



where weight loss is a science

UNDERLYING METABOLIC IMBALANCES: STRESS

Directions: This questionnaire asks you to assess how you have been feeling during the past two months. This information will help us determine whether toxic burden is one of your underlying metabolic imbalances as well as how this changes as you progress with your program.

For each question, circle the number that best describes your symptoms:

0 = No or Rarely – You have never experienced the symptom or the symptom is familiar to you but you perceive it as insignificant.

1 = Occasionally – Symptom comes and goes and is linked in your mind to stress, diet, fatigue or some other identifiable trigger

4 = Often – Symptom occurs 2-3 times per week and /or with a frequency that bothers you enough that you would like to do something about it

8 = Frequently – Symptom occurs 4 or more times per week and/or you are aware of the symptom every day, or it occurs with regularly on a monthly or cyclical basis

Some questions require a YES or NO response: 0 = NO, 8 = YES

1. Need caffeine, sugar or other stimulant to keep you going during the day	0	1	4	8
2. Gain or hold weight primarily around your midsection	0	1	4	8
3. Need alcohol to relax	0	1	4	8
4. Feel Stressed out most of the time	0	1	4	8
5. Are you anxious or depressed	0	1	4	8
6. Trouble falling asleep or staying asleep	0	1	4	8
7. Low sex drive	0	1	4	8
8. Irritable, angry or upset	0	1	4	8
9. Experienced a major life stressor in the past year (i.e., death of a loved one, divorce, marriage, birth of a child, move, change of job, financial change, medical diagnosis of a loved one or self, etc.)	0		8	
10. Catch colds, flu or get sick	0	1	4	8
11. Crave carbohydrates/sweets and/or salt	0	1	4	8
12. "Need" aerobic exercise to stay sane	0	1	4	8
13. Can't shut off your mind at night	0	1	4	8

TOTAL POINTS

If your total score is greater than 16, Stress is likely one of your top UMIs and you should jump-start your program with a 7-10 day detoxification.