

CANDIDA QUESTIONNAIRE

Patient Name _____

Date _____

History **Point**

1.) Have you taken tetracycline or other antibiotics for acne for one month or longer? **Score**
25

2.) Have you at any time in your life taken other "Broad-spectrum" antibiotics for respiratory, urinary or other infections for two months or longer, or in short courses four or more times in a one year period? 20

3.) Have you ever taken a broad-spectrum antibiotic (even a single course)? 6

4.) Have you at anytime in your life been bothered by persistent prostatitis, vaginitis, or other problems affecting your reproductive organs? 25

5.) Have you been pregnant.....
One time? 3
Two or more times? 5

6.) Have you taken birth control pills...
For six months to two years? 8
For more than two years? 15

7.) Have you taken prednisone or other cortisone type drugs...
For two weeks or less? 6
For more than two weeks? 15

8.) Does exposure to perfumes, insecticides, fabric shop odors and other chemicals provoke...
Mild symptoms? 5
Moderate to severe symptoms? 20

TOTAL SCORE FOR THIS SECTION _____

9) Are your symptoms worse on damp, muggy days or moldy places? 20

10) Have you had athlete's foot, ringworm, "jock itch", or other chronic infections of the skin or nails?
Mild to moderate? 10
Severe or persistent? 20

11) Do you crave sugar? 10

12) Do you crave breads? 10

13) Do you crave alcoholic beverages? 10

14) Does tobacco smoke really bother you? 10

TOTAL SCORE FOR THIS SECTION _____

Major Symptoms **Point**
Score

For each of your symptoms, enter the appropriate figure in the Point Score column.

-If symptom is occasional or mild 3 points

-If symptom is frequent and/or moderately severe 6 points

-If a symptom is severe and/or disabling 9 points

1. Fatigue or lethargy _____

2. Feeling of being drained _____

3. Poor memory _____

4. Feeling "spacey" or "unreal" _____

5. Depression _____

6. Numbness, burning or tingling _____

7. Muscle aches _____

8. Muscle weakness or paralysis _____

9. Pain and/or swelling in joints _____

10. Abdominal pain _____

11. Constipation _____

12. Diarrhea _____

13. Bloating _____

14. Persistent vaginal itch _____

15. Persistent vaginal burning _____

16. Prostatitis _____

17. Impotence _____

18. Loss of sexual drive _____

19. Endometriosis _____

20. Cramping and other menstrual irregularities _____

21. Premenstrual tension _____

22. Spots in front of eyes _____

23. Erratic vision _____

TOTAL SCORE FOR THIS SECTION _____

Other Symptoms

Point Score

For each of your symptoms, enter the appropriate figure in the point score column.

- If symptom, is occasional or mild score 1 point
- If symptom is frequent &/or moderately severe score 2 points
- If symptom is severe &/or Disabling score 3 points

- 1) Drowsiness _____
- 2) Irritability _____
- 3) Lack of coordination _____
- 4) Inability to concentrate _____
- 5) Frequent mood swings _____
- 6) Headache _____
- 7) Dizziness / loss of balance _____
- 8) Pressure above ears, feeling of head swelling and tingling _____
- 9) Itching _____
- 10) Other Rashes _____
- 11) Heartburn _____
- 12) Indigestion _____
- 13) Belching and intestinal gas _____
- 14) Mucus in stools _____
- 15) Hemorrhoids _____
- 16) Dry mouth _____
- 17) Rash or blisters in mouth _____
- 18) Bad breath _____
- 19) Joint swelling or arthritis _____
- 20) Nasal congestion or discharge _____
- 21) Postnasal drip _____
- 22) Nasal itching _____
- 23) Sore or dry throat _____
- 24) Cough _____
- 25) Pain or tightness in chest _____
- 26) Wheezing or shortness of breath _____
- 27) Urinary urgency or frequency _____
- 28) Burning on urination _____
- 29) Failing vision _____
- 30) Burning or tearing of eyes _____
- 31) Recurrent infections or fluid in ears _____
- 32) Ear pain or deafness _____

TOTAL SCORE FOR THIS SECTION _____

Total score from section one _____

Total score from section two _____

Total score from section three _____

Total score from section four _____

TOTAL FOR ALL SECTIONS _____

	Women	Men
Yeast – connected health problems are almost certainly present	>180	>140
Yeast – connected health problems are probably present	120-180	90-140
Yeast – connected health problems are possibly present	60-119	40-89
Yeast – connected health problems are less likely to be present	<60	<40

Although the Candida questionnaire can help, ultimately the best method for diagnosing candidiasis is clinical evaluation by a physician knowledgeable about yeast – related illness.

Signature of patient

Date