

Eating Disorder Assessment

Symptom	Never	Seldom	Sometimes	Often	Always
I constantly seek acceptance and approval from others.					
It is difficult for me to say "no".					
I try to be "perfect".					
I think that people judge me negatively.					
I try to hide my feelings and opinions to avoid the negative judgments of others.					
People come to me to talk about their problems but I seldom talk to them about my problems.					
I believe that life would be better if I were thinner.					
I compare myself to others.					
I think that I am overweight even though others tell me I am not.					
Other people's problems are more important than mine.					
Family and friends express concerns about my weight.					
I often feel empty inside.					
Something is "missing" inside of me.					
I hear negative message about myself from inside my head.					
I have bouts of depression, anxiety, or mood swings					
I eat, restrict, or purge when I am alone and lonely.					
I eat, restrict, or purge when I need to feel comforted					
I feel guilty or bad about myself when I eat.					
I feel out-of-control when I eat.					
I use laxatives to control my weight.					
I exercise excessively to control my weight					
I use supplements or herbal remedies to control my weight.					
I hide or steal food.					
I am secretive about my eating practices.					
I lie about my eating practices.					
I am more sensitive to temperatures than most people.					
I bruise easily.					
I am more sensitive to noise than most people					
I have a high tolerance for pain.					
I am unrealistically tired.					

This questionnaire is designed to help you and your therapist better understand your experiences. It is not designed for diagnosis. For a correct diagnosis, you must seek professional help from a licensed mental health professional.

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