

How stressed are you?

HOW STRESSED ARE YOU?	TICK THE STATEMENTS THAT APPLY TO YOU
I feel guilty much of the time	I have a frequent desire to urinate
l am too busy to relax	I often have a lump in my throat
It is increasingly difficult for me to concentrate	I often have a dry mouth
I experience feelings of paranoia	I suffer from breathlessness
I pick fights with people	I suffer from sweaty and clammy palms
I find it hard to make decisions and this frustrates me	I suffer from sweaty upper lip and / or feel hot and flushed
I often tap my feet and /or feel my hands shaking	I suffer from aches and pains in my back and shoulders
I suffer from flatulence	I often suffer from indigestion
I often feel restless and or hyperactive	I find I work longer to achieve the same or less
I often feel frightened and apprehensive	My alcohol consumption is high
I often have thoughts such as checking that the gas is off and the door is locked	I have difficulty in sleeping
My sex life is not what it was	I suffer from frequent diarrhoea/ constipation
I suffer regular headaches/migraines	l over eat/ under eat
I set myself unrealistic deadlines	I find it difficult to say no when people ask me to do more
I feel angry or irritable much of the time	I often have nightmares
I feel faint sometimes	I drink lots of tea/coffee
l often suffer from nausea	I suffer from palpitations
I bite my finger nails/ drum my fingers	I like to stick rigidly to a routine
I often have feelings of self loathing and I lack self worth	I often wake up feeling tired
I have experienced a dramatic change in my menstrual cycle	I often grind my teeth or clench my jaw or hands
I suffer from cold hands and feet	I feel constantly tired
I think of ending my own life	I experience muscles twitches and nervous tics



I often have butterflies in my stomach	I suffer from pains in my chest or tightness in my chest	
I frequently suffer from colds and flu (more than twice a year)	l suffer from asthma	
I suffer from dramatic mood swings	I suffer from hypertension	
TOTAL SCORE		

Score one point for each tick:

0-5 NOT VERY STRESSED

6-10 TRY TO CUT DOWN ON STRESSFUL SITUATIONS

OVER 10- UNACCEPTABLY STRESSED, AT RISK OF STRESS RELATED ILLNESS, RETHINK YOUR WAY OF LIFE, AND STRESS COPING TECHNIQUES

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