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## GLUTEN QUESTIONNAIRE

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Gluten sensitivity has been found to be most common among people of Irish, English, Scottish, Scandinavian, and Eastern European. Often times it is assumed that gluten sensitivity is a food allergy, but it is not. It is actually an autoimmune process, which affects an alarming percentage of the population. The most significant symptoms are **weight gain, fatigue and depression.**

The following test is a simple assessment to help you to understand the symptoms and signs that are likely to go along with gluten sensitivity.

**Do any of the following apply to you?**

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Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Weight gain
<input type="checkbox"/>	<input type="checkbox"/>	Unexplained fatigue
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty relaxing, feel tense frequently
<input type="checkbox"/>	<input type="checkbox"/>	Unexplained digestive problems
<input type="checkbox"/>	<input type="checkbox"/>	Female hormone imbalances, (PMS, menopausal symptoms)
<input type="checkbox"/>	<input type="checkbox"/>	Muscle or joint pain or stiffness of unknown cause
<input type="checkbox"/>	<input type="checkbox"/>	Migraine like headaches
<input type="checkbox"/>	<input type="checkbox"/>	Food allergies/sensitivities
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty digesting dairy products
<input type="checkbox"/>	<input type="checkbox"/>	Tendency to over consume alcohol
<input type="checkbox"/>	<input type="checkbox"/>	Overly sensitive to physical and emotional pain, cry easily
<input type="checkbox"/>	<input type="checkbox"/>	Cravings for sweets, bread, carbohydrates
<input type="checkbox"/>	<input type="checkbox"/>	Tendency to overeat sweets, bread, carbohydrates
<input type="checkbox"/>	<input type="checkbox"/>	Abdominal pain or cramping
<input type="checkbox"/>	<input type="checkbox"/>	Abdominal bloating or distention
<input type="checkbox"/>	<input type="checkbox"/>	Intestinal gas
<input type="checkbox"/>	<input type="checkbox"/>	“Love” specific foods
<input type="checkbox"/>	<input type="checkbox"/>	Eat when upset, eat to relax
<input type="checkbox"/>	<input type="checkbox"/>	Constipation or diarrhea of no known cause
<input type="checkbox"/>	<input type="checkbox"/>	Unexplained skin problems/rashes
<input type="checkbox"/>	<input type="checkbox"/>	Difficulty gaining weight



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**Have you suffered from any of the following conditions?**

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Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Allergies
<input type="checkbox"/>	<input type="checkbox"/>	Depression
<input type="checkbox"/>	<input type="checkbox"/>	Anorexia
<input type="checkbox"/>	<input type="checkbox"/>	Bulimia
<input type="checkbox"/>	<input type="checkbox"/>	Rosacea
<input type="checkbox"/>	<input type="checkbox"/>	Diabetes
<input type="checkbox"/>	<input type="checkbox"/>	Osteoporosis/bone loss
<input type="checkbox"/>	<input type="checkbox"/>	Iron deficiency/anemia
<input type="checkbox"/>	<input type="checkbox"/>	Chronic fatigue
<input type="checkbox"/>	<input type="checkbox"/>	Irritable bowel syndrome
<input type="checkbox"/>	<input type="checkbox"/>	Crohn's disease
<input type="checkbox"/>	<input type="checkbox"/>	Ulcerative colitis
<input type="checkbox"/>	<input type="checkbox"/>	Candida
<input type="checkbox"/>	<input type="checkbox"/>	Hypoglycemia
<input type="checkbox"/>	<input type="checkbox"/>	Lactose intolerance
<input type="checkbox"/>	<input type="checkbox"/>	Alcoholism

**Test Interpretation Guide (combine both sections)**

Number of "Yes" Responses		Potential for Gluten Intolerance
4 or less	=	Not likely
5 - 8	=	Suspected
9 or more	=	Very likely