

CORE HEALTH

NATUROPATHIC WELLNESS CENTER

Brandy Strelec, B.Sc.(Hons),N.D.
Board Certified Naturopathic Doctor | Bowen Practitioner

CANDIDA QUESTIONNAIRE

The total score will help you and your physician decide if your health problems are yeast-connected. Scores in women will run higher, as seven items in the questionnaire apply exclusively to women, while only two apply exclusively to men.

SECTION A: HISTORY

For each of your symptoms, circle the number in the point score column. Add total score and record it at the end of this section.

1.	Have you taken tetracyclines or other antibiotics for acne for 1 month (or longer)	25
2.	Have you at any time in your life taken other broad spectrum antibiotics for respiratory, urinary, or other infections (for 2 months or longer, or in shorter courses 4 or more times in a 1-year period)?	20
3.	Have you taken a broad spectrum antibiotic drug, even one course?	6
4.	Have you, at any time in your life, been bothered by persistent prostatitis, vaginitis, or other problems affecting your reproductive organs?	25
5.	Have you been pregnant:	
	-2 or more times	5
	-1 time?	3
6.	Have you taken birth control pills:	
	-for more than 2 years?	15
	-for 6 months to 2 years?	6
7.	Have you taken prednisone or other cortisone-type drugs:	
	-for more than 2 weeks?	15
	-4 or 2 weeks or less?	6
8.	Does exposure to perfumes, insecticides, fabric shop odours, and other chemicals provoke:	
	-mild symptoms?	5
	-moderate to severe symptoms?	20
9.	Are you symptoms worse on damp, ruggy days or in mouldy places?	20
10.	Have you had athlete's foot, ringworm, other chronic fungal infections of the skin or nails? Have the infections been;	Y/N
	-severe to persistent	20
	-mild to moderate?	10
11.	Do you crave sugar?	
12.	Do you crave breads?	10
13.	Do you crave alcoholic beverages?	10
14.	Does tobacco smoke <i>really</i> bother you?	10

TOTAL SCORE - SECTION A

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SECTION B: MAJOR SYMPTOMS

For each of your symptoms, enter the appropriate figure in the “point score” column:

- If a symptom is irrelevant... mark as zero
- if a symptom is occasional or mild 3 points
- if a symptom is frequent and/or moderately severe 6 points
- if a symptom is severe and/or disabling 9 points

Add total score and record it at the end of this section.

	Point Score
Fatigue or lethargy	_____
Feeling of being drained	_____
Poor memory	_____
Feeling 'spacey' or unreal	_____
Depression	_____
Numbness burning or tingling	_____
Muscle aches	_____
Muscle weakness or paralysis	_____
Pain and/or swelling in joints	_____
Abdominal pain	_____
Constipation	_____
Diarrhea	_____
Bloating	_____
Troublesome vaginal discharge	_____
Persistent vaginal itching or burning	_____
Prostatitis	_____
Impotence	_____
Loss of sexual drive	_____
Endometriosis	_____
Cramps and/or other menstrual irregularities	_____
Premenstrual tension	_____
Spots in front of eyes	_____
Erratic vision	_____

TOTAL SCORE-SECTION. B

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SECTION C: OTHER SYMPTOMS

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

- if a symptom is irrelevant, score as zero
- if a symptom is occasional or mild, score 1 point
- if a symptom is frequent and/or moderately severe, score 2 points
- if a symptom is severe and/or disabling, score 3 points

Add total score and record it at the end of this section.

Point Score

Drowsiness	_____
Irritability or Jitteriness	_____
Uncoordinated	_____
Inability to concentrate	_____
Frequent mood swings	_____
Headache	_____
Dizziness (loss of balance)	_____
Pressure above ears, feeling of head swelling and tingling	_____
Itching	_____
Other rashes	_____
Indigestion	_____
Heartburn	_____
Belching and intestinal gas	_____
Mucous in stools	_____
Hemorrhoids	_____
Dry mouth	_____
Rash or blisters in mouth	_____
Bad breath	_____
Joint swelling or arthritis	_____
Nasal congestion or discharge	_____
Postnasal drip	_____
Nasal itching	_____
Sore or Dry mouth	_____
Cough	_____
Pain or tightness in chest	_____
Wheezing or shortness of breath	_____
Urgency or urinary frequency	_____
Burning on urination	_____
Failing vision	_____
Burning or tearing of eyes	_____
Recurrent ear infections or fluid in ears	_____
Ear pain or deafness	_____

TOTAL SCORE - SECTION C

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TOTAL SCORE OF ALL THREE SECTIONS _____

**Yeast-connected health problems are almost certainly present in women with scores over 180 and in men with scores over 140

**Yeast-connected health problems are possibly present in women with scores over 60 and in men with scores over 40

**With scores of less than 60 in women and 40 in men, yeast is less apt to be the cause of health problems