Scoring Sheet SIAB-EX
PAST

Name: .....

First Name: .....

Date of Birth: .....

Date of Assessment: .....

	Item	Item No.	Score 0 - 4
I	**Body Image and Slimness Ideal (BI)**		
	Body image disturbance	16	
	Fear of gaining weight or getting fat – weight phobia	7	
	Preoccupation with body slimness, figure and body weight	61	
	Underweight (modified) / deviance from normal body weight	1*	
	Avoidance of fattening food and selective eating - qualitative food-reduction	12	
	Compulsive behavior concerning food or eating	59	
	Excessive exercise	42	
	Preoccupation with food and eating	60	
	Chewing and spitting out food	14	
	Internal achievement orientation	3	
	Dependence of self-esteem on figure and weight	10	
	Limits of caloric intake	13	
	Amenorrhoea (modified)	19**	
	Constipation	55	
	Regurgitation of food	15	
	Denial of threat to health caused by underweight	17***	
Sum score of subscale I			
Mean of subscale I (sum/ number of answered items)			

Scoring Sheet SIAB-EX PAST b)

	Item	Item No.	Score 0 - 4
II	**General Psychopathology (Gen Psy)**		
	Reduced self-confidence in performance	66	
	Irrational depressive thoughts and dysfunctional cognitive schemata	65	
	Depressed mood	64	
	Reduction of self-esteem	67	
	Anxieties	4	
	Sleep disorders	6	
	Feelings of insufficiency and helplessness	62	
	Obsessive thoughts	58	
	Suicidal thoughts	68	
	Phobias	5	
	Obsessive-compulsive checking	56	
	Suicidal acts	69	
	Other autoaggressive behavior	70	
	Obsessions about cleanliness	57	
Sum score of subscale II			
Mean of subscale II (sum/ number of answered items)			
III	**Sexuality and Social Integration (SexSoc)**		
	Sexual behavior	78	
	Sexual anxietes	76	
	Leisure activities	79	
	Social withdrawal and avoidance of contacs	82	
	Reduced sexual desire	75***	
	Partner relationship	77	
	Quality of social contacts/confidants	81	
	Denial of illness	83***	
	Global evaluation of symptoms associated with eating disorder	84***	
	Extent of social contacts outside of family	80	
	Objective impairment at school/ at work/ with household	53	
	Reduced perception of internal stimuli	63	
Sum score of subscale III			
Mean of subscale III (sum/ number of answered items)			

Scoring Sheet SIAB-EX PAST c)

	Item	Item No.	Score 0 – 4
IV	**Bulimic Symptoms (Bul)**		
	Binging - objectively	21a	
	Average frequency of marked eating binges over a period of 3 months	23***	
	Binging - subjectively	21b	
	Loss of control with regard to eating	26***	
	Feelings of distress regarding binge eating	28***	
	Self-induced vomiting	35	
	Craving for food	34	
	Course of binge eating over time	22	
Sum score of subscale IV			
Mean of subscale IV (sum/ number of answered items)			
V	**Inappropriate Compensatory Behaviors to Counteract Weight Gain, Fasting and Substance Abuse (Compensatory behavior)**		
	Appetite suppressants	38	
	Diuretics	37	
	Excessive fasting	41	
	Tranquillizers with potential for dependency	72	
	Illegal drugs	73	
	Laxative abuse	36	
	Dieting or fasting - quantitative food-reduction	11	
	Alcohol use/abuse	71	
	Medication to increase thyroid metabolism	39	
	Enemas	43	
	Ipecac	44	
Sum score of subscale V			
Mean of subscale V (sum/ number of answered items)			

Scoring Sheet SIAB-EX PAST d)

	Item	Item Nr.	Score 0 – 4
VI	**Atypical Binges (Atyp. Binge)**		
	Average number of marked atypical binges	31***	
	Atypical eating binges	29	
	Eating more than usual when feeling stressed or overburdened	33	
	Feeling comfortably full after binges	30***	
Sum score of subscale VI			
Mean of subscale VI (sum/ number of answered items)			
Sum score of the SIAB-EX Total Scale			
Mean of the SIAB-EX Total Scale (sum/ number of answered items)			

*Calculation of Underweight:

BMI	Score
> 19.00	0
19.00 - 17.51	1
17.50 - 16.01	2
16.00 - 14.51	3
<= 14.50	4

**Recode Item 19 as follows

- recode 6,7 or 8 to 0
- recode 2 to 1
- recode 3 to 2
- recode 4 or 5 to 3
- Codes 1 and 9 don`t have to be recoded

*** Item 23 and 31: Recode 5 to 1
Item 75 and 84: Recode 7 to 0
Item 17, 83, 26 and 28: Recode 8 to 0
Item 30: Recode 5, 6, 7 or 8 to 0

Scoring Sheet SIAB-EX
Last 3 Months

Name: .....

