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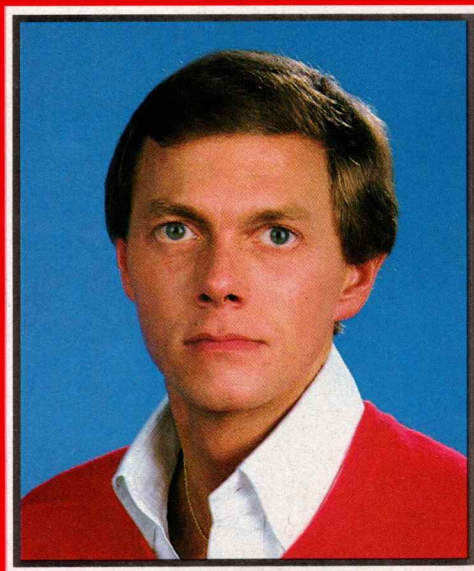
weekly



THE KAREN CARPENTER STORY

BY HER BROTHER

**'Richard,'
she said,
'I realize
I'm sick
and I need
help.'**





A BROTHER REMEMBERS

An account of Karen Carpenter's brave battle over the years against anorexia nervosa

by Richard Carpenter

Nine months ago singer Karen Carpenter fell victim to heart failure after an eight-year battle with anorexia nervosa. She seemed to be on the verge of recovery when she died at the age of 32. After spending almost all of 1982 undergoing treatment for the eating disorder, the 5'4½" Carpenter had managed to pump her weight from a frail 80 pounds to a nearly normal 110.

Although he had been witness to her long struggle, Richard, her mentor and sole sibling, was stunned by Karen's sudden death. Shortly before, the two singers had been at work on Voice of the Heart, their 12th album.

Determined not to let their final project sink into limbo, Richard returned to the recording studio last March. The months-long task of adding tracks to her completed vocals proved poignant: "Recording's so sophisticated these days that it sounded as if she were right there," Richard says. In October, as Voice of the Heart was being released (and he departed on a promotional trip to Japan and Australia), Carpenter, 37, sat with Correspondent Suzanne Adelson in the sunny living room of his suburban Downey, Calif. home and talked for the first time about Karen's troubled final years and about his effort to deal with her death.

There's no preparation for that kind of loss. It would have been enough of a shock if she had been an invalid, but I had spoken with Karen the day before she died, and she sounded absolutely fine—she called me from her condo in Century City to ask about a new videocassette recorder she wanted to buy.

I was still asleep when I got the tele-

phone call from Mom the next morning. [Karen collapsed in the bedroom that parents Agnes and Harold kept for her in their home. Since she needed a new wardrobe after gaining weight, Karen had planned a shopping trip with her mother and had slept over that night.] Mom was so hysterical I could barely understand what she said. As soon as I could grasp what happened, I tore out of here and drove to my parents', just a few miles away. I arrived just as Karen was being brought out of the house on a stretcher.

Mom and Dad and I sat in the waiting room [at Downey Community Hospital] after Karen was taken into emergency. After about 45 minutes we were told she was gone. My immediate reaction was anger—anger at the waste of her life and the loss of her talent. Then the grief set in. . . .

The shock was tremendous—I knew she was ill, but not that ill. But the more I look back on her life, the more I can see the indications.

