Appendix 2 The Gastrointestinal Quality of Life Index (GIQLI)

- How often during the past 2 weeks have you had pain in the abdomen?
 all of the time, most of the time, some of the time, a little of the time, never
- 2. How often during the past 2 weeks have you had a feeling of fullness in the upper abdomen? all of the time, most of the time, some of the time, a little of the time, never
- 3. How often during the past 2 weeks have you had bloating (sensation of too much gas in the abdomen)? all of the time, most of the time, some of the time, a little of the time, never
- 4. How often during the past 2 weeks have you been troubled by excessive passage of gas through the anus? all of the time, most of the time, some of the time, a little of the time, never
- 5. How often during the past 2 weeks have you been troubled by strong burping or belching?
 all of the time, most of the time, some of the time, a little of the time, never
- 6. How often during the past 2 weeks have you been troubled by gurgling noises from the abdomen? all of the time, most of the time, some of the time, a little of the time, never
- 7. How often during the past 2 weeks have you been troubled by frequent bowel movements? all of the time, most of the time, some of the time, a little of the time, never
- 8. How often during the past 2 weeks have you found eating to be a pleasure? all of the time, most of the time, some of the time, a little of the time, never
- 9. Because of your illness, to what extent have you restricted the kinds of food you eat? very much, much, somewhat, a little, not at all
- 10. During the past 2 weeks, how well have you been able to cope with everyday stresses? extremely poorly, poorly, moderately, well, extremely well
- 11. How often during the past 2 weeks have you been sad about being ill? all of the time, most of the time, some of the time, a little of the time, never
- 12. How often during the past 2 weeks have you been nervous or anxious about your illness? all of the time, most of the time, some of the time, a little of the time, never
- 13. How often during the past 2 weeks have you been happy with life in general? never, a little of the time, some of the time, most of the time, all of the time
- 14. How often during the past 2 weeks have you been frustrated about your illness? all of the time, most of the time, some of the time, a little of the time, never
- 15. How often during the past 2 weeks have you been tired or fatigued? all of the time, most of the time, some of the time, a little of the time, never
- 16. How often during the past 2 weeks have you felt unwell? all of the time, most of the time, some of the time, a little of the time, never
- 17. Over the past week, have you woken up in the night? every night, 5-6 nights, 3-4 nights, 1-2 nights, never

- 18. Since becoming ill, have you been troubled by changes in your a great deal, a moderate amount, somewhat, a little bit, not at all
- 19. Because of your illness, how much physical strength have you lost? a great deal, a moderate amount, some, a little bit, none
- 20. Because of your illness, to what extent have you lost your endurance? a great deal, a moderate amount, somewhat, a little bit, not at all
- 21. Because of your illness, to what extent do you feel unfit? extremely unfit, moderately unfit, somewhat unfit, a little unfit,
- 22. During the past 2 weeks, how often have you been able to complete your normal daily activities (school, work, household)? all of the time, most of the time, some of the time, a little of the time, never
- 23. During the past 2 weeks, how often have you been able to take part in your usual patterns of leisure or recreational activities? all of the time, most of the time, some of the time, a little of the time, never
- 24. During the past 2 weeks, how much have you been troubled by the medical treatment of your illness? very much, much, somewhat, a little, not at all
- 25. To what extent have your personal relations with people close to you (family or friends) worsened because of your illness? very much, much, somewhat, a little, not at all
- 26. To what extent has your sexual life been impaired (harmed) because of your illness? very much, much, somewhat, a little, not at all
- 27. How often during the past 2 week, have you been troubled by fluid or food coming up into your mouth (regurgitation)? all of the time, most of the time, some of the time, a little of the time, never
- 28. How often during the past 2 weeks have you felt uncomfortable because of your slow speed of eating? all of the time, most of the time, some of the time, a little of the time, never
- 29. How often during the past 2 weeks have you had trouble swallowing your food? all of the time, most of the time, some of the time, a little of the time, never
- 30. How often during the past 2 weeks have you been troubled by urgent bowel movements? all of the time, most of the time, some of the time, a little of the time, never
- 31. How often during the past 2 weeks have you been troubled by diarrhoea? all of the time, most of the time, some of the time, a little of the time, never
- 32. How often during the past 2 weeks have you been troubled by constipation? all of the time, most of the time, some of the time, a little of the time, never
- 33. How often during the past 2 weeks have you been troubled by nausea? all of the time, most of the time, some of the time, a little of the time, never
- 34. How often during the past 2 weeks have you been troubled by blood in the stool? all of the time, most of the time, some of the time, a little of the time, never
- 35. How often during the past 2 weeks have you been troubled by heartburn? all of the time, most of the time, some of the time, a little of the time, never

36. How often during the past 2 weeks have you been troubled by uncontrolled stools? all of the time, most of the time, some of the time, a little of the time, never

Calculation of the score: most desirable option: 4 points least desirable option: 0 points GIQLI score: sum of the points (for details see computer program and manual; available on request from the authors)