

CANDIDA SYMPTOMS

Name _____ Date: _____

Head, eyes, ears, nose, mouth, throat (tick the box, if applies to you)

- ☐ Head, eyes, ears, nose, mouth, throat
- ☐ Bad breath
- ☐ Colds and flu (frequent)
- ☐ Ear infections (frequent)
- ☐ Eye tearing or watering
- ☐ Eye burning
- ☐ Headaches
- ☐ Itchy nose (crusty bogies)
- ☐ Nasal or sinus congestion
- ☐ Oral thrush
- ☐ Post-nasal drip Sore throat (chronic)
- ☐ Spots or lights in front of eyes
- ☐ Tongue has a white coating

Skin

- ☐ Eczema
- ☐ Hives, psoriasis or rash
- ☐ Numb, tingling or burning sensations
- ☐ Pungent body odour

Respiratory system

- ☐ Chest pain or tightness
- ☐ Bronchitis or cough

Musculoskeletal

- ☐ Aching muscles
- ☐ Coordination problems
- ☐ Joint pain
- ☐ Poor balance
- ☐ Weakness or trembling

Gastrointestinal

- ☐ Bladder or prostate infections (frequent)
- ☐ Constipation
- ☐ Gastric reflux ('heartburn')
- ☐ Intestinal discomfort or pain
- ☐ Itchy rectum
- ☐ Loose stools
- ☐ Mucus in stools
- ☐ Weak digestion, gas or bloating

Genito-urinary

- ☐ Menstrual difficulties (for women)
- ☐ Endometriosis
- ☐ Erectile dysfunction
- ☐ Infertility
- ☐ Premenstrual tension (for women)
- ☐ Prostatitis
- ☐ Reduced libido (sex drive)
- ☐ Vaginal thrush (yeast infections)

Central nervous system

- ☐ Anxiety
- ☐ Depression, lethargy
- ☐ Disorientation or confusion
- ☐ Dizziness
- ☐ Emotional sensitivity
- ☐ Forgetfulness
- ☐ Indecisiveness
- ☐ Irritability, jumpiness
- ☐ Mood swings
- ☐ Panic attacks
- ☐ Poor concentration
- ☐ Sleep disturbances
- ☐ Spacey feeling
- ☐ Tearfulness
- ☐ Tire easily / chronic fatigue

Environment

- ☐ Intolerant to mould (e.g. distress in humidity, dampness)
- ☐ Perfume or chemical sensitivities
- ☐ Tobacco smoke intolerance

Food-related behaviours

- ☐ Alcohol craving
- ☐ Craving bread or starch (high-carbohydrate foods)
- ☐ Hunger causes shakes or irritability (hypoglycemia, or low blood sugars)
- ☐ Multiple food intolerances
- ☐ Reactions to yeast
- ☐ Sugar cravings

Other symptoms

Additional risks

- ☐ More than one pregnancy, or use of the contraceptive pill for longer than six months
- ☐ Antibiotic use within the last ten years for more than three weeks, or four courses of antibiotics within the last two years
- ☐ Use within the last five years of steroids, immuno-suppressant or anti-viral medications for four weeks or more

Your total

Add up the number of your symptoms -----

Add five points for each additional risk factor -----

Your total score -----

Interpreting your score

35-55 Not a definite diagnosis of candidiasis, as many other conditions (such as endocrine imbalances, auto-immune disorders, viruses) can cause these symptoms. Nevertheless, reducing your candida load can assist with any other conditions you may have.

56-85 Moderate candidiasis

85 + Severe candidiasis