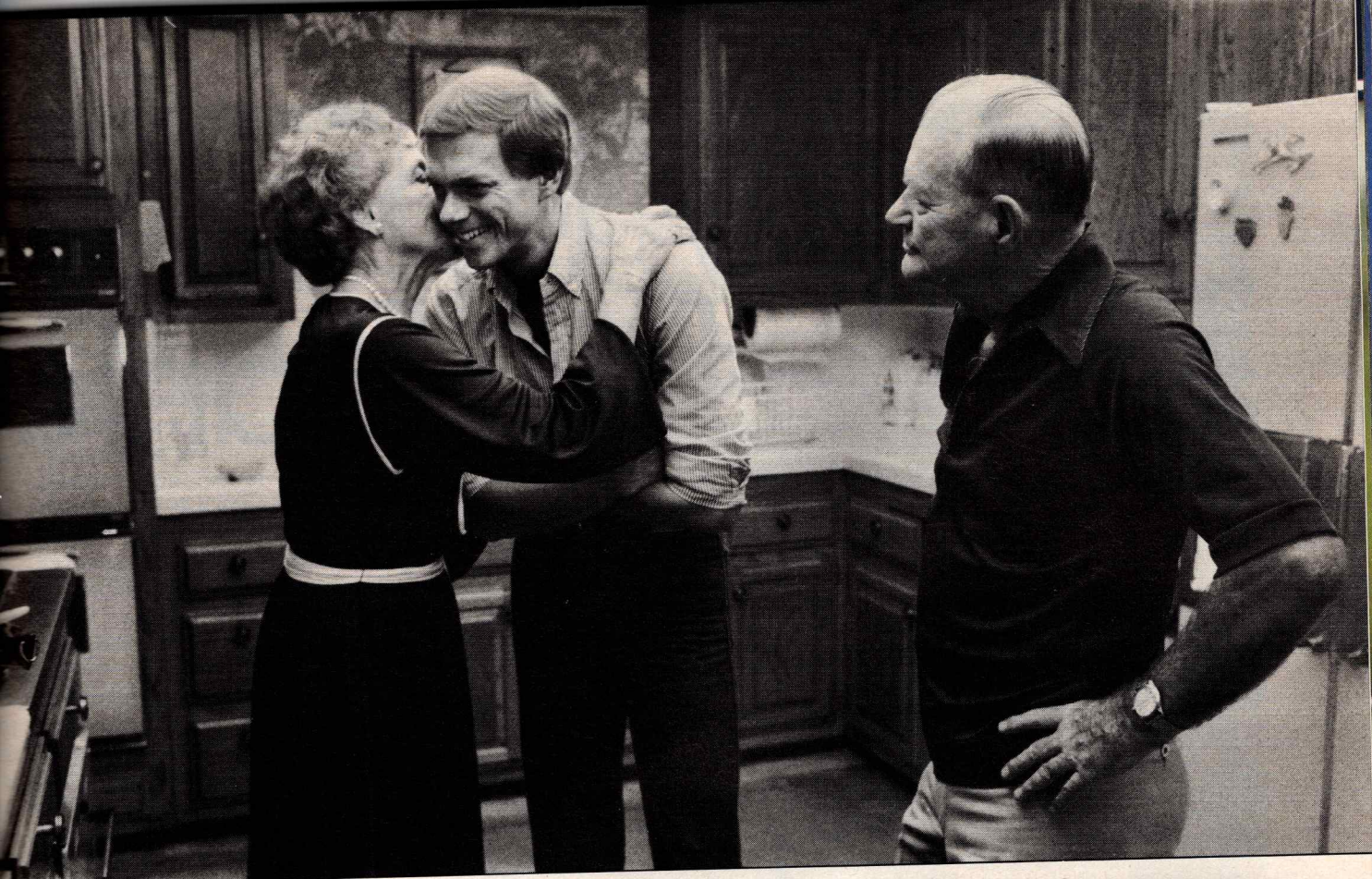
Karen had been a little overweight as a teenager—she loved tacos and chili. But we never teased her—to us, she wasn't that fat. When she was 17, she went on the Stillman Diet with a doctor's guidance, and she lost between 20 and 25 pounds. She was at her best weight—between 115 and 120—until 1975, when the illness first became serious.

That year we had to cancel a European and Japanese tour because her weight was way down. She was tiring easily—she was exhausted. We'd gone from recording our *Horizon* album straight on the road for the summer tour, then on to Las Vegas, where we did two shows a night. Finally she went into the hospital for five days of bed rest and then spent almost two months in bed at our parents'.

It was right around that time that we

Shortly after her November 1982 release from the hospital, Karen was back in a Los Angeles recording studio.

CONTINUED



Richard visits Agnes and Harold Carpenter in Downey. Harold is a retired printer, and Agnes "ran the family shop," says a former manager.

Cover

heard about anorexia. I don't recall how we learned about it—mainly we all just encouraged her to eat more. Mom cooked good healthy meals. Karen was never into binge eating—she merely picked at her food.

People are always trying to find a link between Karen's illness and a single heartbreak, but I don't associate it with anything. It definitely wasn't related to a tragic romance, as has been implied. [Before her brief marriage to Tom Burris] she did have a romance with Terry Ellis [an executive with Chrysalis Records], which didn't work out, but they remained friends.

When her anorexia appeared, things were going well in our careers and she was apparently happy. Still, she didn't eat enough for the schedule we were keeping—she lived on salads, maybe dry toast for breakfast. From early 1975 on I tried every method I knew to get her to eat. I would scold her, and she would say I was getting upset over nothing. There were times I did lose my temper, but it was always out of love.

