

Amphetamine Withdrawal Questionnaire (AWQ)

Please circle (o) one response for each question regarding the past 24 hours

Q.1 Have you been craving amphetamine (or methamphetamine)?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.2 Have you felt sad?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
3.2 Have you lost interest in things or no longer take pleasure in them?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.4 Have you felt anxious?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.5 Have you as if your movements were slow?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.6 Have you felt agitated?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.7 Have you felt tired?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.8 Has your appetite increased or are you eating too much?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.9 Have you had any vivid or unpleasant dreams?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Q.10 Have you been craving for sleep or sleeping too much?				
Not at all <input type="checkbox"/> 0	A little <input type="checkbox"/> 1	Moderately <input type="checkbox"/> 2	Quite a bit <input type="checkbox"/> 3	Extremely <input type="checkbox"/> 4
Total Score:				

Scoring and interpretation: The AWQ consists of ten questions. Each question is scored on a 5-point scale (i.e., 0,1,2,3, or 4). A total score is calculated by summing responses to all 10 questions. The minimum total score possible is 0, and the maximum total score possible is 40 (i.e. total score range: 0-40). A higher total score reflects more severe withdrawal symptoms.

Tool citation: Srisurapanont, M., Jarusuraisin, N., and Jittiwutikan, J. *Amphetamine withdrawal: I. reliability, validity and factor structure of a measure*. Australian and New Zealand Journal of Psychiatry, 1999. **33**(1): 89-93.

Further information: Fischer, J.A., Roche, A.M., and Duraisingam, V. *Amphetamine Withdrawal Questionnaire (AWQ): description, strengths and knowledge gaps*. 2021, National Centre for Education and Training on Addiction (NCETA), Flinders University: Adelaide, South Australia.