

For each of the ten statements below, score your level of agreement on a scale of 0 to 10.
Circle your scores on the coloured disc.

Absolutely disagree	Neither agree or disagree	Absolutely agree
← 0	1 2 3 4 5 6 7 8 9	10 →
In the last week, because of my Crohn's disease or ulcerative colitis...		
Abdominal pain	...I have had aches or pains in my stomach or abdomen	
Regulating defecation	...I have had difficulty coordinating and managing defecation, including choosing and getting to an appropriate place for defecation and cleaning myself afterwards	
Interpersonal interactions	...I have had difficulty with personal relationships and/or difficulty participating in the community	
Education and work	...I have had difficulty with school or studying activities, and/or difficulty with work or household activities	
Sleep	...I have had difficulty sleeping, such as falling asleep, waking up frequently during the night or waking up too early in the morning	
Energy	...I have not felt rested and refreshed during the day, and have felt tired and without energy	
Emotions	...I have felt sad, low or depressed, and/or worried or anxious	
Body image	...I have not liked the way my body or body parts look	
Sexual functions	...I have had difficulty with the mental and/or physical aspects of sex	
Joint pain	...I have had pains in the joints of my body	

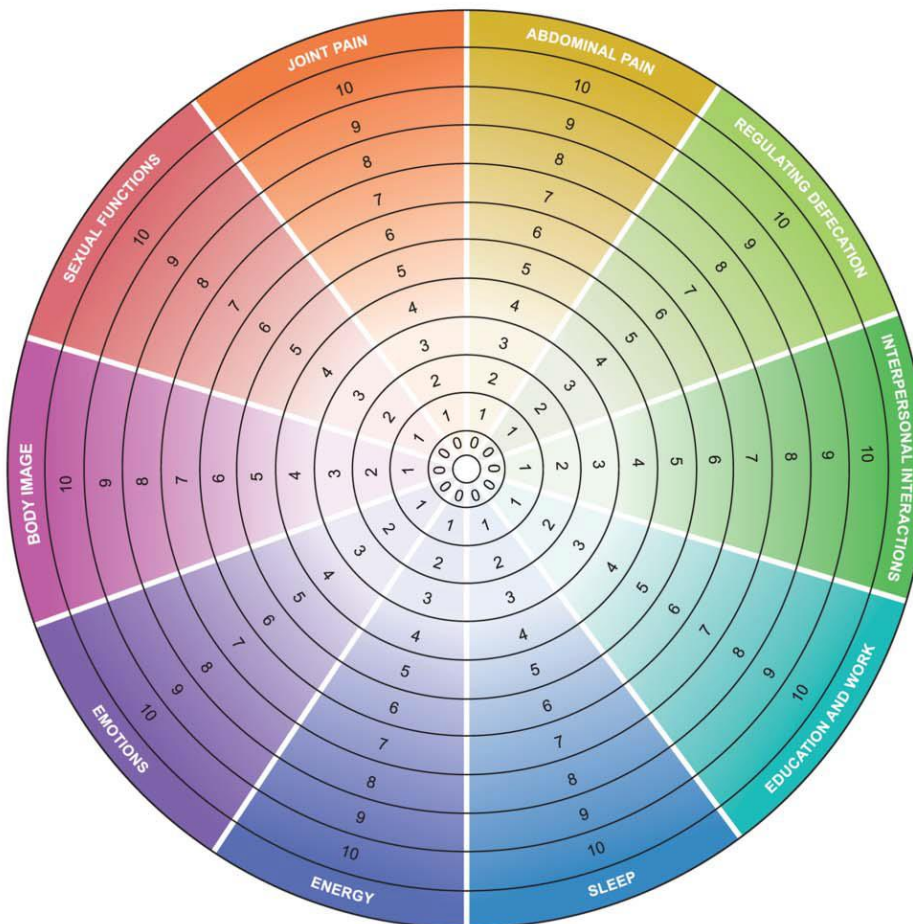


FIGURE 2. The IBD Disk questionnaire and scoring disk.