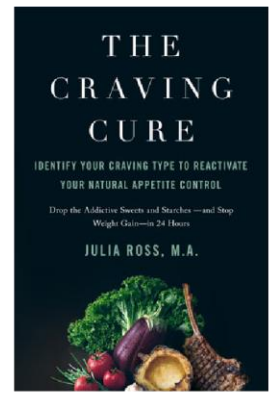


# The Mini Craving Type Questionnaire

from *The Craving Cure* by Julia Ross



Initial Date: \_\_\_\_\_

Place a number from zero (no symptoms) to ten next to each symptom.

## TYPE 1 Depressed Craver (Low Serotonin)

	DATE	DATE	DATE	DATE	DATE
_____ afternoon or evening cravings for foods (or other substances)	_____	_____	_____	_____	_____
_____ negativity, depression (may be worse in winter)	_____	_____	_____	_____	_____
_____ worry, anxiety	_____	_____	_____	_____	_____
_____ low self-esteem	_____	_____	_____	_____	_____
_____ hyperactivity	_____	_____	_____	_____	_____
_____ obsessive thoughts or behaviors	_____	_____	_____	_____	_____
_____ irritability, anger	_____	_____	_____	_____	_____
_____ panic attacks, phobias (fear of heights, snakes, performing, small spaces)	_____	_____	_____	_____	_____
_____ migraines, fibromyalgia, or TMJ	_____	_____	_____	_____	_____
_____ night owl, hard to get to sleep, or have disturbed sleep	_____	_____	_____	_____	_____

## TYPE 2 Crashed Craver (Low Blood Sugar)

	DATE	DATE	DATE	DATE	DATE
_____ irritable, shaky, stressed, inattentive, or headachy, if too long without food	_____	_____	_____	_____	_____
_____ crave sugar, starch, or alcohol, if too long without full meals	_____	_____	_____	_____	_____

## TYPE 3 Comfort Craver (Low Endorphins)

	DATE	DATE	DATE	DATE	DATE
_____ crave comfort, pleasure, or numbing from foods (or othersubstances)	_____	_____	_____	_____	_____
_____ very sensitive to emotional pain	_____	_____	_____	_____	_____
_____ cry or tear up easily	_____	_____	_____	_____	_____
_____ have chronic feelings of sadness or loneliness	_____	_____	_____	_____	_____
_____ have chronic physical pain	_____	_____	_____	_____	_____

## TYPE 4 Stressed Craver (Low GABA)

	DATE	DATE	DATE	DATE	DATE
_____ crave foods (or other substances) for stress relief	_____	_____	_____	_____	_____
_____ stiff, tense, or painful muscles	_____	_____	_____	_____	_____
_____ over-stressed, burned out	_____	_____	_____	_____	_____
_____ unable to relax, loosen up, get to sleep, be still	_____	_____	_____	_____	_____
_____ often feel overwhelmed	_____	_____	_____	_____	_____

**TYPE 5 Fatigued Craver (Low Catecholamines)**

	DATE	DATE	DATE	DATE	DATE
_____ crave foods or drinks for energy or focus	_____	_____	_____	_____	_____
_____ feel apathetic, bored, flat	_____	_____	_____	_____	_____
_____ lack energy	_____	_____	_____	_____	_____
_____ lack drive	_____	_____	_____	_____	_____
_____ lack focus and concentration	_____	_____	_____	_____	_____

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