

Horowitz Lyme-MSIDS Questionnaire



Score

< 21 niet waarschijnlijk

21 - 45 waarschijnlijk - bezoek huisarts

> 45 zeer waarschijnlijk borreliosis - professionele hulp noodzakelijk

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Gevalideerde Lyme Questionnaire



Section 1: Symptom Frequency Score

Input the frequency of each of the following symptoms.

0 None 1 Mild 2 Moderate 3 Severe

- | | |
|--|---|
| <input type="checkbox"/> 1. Unexplained fever, sweats, chills, or flushing | <input type="checkbox"/> 21. Twitching of the face or other muscles |
| <input type="checkbox"/> 2. Unexplained weight change; loss or gain | <input type="checkbox"/> 22. Headaches |
| <input type="checkbox"/> 3. Fatigue, tiredness | <input type="checkbox"/> 23. Neck cracks or stiffness |
| <input type="checkbox"/> 4. Unexplained hair loss | <input type="checkbox"/> 24. Tingling, numbness, burning, or stabbing sensations |
| <input type="checkbox"/> 5. Swollen glands | <input type="checkbox"/> 25. Facial paralysis (Bell's palsy) |
| <input type="checkbox"/> 6. Sore throat | <input type="checkbox"/> 26. Eye/vision: double, blurry |
| <input type="checkbox"/> 7. Testicular or pelvic pain | <input type="checkbox"/> 27. Ears/hearing: buzzing, ringing, ear pain |
| <input type="checkbox"/> 8. Unexplained menstrual irregularity | <input type="checkbox"/> 28. Increased motion sickness, vertigo |
| <input type="checkbox"/> 9. Unexplained breast milk production; breast pain | <input type="checkbox"/> 29. Light-headedness, poor balance, difficulty walking |
| <input type="checkbox"/> 10. Irritable bladder or bladder dysfunction | <input type="checkbox"/> 30. Tremors |
| <input type="checkbox"/> 11. Sexual dysfunction or loss of libido | <input type="checkbox"/> 31. Confusion, difficulty thinking |
| <input type="checkbox"/> 12. Upset stomach | <input type="checkbox"/> 32. Difficulty with concentration or reading |
| <input type="checkbox"/> 13. Change in bowel function (constipation or diarrhea) | <input type="checkbox"/> 33. Forgetfulness, poor short-term memory |
| <input type="checkbox"/> 14. Chest pain or rib soreness | <input type="checkbox"/> 34. Disorientation: getting lost; going to wrong places |
| <input type="checkbox"/> 15. Shortness of breath or cough | <input type="checkbox"/> 35. Difficulty with speech or writing |
| <input type="checkbox"/> 16. Heart palpitations, pulse skips, heart block | <input type="checkbox"/> 36. Mood swings, irritability, depression |
| <input type="checkbox"/> 17. History of a heart murmur or valve prolapse | <input type="checkbox"/> 37. Disturbed sleep: too much, too little, early awakening |
| <input type="checkbox"/> 18. Joint pain or swelling | <input type="checkbox"/> 38. Exaggerated symptoms of worse hangover from alcohol |
| <input type="checkbox"/> 19. Stiffness of the neck or back | |
| <input type="checkbox"/> 20. Muscle pain or cramps | |

Section 2: Most Common Lyme Symptoms Score

If you rated a 3 for each of the following symptoms in section 1, give yourself 5 points for each one you did.

- | | |
|--|---|
| <input type="checkbox"/> 39. Fatigue | <input type="checkbox"/> 42. Tingling, numbness, burning, or stabbing sensations |
| <input type="checkbox"/> 40. Forgetfulness, poor short-term memory | <input type="checkbox"/> 43. Disturbed sleep: too much, too little, early awakening |
| <input type="checkbox"/> 41. Joint pain or swelling | |

Gevalideerde Lyme Questionnaire



Section 3: Lyme Incidence Score

Now for each of the following statements that is true, give yourself the point value found at the end of the statement. If a statement is false, click the box to generate a "0".

- 44. You have had a tick bite with no rash or flulike symptoms. (3 points)
- 45. You have had a tick bite, an erythema migrans, or an undefined rash, followed by flulike symptoms. (5 points)
- 46. You live in what is considered a Lyme-endemic area. (2 points)
- 47. You have a family member who has been diagnosed with Lyme and/or other tick-borne infections. (1 points)
- 48. You experience migratory muscle pain. (4 points)
- 49. You experience migratory joint pain. (4 points)
- 50. You experience tingling/burning/numbness that migrates and/or comes and goes. (4 points)
- 51. You have received a prior diagnosis of chronic fatigue syndrome or fibromyalgia. (3 points)
- 52. You have received a prior diagnosis of a specific autoimmune disorder (lupus, MS, or rheumatoid arthritis) or of a nonspecific autoimmune disorder. (3 points)
- 53. You have had a positive Lyme test (IFA, ELISA, Western blot, PCR, and/or borrelia culture). (5 points)

Section 4: Overall Health Score

- 54. Thinking about your overall physical health, for how many of the past 30 days was your physical health not good?
- 55. Thinking about your overall mental health, for how many of the past 30 days was your mental health not good?

Score

Your total scores for each section are recorded below. Add them together to achieve your final score.

Section 1 Total: _____

Section 2 Total: _____

Section 3 Total: _____

Section 4 Total: _____