

Low Energy Availability Men Questionnaire

1 A: Do you feel dizzy when you rise quickly?

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

1 B: Do you experience problems with vision (blurring, seeing spots, tunnel vision, etc.)

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

2 A: Do you feel gaseous or bloated in the abdomen?

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

2 B: Do you get cramps or stomach ache?

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

2 C: How often do you have bowel movements on average?

a Several times a day, **b** once a day, **c** Every second day, **d** Twice a week, **e** Once a week or more rarely

2 D: How would you describe your normal stool?

a Normal (soft), **b** Diarrhoea-like (watery), **c** Hard and dry

3 A: Are you very cold even when you are normally dressed?

a Yes, almost every day, **b** Several times a week, **c** Once or twice a week or more seldom, **d** Rarely or never

3B: Do you dress more warmly than your companions regardless of the weather?

a yes, almost always, **b** Yes, sometimes, **c** rarely or never

4 A: How many acute injuries have you had during the past 6 months?

4 B: How many overload injuries (the same reoccurring overload injury, counts as a new injury for every new period) have you had during the past 6 months?

4 C. How many pauses in training have you had due to illness during the past months?

4 D. During the last 6 months, how many days in a row, at the most, have you been absent from training/competition or not been able to perform optimally at training/competition due to an injury (acute/overload) or illness?

5 A:1 I feel tired from work/school

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 A:2 I feel overtired

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom **d** Rarely or never

5 A:3 I'm unable to concentrate well

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 A:4 I feel lethargic

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 A:5 I put off making decisions

a Yes, always **b** Yes, often **c** Yes, sometimes **d** Rarely or never

5 B:1 Parts of my body are aching

a Yes, several times a day, **b** Yes, several times a week, **c** Yes, once or twice a week or more seldom **d** Rarely or never

5 B:2 My muscles feels stiff or tense during training

a Yes, almost every training session, **b** Yes, often, **c** Yes, sometimes, **d** Rarely or never

5 B:3 I have muscle pain after performance

a Yes, after almost every training session, **b** Yes, often, **c** Yes, sometimes, **d** Rarely or never

5 B:4 I feel vulnerable to injuries

a Yes, always, **b** Yes, in most training periods, **c** Yes, in some training periods, **d** Rarely or never

5 B:5 I have a headache

a Yes, almost daily, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 B:6 I feel physically exhausted

a Yes, almost daily, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 B:7 I feel strong and am making good progress with my strength training

a Yes, always **b** Yes, in most training periods **c** Yes, in some training periods **d** Rarely or never

5 C:1 I get enough sleep

a Yes, almost every night, **b** Yes, several nights a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 C:2 I fall asleep satisfied and relaxed

a Yes, almost every night, **b** Yes, several nights a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 C:3 I wake up and well rested

a Yes, almost every morning, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom **d** Rarely or never

5 C:4 I sleep restlessly

a Yes, almost every night, **b** Yes, several nights a week, **c** Yes, once or twice a week or more seldom **d** Rarely or never

5 C:5 My sleep is easily interrupted

a Yes, almost every night, **b** Yes, several nights a week, **c** Yes, once or twice a week or more seldom **d** Rarely or never

5 D:1 I recover well physically

a Yes, after almost all training sessions, **b** Yes, often, **c** Yes, sometimes, **d** Rarely or never

5 D:2 I'm in good physical shape

a Yes, always, **b** Yes, mostly, **c** Yes, sometimes, **d** Rarely or never

5 D:3 I feel I am achieving the progress in training and competition that I deserve

a Yes, always, **b** Yes, in most training periods, **c** Yes, in some training periods, **d** Rarely or never

5 D:4 My body feel strong

a Yes, almost every day, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 E:1 I feel very energetic in general

a Yes, almost every day, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 E:2 I feel invigorated for training sessions and ready to perform well

a Yes, almost every day, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 E:3 I feel happy and on top of my life outside sport

a Yes, almost every day, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 E:4 I feel down and less happy than I used to feel or would like to feel

a Yes, almost every day, **b** Yes, several days a week, **c** Yes, once or twice a week or more seldom, **d** Rarely or never

5 F:1a I would rate my sex drive as

a high, **b** moderate, **c** low, **d** I don't have much interest in sex

5 F:1b over the last month I would rate my sex drive as

a stronger than usual, **b** about the same, **c** a little less than usual **d** much less than usual

5 F:2a Morning erections: over the last month this has happened

a 5-7 per week, **b** 3-4 a week, **c** 1-2 a week, **d** rarely or never

5 F:2b compared to what you would consider normal for you is this

a more often, **b** about the same, **c** a little less often, **d** much less often