Why do you believe dieting is a surefire way to gain weight?
12. Is exercise necessary to lose weight?
13. What are some of the most common myths or mistaken beliefs people have about losing weight?
14. Why do you think The Anderson Method works for people who have failed on every other weight loss program?
15. What are the most common reasons people gain weight?
16. What is “undereating,” and is it nutritionally sound and healthy?
17. How do people keep from feeling deprived while they are undereating?
18. Name some specific behaviors that undereaters need to adopt.
19. What are some habits to install that support weight loss success?
20. What is Therapeutic Psychogenics?
21. How can psychological processes and techniques generate weight loss?
22. Give examples of specific Therapeutic Psychogenics techniques that are behind the miraculous changes your clients experience in their eating behaviors and weight.
23. For most people, overweight or not, food fulfills needs other than just nutritional ones. How do you deal with a patient who eats for comfort, pleasure, or stress relief, for example?
24. What are people who try The Anderson Method most surprised by?
25. Share a story about one of your successful clients.

“I have seen this phenomenon over and over with my patients: When a person expects that they will get better, the mind and brain do something to make it happen.”

—William Anderson, LMHC

For more information, contact:

CATHY S. LEWIS
CLEWIS1333@AOL.COM
(845) 679-2188
CSLEWISPUBLICITY.COM

www.theandersonmethod.com