

Do you have Candida?

The following 2-part questionnaire can help you determine if Candida overgrowth is contributing to your health problems.

History	Point	Score
Have you taken tetracycline or other anti-Biotics for acne for one month or longer?	(25)	_____
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 4 or more times in a 1-year period?	(20)	_____
Have you ever taken a broad-spectrum antibiotic (even a single course)?	(6)	_____
Have you at any time in your life been bothered by persistent prostatitis, vaginitis, or other problems affecting your reproductive Organs?	(25)	_____
Have you been pregnant? (one time = 3 points; two or more = 5 points)	(3 / 5)	_____
Have you taken birth-control pills? (6 - 24 months = 8 points; more than 24 months = 15)	(8 / 15)	_____
Have you taken prednisone or other Cortisone type drugs? (2 weeks or less = 6 points; more than 2 weeks = 15 points)	(6 / 15)	_____
Does exposure to perfumes, insecticides, fabric shop odors, and other chemicals provoke mild symptoms? (5 points for moderate 20 points for severe)	(5 / 20)	_____
Are your symptoms worse on damp, muggy days or in moldy places?	(20)	_____
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)	(10 / 20)	_____
Do you crave sugar?	(10)	_____
Do you crave breads?	(10)	_____
Do you crave alcoholic beverages?	(10)	_____
Do you crave cheese or mushrooms?	(10)	_____

Total Score for this section: _____

No Symptoms = 0 points
 Symptom is occasional or mild = 3 points
 Symptom is frequent and / or moderately severe = 6 points
 Symptom is severe and / or disabling = 9 points

Fatigue or lethargy	_____
Poor memory	_____
Inability to concentrate	_____
Frequent mood swings	_____
Feeling "spacey" or "unreal"	_____
Depression	_____
Numbness; burning, or tingling	_____
Muscle aches	_____
Pain and / or swelling in joints	_____
Abdominal pain	_____
Bloating	_____
Persistent vaginal itch or burning	_____
Prostatitis	_____
Impotence	_____
"Jock Itch"	_____
Athlete's foot	_____
Loss of sexual desire	_____
Endometriosis	_____
Itching or other rashes	_____
Coated tongue	_____
Thrush in throat	_____
Heartburn	_____
Indigestion	_____
Belching and intestinal gas	_____
Mucus in stools	_____
Hemorrhoids	_____
Postnasal drip	_____
Cough	_____
Wheezing or shortness of breath	_____
Urinary urgency or frequency	_____
Burning on urination	_____
Cramps and / or other menstrual irregularities	_____

Total score for this section: _____
 Total score for sections combined: _____

Yeast connected health problems are:	Women	Men
Almost certainly present	> 160	> 120
Probably present	> 100	> 80
Possibly present	> 50	> 30
Less likely to be present	> 50	> 30