

# Do you have Candida?

## Harmony & Health

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Quality Products for Health

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

### History

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

### Symptoms

No Symptoms = 0 pts      Occasional/mild = 3 pts      Frequent/moderately severe = 6 pts      Severe/disabling = 9 pts

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

Yeast connected health problems are:

|                           | <u>Women</u> | <u>Men</u> |
|---------------------------|--------------|------------|
| Almost certainly present  | > 160        | > 120      |
| Probably present          | > 100        | > 80       |
| Possibly present          | > 50         | > 30       |
| Less likely to be present | > 50         | > 30       |

**Important:** This information is for educational purposes only. It is not intended for diagnosing or treating diseases. If you have a serious illness, we recommend you consult a competent health practitioner before beginning a course of treatment.



*Help Your Body Stay Healthy with Natural Remedies.*