

Could you describe what effect your complaints have had in the following areas. Please circle the appropriate number.

WORK

Because of my problems my work is impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely

HOME MANAGEMENT

(cleaning, tidying, shopping, cooking, etc)

Because of my problems my home management is impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely

SOCIAL LEISURE ACTIVITIES

(with other people, eg. parties, pubs, visits, etc)

Because of my problems my social leisure is impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely

PRIVATE LEISURE ACTIVITIES

(alone, eg. reading, gardening, sewing)

Because of my problems my private leisure is impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely

FAMILY LIFE

(relations with parents, brothers and sisters, playing with children, etc)

Because of my problems my family life is impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely

INTIMATE RELATIONSHIPS

(giving affection, hugging, sexual interest, etc)

Because of my problems my intimate relationships are impaired:

0	1	2	3	4	5	6	7	8
Not at all		Slightly		Significantly		Severely		Very severely