

The Three-Factor Eating Questionnaire

Please read each statement and select from the multiple choice options the answer that indicates the frequency with which you find yourself feeling or experiencing what is being described in the statements below.

1. When I smell a delicious food, I find it very difficult to keep from eating, even if I have just finished a meal.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

2. I deliberately take small helpings as a means of controlling my weight.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

3. When I feel anxious, I find myself eating.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

4. Sometimes when I start eating, I just can't seem to stop.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

5. Being with someone who is eating often makes me hungry enough to eat also.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

6. When I feel blue, I often overeat.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

7. When I see a real delicacy, I often get so hungry that I have to eat right away.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

8. I get so hungry that my stomach often seems like a bottomless pit.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

9. I am always hungry so it is hard for me to stop eating before I finish the food on my plate.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

10. When I feel lonely, I console myself by eating.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

11. I consciously hold back at meals in order not to weight gain.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

12. I do not eat some foods because they make me fat.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

13. I am always hungry enough to eat at any time.

Definitely true (4)/ mostly true (3)/ mostly false (2)/ definitely false (1)

14. How often do you feel hungry?

Only at meal times (1)/ sometimes between meals (2)/ often between meals (3)/ almost always (4)

15. How frequently do you avoid "stocking up" on tempting foods?

Almost never (1)/ seldom (2)/ moderately likely (3)/ almost always (4)

16. How likely are you to consciously eat less than you want?

Unlikely (1)/ slightly likely (2)/ moderately likely (3)/ very likely (4)

17. Do you go on eating binges though you are not hungry?

Never (1)/ rarely (2)/ sometimes (3)/ at least once a week (4)

18. On a scale of 1 to 8, where 1 means no restraint in eating (eating whatever you want, whenever you want it) and 8 means total restraint (constantly limiting food intake and never "giving in"), what number would you give yourself?

Courtesy of



How Much Weight Do I Need to Lose?

The good news is that losing a few pounds can make a difference in your health.



Losing just 3% to 5% of your weight (ie, if you weigh 200 pounds, losing 6 to 10 pounds) can lower:

- blood sugar
- risk for developing diabetes
- triglycerides, a type of fat in the blood

Losing a little more weight is even better

Losing 5% to 10% of your weight (10 to 20 pounds if you weigh 200 pounds) can:

- lower your blood pressure
- improve your cholesterol
- reduce need to take medicine for blood pressure, diabetes, and lipids
- lower triglycerides and blood sugar even more

Losing weight can also help with problems like:

- sleep apnea
- liver damage
- osteoarthritis (wear and tear on knees and other joints)

Losing weight helps you feel better

- gives you more energy
- makes it easier for you to move around
- improves your quality of life
- helps keep you from having weight-related health problems in the future

Best ways of losing weight and keeping it off

- Small changes in your eating can make a big difference
 - Eat smaller portions
 - Remember, protein helps fill you up
 - Limit sugary drinks like soda, juice, and special coffee drinks—they are full of calories
 - Minimize snacking

- Be active—aim for 30 to 40 minutes of activity most days of the week
 - Do things you enjoy and ask a friend to join you
 - Walk more, dance more, take the stairs, and play with your children or grandchildren—all activity counts
 - Join an exercise class
- Weigh regularly
- Get a good night's sleep; when people are tired, they often crave fatty or sweet food (most adults need 7 to 9 hours of sleep a night)

What about medications to lose weight?

- Sometimes medicine can help people lose weight.
- Ask your healthcare provider if medicine is right for you.
 - Your weight should be checked after 3 months to see if you have lost at least 5% of your weight
 - If you have not lost weight, your healthcare provider may want to put you on another medicine or a different treatment plan

Bariatric surgery

- For those who need to lose more weight for their health, surgery may be helpful
- The average long-term weight loss with sleeve gastrectomy is about 24% and about 33% with gastric bypass
- Devices and endoscopic therapies, such as a stomach “balloon,” usually result in less weight loss than bariatric surgery

Do not give up!

- Most people try many times to lose weight
- Everyone loses weight at a different pace
- For most people, their weight loss slows down over time and then levels off after 6 to 12 months
- After your weight loss slows down, most people gradually regain some weight; regaining weight may be slower if you take weight loss medicine or you have had bariatric surgery
- If you are struggling, consider consulting with an obesity medicine specialist

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Is Weight Loss Surgery Right For You?

When enough weight is not lost through diet, exercise, or medication, bariatric surgery may be an option.

- Weight loss surgery makes your stomach smaller and changes hormones that make you feel hungry.
- Most people who have bariatric surgery will feel full soon after beginning to eat a meal and will eat less, leading to weight loss.
- You must follow eating recommendations before and after the surgery. If you don't make changes in your eating and activity, you could regain weight.

How much weight can I lose?

Bariatric surgery is very effective in helping people lose up to 20% to 30% of their weight. For example, if you weigh 300 pounds, this would mean losing 60 to 90 pounds. Losing this much weight will improve control of type 2 diabetes, lower blood pressure, decrease joint pain, and improve quality of life and life expectancy.

What are the different kinds of weight loss surgery?

