**Questionnaire for Eating-Related Distress among Patients with advanced cancer (QERD-P)**

Long version

Please circle the number that best describes how you felt during the past one week.

1: strongly disagree, 2: disagree, 3: somewhat disagree, 4: neutral (neither agree nor disagree), 5: somewhat agree, 6: agree, 7: strongly agree

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Patient** | | | | | | | | |
| **1.1** | **It is distressing that I cannot eat even though I want to eat more.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1.2 | It is distressing that I cannot enjoy eating. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1.3 | It is distressing that I get full quickly and cannot eat enough. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **2.1** | **I do not understand the reason why I cannot eat.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2.2 | I do not understand the reason why I do not have an appetite. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2.3 | I do not understand the reason why I cannot eat enough. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **3.1** | **I am concerned that I will become weaker if I cannot eat.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3.2 | I am concerned that I will lose muscle strength if I cannot eat. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 3.3 | I am concerned that I will lose weight if I cannot eat. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **4.1** | **I have insufficient information about which nutrients I should prioritized.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4.2 | I have insufficient information about which nutrients I should avoid. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 4.3 | I have insufficient information about which nutritional supplements I should take. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **5.1** | **I have arguments with my family about food.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5.2 | I am troubled that my family seems to try to force me to eat. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 5.3 | I get frustrated with my family over food. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **6.1** | **It's hard for me that my appearance had changed a lot from before as I became thin.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6.2 | It's hard for me to be seen by others as so skinny. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 6.3 | It's hard to see myself as so skinny. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| **7.1** | **I spend less time talking with my family because I do not eat with them.** | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7.2 | I spend less time enjoying with my family during meals. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 7.3 | I spend less time in daily life with my family because I cannot eat. | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Boldfaced items indicate those belonging to the short version.

Instructions

1. Sum individual items to obtain a subscale score, which can be independently evaluated.
2. When there are missing items, subscale scores can be prorated as long astwo of the three items in each subscale were answered. This can be done by using the formula below: Prorated subscale score = [Sum of the scores of two items] × 3 / 2.
3. Add subscale scores to derive a total score.
4. The higher the score, the higher the distress.
5. The questionnaire can be used by citing the paper on development and validation of the questionnaire.