Karen was always worried about the way she looked, so I tried to appeal to that. I told her she was too thin and

that people were noticing it. And that she wouldn't be able to continue our schedule if she didn't get more fuel. Although her voice was never affected, you could hear gasps from the audience when she came onstage, and there was considerable mail from fans asking what was wrong. Eventually, though, my parents and I realized that there was nothing we could do except state what was on our minds. We never knew how to help her.

In late 1981 she reached the stage where she came to me and said, "Richard, I realize I'm sick and I need help." It was then that she decided to go to New York . . . someone—I don't know who—had recommended this treatment to her, and it seemed the only way. She'd never been in therapy before nor felt the need—none of us were great believers in it.

She made the trek to New York, which was quite a move, leaving everything behind and living alone for months at the Regency Hotel while she was in therapy. She would call home frequently and talk of being homesick, but she was determined to stick it out.

I have to be honest—I'm bitter about the treatment she received.

While a therapist is working with an anorexic, it takes months, if not years, to overcome the illness. And during the therapy, the person is literally starving



The Carpenters (photographed in 1958) were so close "no one could ever get in the middle," says a business associate.

herself. That does a lot of damage to the body.

Karen had been in therapy for nine months or so, and the therapist was getting nowhere. She wasn't putting any weight on—if anything, she was losing. I was extremely upset about that. Finally Karen was put into Lenox Hill Hospital [checking in under an assumed name] for force-

eeding to put some weight on her.
 We all went to see her in the hospital. She had been down to 80 pounds, and she was about 110 when she came home to L.A. for Thanksgiving 1982, when we had turkey and all the trimmings. She was definitely improved, but there were signs that she wasn't 100 percent turned around—she was picking at food, and there were certain rituals in eating. In a restaurant, there were certain things she wouldn't order and other things—like eggs and potatoes—that she left untouched.

To have stayed in a hospital for seven weeks, then come home and take it easy—that wasn't for Karen. After she was released from the hospital, she was running around, socializing, shopping. She seemed bent on walking as much as she could. [Her therapist reports that she bought "at least 30 pairs" of jogging shoes in New York.] Obviously that wasn't good for her.

There never was a point where she acted like she was sick. She was her bubbly, energetic self right to the end, and she ate well in her last weeks. For the 25th anniversary of the Grammys [the month before her death] we showed up at CBS Television City for alumni pictures. Afterward I took her to St. Germain [an elegant L.A. restaurant] for dinner. She had an appetizer, French bread, wine, the entrée and everything that came with it. I knew she had gotten an urge for tacos earlier and that she was eating chili again—one of her favorites.

I don't know that we'll ever know everything about Karen's illness, but I think all those years of starvation took their toll—she put weight on too fast in those weeks in the hospital, and it put an undue strain on her heart. I've been told by doctors that getting that many calories shot into your system in a comparatively short period of time does that.

I did a lot of soul-searching after her death, and I realize now that I did as much as I could have done. All of us who loved her did. But I still can't believe she's gone. We spent so much time together. . . . There's a void here now. I miss her more and more each day.

There's a natural insulation at first—a barrier that comes up for a time—but you never get over a loss like this. You simply have to deal with it. And I'm doing the best I can. □

CONTINUED

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The battle was won, says her therapist

Three months before her heart failed, 104-pound Karen Carpenter left the New York hospital where she had gained 24 pounds after being fed intravenously for six weeks. She was triumphant and presented therapist Steven Levenkron with a needlepoint banner that read: "You win—I gain" (right).

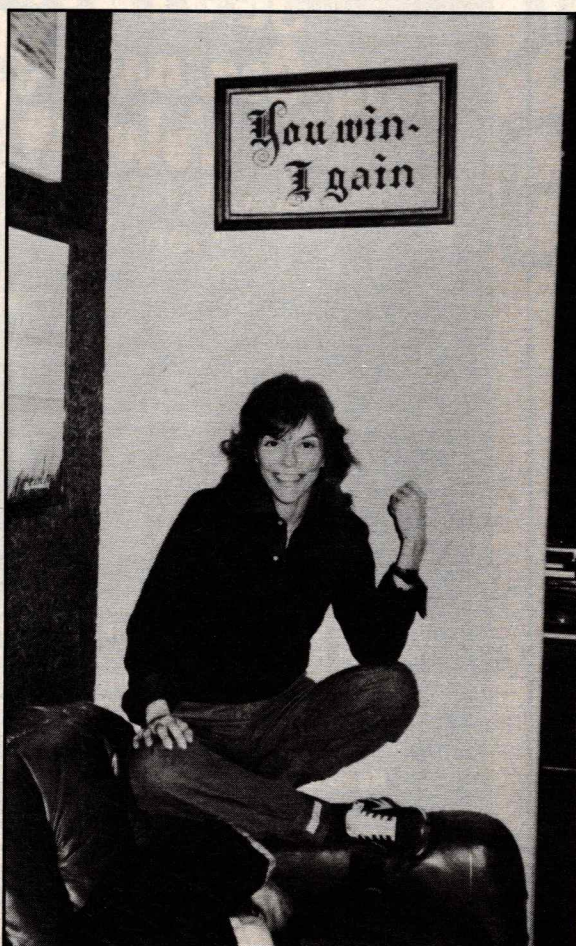
"The terrible tragedy of Karen's death," says Levenkron, who treated the singer for a year, "is that she had recovered from anorexia nervosa when she died. She had gained the necessary weight, and after she left the hospital she never abused laxatives or misbehaved in any anorexic ways. She fought a tough battle and she had won."

