The Eating Problem Check List

Nature and Use

The Eating Problem Checklist (EPCL) is a 16-item self-report measure designed to assess eating-disorder behaviours and psychopathology in patients with eating disorders session-by-session. It is focused on the past 7 days. The 15 items cover the principal behaviours and attitudes of eating disorder psychopathology.

The EPCL It is quick and easy to complete, and could therefore be readily integrated into routine clinical practice, enabling assessment of weekly changes. The tool allows the clinician and the patient to assess, through the review of each single item score, the change occurred in specific eating-disorder psychopathology expressions, at weekly intervals. Moreover, through the assessment of the two subscale scores (i.e., body image and eating concerns), the tool permits to assess the weekly changes of the core psychopathology of eating disorders. As an aid for clinicians and patients in identifying improvement and/or deterioration the EPCL would enable prompt focusing of the treatment on specific expressions of an individual’s eating-disorder psychopathology. Moreover, sudden gains (i.e., large, rapid and stable changes in symptomatology between two consecutive treatment sessions) seem associated with greater overall post-treatment symptom reduction and better outcomes than those who did not. Associations between sudden gains and short- and long-term improvements, also appear to have a positive impact on alliance.

In our clinical practice, we find very useful to review and discuss carefully with the patient the single item EPCL scores on a weekly basis (after the CBT-E collaborative weighing procedure). This review, if associated with the monitor records review of the last seven days, helps to highlight, when there is a weekly change of at least one point in one or more items of EPCL, the changes that patients have made and identify the behavioural expressions of their eating-disorder psychopathology to be addressed by the treatment. What is more, by recording weekly EPCL data on a spreadsheet, it is possible to observe whether—as assumed by the CBT-E theory - modification of certain behaviours (e.g. by adopting regular eating, reducing dietary restraint, weekly weighing, and/or interrupting dysfunctional body checking) is associated with a reduction in concerns about eating, shape and weight over time—one of the primary goals of CBT-E

Status of the EPCL

The design and validation of the EPCL has been published on Eating Disorders. The EPCL demonstrated good internal consistency, test–retest reliability and concurrent and criterion validity, and principal component analysis of the session-by-session data identified two factors (‘eating concerns’ and ‘body image concerns’) that accounted for 51.3% of the variance. Furthermore, session-by-session analysis indicated that the EPCL is able to identify weekliespecific changes and/or deterioration in eating-disorder psychopathology.

Scoring of the EPCL

The total score is obtained by adding the items of section two, while the scores of the two subscales are obtained through the sum of the following items, always of the second section: Concern for the body image sum of the items 4, 5, 6, 7, 8 ; Concern for feeding sum of items 1, 2, 3, 9
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