Eating Attitudes Test® (EAT-26)

Instructions: This is a screening measure to help you determine whether you might have an eating disorder that needs professional attention. This screening measure is not designed to make a diagnosis of an eating disorder or take the place of a professional consultation. Please fill out the below form as accurately, honestly and completely as possible. There are no right or wrong answers. All of your responses are confidential.

P	Part A: Complete the following questions:							
1) Birt	th Date	Month:Day: .	Yeaı	r:	2) Ge	ender: 🖵 Male	e 🖵 Fem	nale
3) Height Feet:								
•	J							
		ht (lbs.):5) Hig						
6) Lo	west Adult	Weight:7) Ide	al Weight:.					
					- 4			
		ase check a response for e following statements:	Always	Usually	Often	Sometimes	Rarely	Never
	each of the	e rollowing statements.	1	I	ı	1	ı	İ
1.	Am terrifie	d about being overweight.						
2.		ng when I am hungry.						
3.		f preoccupied with food.						
4.		on eating binges where I feel that						
5.		pe able to stop. od into small pieces.						
6.		he calorie content of foods that I eat.		-				
7.		y avoid food with a high carbohydrate	_	-				
''		e. bread, rice, potatoes, etc.)	_	_	_	_	_	_
8.	Feel that c	thers would prefer if I ate more.						
9.	Vomit afte	r I have eaten.						
10.	Feel extrer	nely guilty after eating.						
11.		cupied with a desire to be thinner.						
12.		ıt burning up calories when I exercise.						
13.		ole think that I am too thin.						
14.	Am preoco	cupied with the thought of having boody.						
15.	Take longe	r than others to eat my meals.						
16.	Avoid food	ds with sugar in them.						
17.	Eat diet fo	ods.						
18.		ood controls my life.						
19.		f-control around food.						
		thers pressure me to eat.						
		nuch time and thought to food.						
		nfortable after eating sweets.	<u> </u>	<u> </u>				
23.		dieting behavior.	<u> </u>					
		omach to be empty.						
		mpulse to vomit after meals.						
20.	Enjoy tryn	g new rich foods.				_		
Part C: Behavioral Questions. In the past 6 months have you:		Never	Once a month or less	2-3 times a month	Once a week	2-6 times a week	Once a day or more	
Α.	not be able				٠			
В.	weight or							
C.		laxatives, diet pills or diuretics (water pills) your weight or shape?						
D.	to control	more than 60 minutes a day to lose or your weight?						
E.	Lost 20 pc	ounds or more in the past 6 months		☐ Yes			☐ No	

• Defined as eating much more than most people would under the same circumstances and feeling that eating is out of control.

EAT-26: Garner et al. 1982, Psychological Medicine, 12, (871 878); adapted/reproduced by D. Garner with permission.

Scoring the Eating Attitudes Test® (EAT-26)

The Eating Attitudes Test (EAT-26) has been found to be highly reliable and valid (Garner, Olmsted, Bohr, & Garfinkel, 1982; Lee et al., 2002; Mintz & O'Halloran, 2000). However the EAT-26 alone does not yield a specific diagnosis of an eating disorder.

Scores greater than 20 indicate a need for further investigation by a qualified professional.

Low scores (below 20) can still be consistent with serious eating problems, as denial of symptoms can be a problem with eating disorders.

Results should be interpreted along with weight history, current BMI (body mass index), and percentage of Ideal Body Weight. Positive responses to the eating disorder behavior questions (questions A through E) may indicate a need for referral in their own right.

EAT-26 Score

Score the 26 items of the EAT-26 according to the following scoring system. Add the scores for all items.

Scoring for Questions 1-25:

Always	=	3
Usually	=	2
Often	=	1
Sometimes	=	0
Rarely	=	0
Never	=	0

Scoring for Question 26:

Always	=	0	
Usually	=	0	
Often	=	0	
Sometimes	=	1	
Rarely	=	2	
Never	=	3	