

Inventory of How Dieting Has Interfered with Your Life

This list includes consequences that result from dieting. Check all that apply to you. Each column has space at the bottom to add consequences not listed here.

Physical Symptoms	Social Symptoms	Psychological Symptoms	Behavioral Symptoms
<input type="checkbox"/> Weight gain. <input type="checkbox"/> Blunted metabolism. <input type="checkbox"/> Excessive cravings for carbs. <input type="checkbox"/> Blood sugar swings. <input type="checkbox"/> Disconnected from hunger cues. <input type="checkbox"/> Disconnected from satiety cues. <input type="checkbox"/> Chronically tired, even when sleeping well. <input type="checkbox"/> Hair loss (more than usual). <input type="checkbox"/> If female: missed or inconsistent menses. <input type="checkbox"/> Physical numbness. <input type="checkbox"/> Other:	<input type="checkbox"/> I eat differently when others are present. <input type="checkbox"/> I compare my food to what others are eating, in quantity and type of foods. <input type="checkbox"/> I worry about what people think about my eating. <input type="checkbox"/> I worry about what people think about my body. <input type="checkbox"/> I try to eat the same type and quantity of food that others are eating. <input type="checkbox"/> I cancel social events because of the food or meals served. <input type="checkbox"/> I avoid eating in social situations. <input type="checkbox"/> My behavior and beliefs about my eating and body have interfered with relationships. <input type="checkbox"/> Other:	<input type="checkbox"/> I worry about my eating. <input type="checkbox"/> I have strict rules about eating. <input type="checkbox"/> I count calories, carbs, or other factors about food. <input type="checkbox"/> I think of foods as "good" or "bad." <input type="checkbox"/> I feel guilty if I eat a "bad" food. <input type="checkbox"/> I have mood swings. <input type="checkbox"/> I am afraid of feeling hungry. <input type="checkbox"/> I am afraid of feeling too full. <input type="checkbox"/> I don't trust my body. <input type="checkbox"/> I am afraid that if I start eating "forbidden" foods, I won't stop eating. <input type="checkbox"/> I fantasize about food <input type="checkbox"/> I am preoccupied by thoughts about what I eat and don't eat. <input type="checkbox"/> Other:	<input type="checkbox"/> If I break a food rule, I eat even more of it. <input type="checkbox"/> If I eat too much, I make up for it by skipping a meal or eating less food at the next meal, even if I am hungry. <input type="checkbox"/> I eat more food when I'm stressed. <input type="checkbox"/> I exercise only to burn calories or lose weight. <input type="checkbox"/> I talk a lot about dieting, weight, and food. <input type="checkbox"/> When I'm on vacation, I ignore my food rules and eat more than I need, no matter how full I feel. <input type="checkbox"/> I engage in binge eating. <input type="checkbox"/> I avoid physical intimacy. <input type="checkbox"/> Other: