NEDC Fact Sheet - OSFED



What is OSFED?

OSFED stands for "Other Specified Feeding and Eating Disorders". A person with Other Specified Feeding and Eating Disorders (OSFED) may present with many of the symptoms of other eating disorders such as Anorexia Nervosa, Bulimia Nervosa or Binge Eating Disorder but will not meet the full criteria for diagnosis of these disorders.

This does not mean that the person has a less serious eating disorder. OSFED is a serious mental illness that occurs in adults, adolescents and children. Around 30% of people who seek treatment for an eating disorder have OSFED.

The reasons for developing OSFED will differ from person to person; known causes include genetic predisposition and a combination of environmental, social and cultural factors.

People with OSFED commonly present with extremely disturbed eating habits, and/or a distorted body image and/or overvaluation of shape and weight and/or an intense fear of gaining weight. OSFED is the most common eating disorder diagnosed for adults as well as adolescents, and affects both males and females.

What are the warning signs of OSFED?

Having awareness about eating disorders and the warning signs and symptoms can make a marked difference to the severity and duration of the illness. Seeking help at the first warning sign is much more effective than waiting until the illness is in full swing. Many of the signs that indicate a person may have OSFED are very similar to those of the other eating disorders.

The warning signs of OSFED can be physical, psychological and behavioural. It is possible for someone with OSFED to display a combination of these symptoms.

Physical Signs:

- Weight loss, weight gain or weight fluctuations
- Loss of or disturbance of menstrual periods in girls and women and decreased libido in men
- Compromised immune system (e.g. getting sick more often)
- Signs of damage due to vomiting including swelling around the cheeks or jaw, calluses on knuckles, damage to teeth and bad breath
- Fainting and dizziness as a result of dehydration

Psychological:

- Preoccupation with food and eating
- Preoccupation with body shape and weight
- Extreme body dissatisfaction
- Having a distorted body image
- Sensitivity to comments relating to food, weight, body shape or exercise
- Heightened anxiety and/or irritability around meal times
- Depression, anxiety or irritability
- Low self esteem and feelings of shame, self loathing or guilt
- 'Black and white' thinking rigid thoughts about food being 'good' or 'bad'









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Behavioural signs:

- Dieting behaviour
- Evidence of binge eating
- Frequent trips to the bathroom during or shortly after meals which could be evidence of vomiting or laxative use
- Compulsive or excessive exercising
- Eating at unusual times and/or after going to sleep at night
- Changes in food preferences
- Obsessive rituals around food preparation and eating
- · Anti-social behaviour, particularly around meal times, and withdrawal from social situations involving food
- Secretive behaviour around food
- Increased interest in food preparation
- Increased interest and focus on body shape and weight
- Repetitive or obsessive behaviours relating to body shape and weight
- Increased isolation, spending more and more time alone and avoiding previously enjoyed activities

If you or someone you know is exhibiting some or a combination of these signs it is vital to seek help and support as soon as possible.

What are the risks associated with OSFED?

The risks associated with OSFED are severe. People with OSFED will experience risks similar to those of the eating disorder their behaviours most closely resemble:

- Inflammation and rupture of the oesophagus and stomach from frequent vomiting
- Chronic constipation or diarrhoea
- Kidney failure
- Osteoporosis a condition that leads to bones becoming fragile and easily fractured
- Irregular or slow heart beat which can lead to an increased risk of heart failure
- Loss of or disturbance of menstrual periods in girls and women
- Increased risk of infertility in men and women

While the goal of diagnosis is to accurately describe symptoms and seek the right help for them, a large number of people have other significant eating and feeding issues and distorted body image which are not covered by these categories.

Is it possible to recover?

Yes. It is possible to recover from OSFED, even if you have been living with the illness for many years. The path to recovery can be very challenging. However, with the right team and a high level of personal commitment, recovery is an achievable goal. Treatments for OSFED are available; seek help from a professional with specialised knowledge in eating disorders.

Getting help

If you suspect that you or someone you know has OSFED, it is important to seek help immediately. The earlier you seek help the closer you are to recovery. While your GP may not be formally trained in detecting the presence of an eating disorder, he/ she is a good 'first base.' A GP can refer you on to a practitioner with specialised knowledge in eating disorders.

To find help in your local area go to www.nedc.com.au/helplines

The National Eating Disorders Collaboration (NEDC) is an initiative of the Australian Government Department of Health