The type of surgery a patient has is based on their level of obesity, surgeon's recommendation, and patient preference. It is also based on whether you have health conditions like diabetes, heart disease, or acid reflux. All types are performed laparoscopically without a large incision. This reduces the recovery time after surgery.

If you decide to have surgery, you need to understand the risks, benefits, and side effects of each type and make a decision that is right for you.

Gastric Bypass (20%-30% weight loss): This surgery divides the stomach into two parts. The smaller portion is 1 ounce in size and it is connected to the small intestine 2 feet below the stomach. A larger portion is reconnected further down. Dumping syndrome (when food, especially sugar, moves from your stomach into your small bowel too fast) is a rare complication of gastric bypass and may occur with diets high in simple carbohydrates.

Gastric Sleeve (20%-25% weight loss): This surgery removes 75%-85% of the stomach. The new small stomach looks like a narrow shirt sleeve. There is no bypass and digestion occurs normally.

Gastric Banding (10%-15% weight loss): An adjustable band placed around the upper stomach creates a small stomach pouch. The pressure on the band can be adjusted by a port placed under the skin. This procedure is rarely performed because of modest initial weight loss and weight regain.

Duodenal Switch (30%-40% weight loss): A large portion of the stomach is removed, and the upper portion of the intestine is bypassed. The bypassed portion of the intestine is reconnected below. This surgery is rarely performed because of the severity of complications.

Does insurance pay for this surgery?

- Many insurance plans do pay for bariatric surgery. To be eligible, you must have a body mass index (or BMI) more than 40. BMI can be calculated from your height and weight using online calculators.
- If you have medical problems such as high blood pressure, diabetes, fatty liver disease, arthritis, or sleep apnea, you may be eligible with a BMI more than 35.

What about adolescents?

Teens who have finished growing may be candidates for surgery. They need to be treated in health centers that specialize in younger patients.

What do you need to do before having this surgery?

- A waiting period may be required so that you can first try to lose weight under medical supervision. Check with your insurance provider about the time period.
- You must learn to change the way you eat so that you don't get nutrition problems after surgery. This is because there is a risk of not absorbing vitamins or protein after surgery.
- You must also have a psychological evaluation by a mental health specialist. They will look for risk of substance abuse, depression, suicide, and problems following instructions. These problems may increase after surgery and lead to surgery failure and complications.

For more information, visit this link at the National Institutes of Health:

<https://www.niddk.nih.gov/health-information/weight-management/bariatric-surgery>

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Medications for Weight Loss

How can prescription drugs help people dealing with excess weight?



Why should I consider using these medications?

Most people who have used medications to help them lose weight report making better decisions about food, thinking about it less, and feeling more in control. These medicines work best when you use them with planned meals, exercise, and other healthy behavior changes.

How do weight loss medications work?

When people lose weight, their body begins sending signals to the brain that there is a decrease in stored energy. The brain then sends hormonal and chemical messages that increase appetite, hunger, and cravings. Losing weight and keeping it off is difficult because these signals last until the person has regained most of the weight back. Weight loss medications target these signals and decrease their effect.

Are weight loss medications safe?

Five weight loss medications are currently approved as safe by the FDA for long-term use (2 years). Many of these are undergoing even longer-term studies, including in patients with heart disease. Additional medications are approved for short-term use (less than 12 weeks). Using weight loss medications requires regular medical monitoring. There is no evidence that these medications are addictive.

What obesity medications are FDA approved?

Medications approved for long-term use

Lorcaserin (Belviq)	1 pill a day	Targets centers in the brain to increase fullness	May cause headache, fatigue, dizziness
Naltrexone-bupropion (Contrave)	2 pills twice a day	Targets the brain to decrease hunger and food cravings	May cause nausea, constipation, headache, insomnia, increased blood pressure
Phentermine-topiramate (Qsymia)	1 pill a day	Targets centers in the brain involved in appetite and fullness	May cause dry mouth, insomnia, change in taste, tingling sensation, dizziness
Orlistat (Xenical/Alli OTC)	1 pill 3 times a day with meals	Decreases absorption of the fat you eat	May cause diarrhea, oily stools, gas
Liraglutide (Saxenda)	1 shot a day	Targets centers in the brain to decrease hunger and increase fullness	May cause nausea, constipation, diarrhea, vomiting, low blood sugar

Medications approved for short-term use

Phentermine	Adipex, 1/2 to 1 pill a day Lomaira, 1 to 3 pills a day	Targets centers in the brain to decrease hunger	May cause dry mouth, constipation, insomnia, increased blood pressure
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Other benefits of medications

Most medications ultimately lead to decreased blood pressure, blood sugar, and cholesterol levels because of the weight loss they cause. Some prevent diabetes.

Which medication is right for me?

Each of these medications has different benefits and side effects. They may cause problems with medicines you already take. Your healthcare provider can help you decide which is best for you. You might have to try several different medications until you get one that works well. The right medication will help you control portions, decrease snacking, and choose healthier food by decreasing your hunger or cravings.

When taking weight loss medications if you do not lose 5% of your starting weight in 3 months you need to stop taking them and discuss next steps with your healthcare provider.

Will I have to use them forever?

We are still learning about weight loss and keeping it off long term. Some people will benefit from using these medications to get started. Others may need to keep using them to maintain their weight loss. Talk to your healthcare provider about what is best for you.

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