First Name: .....

Date of Birth: .....

Date of Assessment: .....

	Item	Item No.	Score 0 - 4
I	**Body Image and Slimness Ideal (BI)**		
	Body image disturbance	16	
	Fear of gaining weight or getting fat – weight phobia	7	
	Preoccupation with body slimness, figure and body weight	61	
	Avoidance of fattening food and selective eating - qualitative food-reduction	12	
	Compulsive behavior concerning food or eating	59	
	Underweight (modified)/ deviance from normal body weight	1*	
	Limits of caloric intake	13	
	Preoccupation with food and eating	60	
	Amenorrhoea (modified)	19**	
	Internal achievement orientation	3	
	Dependence of self-esteem on figure and weight	10	
	Chewing and spitting out food	14	
	Excessive exercise	42	
	Constipation	55	
	Reduced perception of internal stimuli	63	
	Denial of illness	83***	
	Regurgitation of food	15	
	Denial of threat to health caused by underweight	17***	
Sum score of subscale I			
Mean of subscale I (sum/ number of answered items)			

Scoring Sheet SIAB-EX last 3 months b)

	Item	Item No.	Score 0 - 4
II	**General Psychopathology and Social Integration (GenPsySoc)**		
	Reduction of self-esteem	67	
	Reduced self-confidence in performance	66	
	Depressed mood	64	
	Irrational depressive thoughts and dysfunctional cognitive schemata	65	
	Social withdrawal and avoidance of contacts	82	
	Leisure activities	79	
	Anxieties	4	
	Suicidal thoughts	68	
	Feelings of insufficiency and helplessness	62	
	Extent of social contacts outside of family	80	
	Sleep disorders	6	
	Phobias	5	
	Objective impairment at school/ at work/ with household	53***	
	Tranquillizers with potential for dependency	72	
	Obsessive thoughts	58	
	Quality of social contacts/confidants	81	
	Obsessions about cleanliness	57	
	Obsessive-compulsive checking	56	
	Suicidal acts	69	
Sum score of subscale II			
Mean of subscale II (sum/ number of answered items)			
III	**Sexuality (Sex)**		
	Sexual behavior	78	
	Partner relationship	77	
	Sexual anxieties	76	
	Reduced sexual desire	75***	
Sum score of subscale III			
Mean of subscale III (sum/ number of answered items)			

Scoring Sheet SIAB-EX last 3 Months c)

	Item	Item No.	Score 0 – 4
IV	**Bulimic Symptoms (Bul)**		
	Average frequency of marked eating binges over a period of 3 months	23***	
	Binging - objectively	21a	
	Binging - subjectively	21b	
	Loss of control with regard to eating	26***	
	Feelings of distress regarding binge eating	28***	
	Self-induced vomiting	35	
	Craving for food	34	
	Global evaluation of symptoms associated with eating disorder	84***	
	Course of binge eating over time	22	
Sum score of subscale IV			
Mean of subscale IV (sum/ number of answered items)			
V	**Inappropriate Compensatory Behaviors to Counteract Weight Gain, Fasting, Substance Abuse (Compensatory behavior)**		
	Appetite suppressants	38	
	Excessive fasting	41	
	Laxative abuse	36	
	Illegal drugs	73	
	Other autoaggressive behavior	70	
	Diuretics	37	
	Dieting or fasting – quantitative food-reduction	11	
	Alcohol use/ abuse	71	
	Medication to increase thyroid metabolism	39	
	Enemas	43	
	Ipecac	44	
Sum score of subscale V			
Mean of subscale V (sum/ number of answered items)			

Scoring Sheet SIAB-EX last 3 months d)

	Item	Item No.	Score 0 – 4
VI	**Atypical Binges (Atyp. Binge)**		
	Atypical eating binges	29	
	Average number of marked atypical binges	31***	
	Eating more than usual when feeling stressed or overburdened	33	
	Feeling comfortably full after binges	30***	
Sum score of subscale VI			
Mean of subscale VI (sum/ number of answered items)			
Sum score of the SIAB-EX Total Scale			
Mean of the SIAB-EX Total Scale (sum/ number of answered items)			

*Calculation of Underweight:

BMI	Score
> 19.00	0
19.00 - 17.51	1
17.50 - 16.01	2
16.00 - 14.51	3
<= 14.50	4

**Recode Item 19 as follows

- recode 6,7 or 8 to 0
- recode 2 to 1
- recode 3 to 2
- recode 4 or 5 to 3
- Codes 1 and 9 don`t have to be recoded

*** Item 23 and 31: Recode 5 to 1
Item 75 and 84: Recode 7 to 0
Item 17, 83, 26 and 28: Recode 8 to 0
Item 30: Recode 5, 6, 7 or 8 to 0
Item 53: Recode 8 to 4