Karen first consulted the New York therapist (author of *The Best Little Girl in the World*, a novel about anorexia that was the basis for a 1981 TV movie) in December 1981. His practice was, and is, devoted to the treatment of anorexic women. They come to him regularly (sometimes daily, as in Karen's case) for hour-long sessions devoted to exploring the emotional basis for their inability to take nourishment.

For most anorexics, Levenkron says, the refusal to eat is a control mechanism: Often overwhelmed by family demands and their own desire for perfection, anorexics focus on consumption—or refusal—of food as a means of control. Part of Karen's therapy involved discussing her family problems as well as her self-destructive eating patterns, since "the weight loss and curbed eating are a symptom that you can't separate from the patient's life," he says.

Occasionally Karen and the therapist even lunched together—an event that would have been stressful for most anorexics, who typically are "frightened of being observed eating," he says. For them, "it's very private . . . there's a lot of cutting and taking minuscule bites and other peculiar things aimed at not eating."

Although Levenkron declines to detail the specific problems that the two discussed, he observes that "enterainers are the most vulnerable people



in the world. They're caught in a world that's flying by. Controlling what you eat is a way of controlling that."

For some anorexics, counseling alone can lead to a weight gain. For others, including Karen, therapy helps vanquish the fear of putting on pounds, but hospitalization is needed before the weight will come back. In September 1982, Karen went into Lenox Hill Hospital, where, according to Dr. Gerald Bernstein, she was "terrified but determined." She regained her periods, which meant that she had improved emotionally and nutritionally. "The extent of her bravery has to be stressed," adds Bernstein. "These patients have enormous fear as they look at the pounds coming on."

Over the course of her hospitalization, Karen's intravenous feedings (which originally provided about 2,000 calories a day) were gradually decreased as she increased her consumption of food. By November (her self-imposed deadline for conquering anorexia), Karen was eating three

meals a day and adjusting to her filled-out form. "She used to look at her arms and say, 'I'll just have to keep remembering that they're supposed to look like this,'" says Levenkron, who adds that erstwhile wraiths often must learn to cultivate the proper body image. (He recommends that they survey their bodies in a full-length mirror and tell themselves, "This is an acceptable appearance and I should fight to keep it.")

A buoyant Karen was released from the hospital on Nov. 8 and remained in New York for two more weeks. "She was very positive," Dr. Bernstein remembers. "She was a little anxious about the future, but also very eager to get back to L.A. and sing."

She agreed to keep in touch with Levenkron when she left for the West Coast late in November. Thanksgiving could have been a tough time for her: "Anorexics are anxiety-filled" during such holidays, the therapist says. "They feel as if they have to do an eating performance with the whole family watching." But Karen was different: "I never sensed she had any anxiety

about Thanksgiving," Levenkron says. She telephoned him two or three times weekly until the week she died, and her mood was "very up."

After death claimed Karen last Feb. 4, Levenkron and Bernstein examined her records for oversights or omissions in her treatment. "Every way we could measure her heart we did, and it was normal," Levenkron says. He theorizes that the long years of self-imposed starvation, along with her addiction to laxatives (unlike many anorexics Karen wasn't known to have used self-induced vomiting to control her weight), simply took their toll.

Ironically, Karen had decided to share her story with the world via talk-show appearances and the like but died before she could reach a wider audience than the anorexics she knew at Lenox Hill. "In L.A. she used to call up the kids she'd met in the hospital to tell them she'd gained the weight and that they could, too," says Levenkron. "She wanted people to know anorexia could be cured." □