

Chapter 3

New Patient History

This form, along with my comments, will help you know where to start. I recommend you answer all the questions before flipping ahead to the recommended chapters and protocols.

This is the New Patient Intake Form (With my comments in italics) that I use in my practice.

Note: This questionnaire appears in the appendix in its unaltered form.

I suggest you fill out the entire questionnaire.

Medications see chapter 3

What medications are you taking? Please list them here:

Most CFS/FMS patients are on at least six prescription medications. These medications may cause all sorts of side-effects: anti-depressants can cause anxiety, benzodiazepines (anxiety medications like Xanax or Klonopin) can cause amnesia and depression, NSAIDs (Celebrex, Alleve, Mobic, etc.) can cause intestinal permeability, cholesterol medications (Lipitor, Zocor, and others) can cause diffuse muscle pain, etc. There are dozens of prescription medications that will make your CFS/FMS worse.

I recommend everyone read chapter 3 “Conventional Medical Therapies.”

Sleep Concerns see chapter 4

Do you have trouble falling asleep? ___ Yes ___ No

Do you have trouble staying asleep? ___ Yes ___ No

When did you first start having trouble sleeping (months, years ago)? _____

These are perhaps the three most important questions on this intake form. If a person is having problems with sleep (can't fall asleep and stay asleep without medication) and has diffuse pain, it is a good bet that she has FMS.

If she does consistently sleep through the night without medications (or naturals) but complains that she just doesn't have any energy, gets sick a lot, and has achy pain, she most likely has CFS (a person can have both

illnesses).

These are important clues. Both illnesses are treated with high doses of nutritional supplements. However, I'm always relieved to see that patients have checked that they are having trouble with their sleep. I know if I can get them going into deep sleep (and I usually can) and build up their serotonin levels (with 5HTP); these individuals will feel better in only a couple of weeks. I find that the classic symptoms associated with FMS—insomnia, depression, pain, fatigue, anxiety, and irritable bowel syndrome (IBS)—respond quickly to restored serotonin levels.

It takes longer and is harder to get these same results in true CFS patient. I define a true CFS patient as having a severely compromised immune system and having normal serotonin levels. These individuals usually have a sluggish liver (indicated by funny reactions to medications, odor aversions, and chemical sensitivities), catch every cold or flu that comes around, suffer from chronic infections, and have zero tolerance to stress. But they don't have any trouble sleeping.

What over-the-counter or prescription medications have you taken for sleep?

Ambien Zanaflex **Trazadone** Sonata
 Tylenol PM **Elavil** Neurontin **Doxepin**
 Flexeril Xanax Klonopin Ativan Benadryl
 Other: _____

If you're on sleep medications, I suspect you have a serotonin deficiency. Some of these drugs promote deep restorative sleep (the key to getting well) and some don't. Those in bold promote deep restorative sleep. Those in regular type, don't. All of these medications have potential unwanted side effects. These side effects could be making your condition worse. If you're taking any of the above medications then please see chapter 4 "Conventional Medical Therapies" and chapter 5 "Sleep Disorders."

Neurotransmitters/Mood Disorders see chapters 4 and 12

(Brain Chemicals)

Are you taking one or more antidepressants? Yes No

If so, please list them here:

Have you taken other antidepressants in the past? Yes No

If so, which ones? Prozac Paxil Celexa Lexapro
 Wellbutrin Effexor Zoloft

Where they helpful? Please describe in detail (didn't help, had side-effects, stopped working, etc.)

Do you crave carbohydrates, starches, and/or sugar? ___ Yes ___ No

A positive answer suggests a serotonin deficiency. This may also point to a yeast overgrowth problem. The amino acid tryptophan (5HTP) is best absorbed when combined with carbohydrates (sugar) Sugar or starches act as sedatives. This may be why people under stress attempt to self medicate themselves through over eating (especially starches). Sugar feeds yeast and those with a yeast overgrowth will often have sugar cravings.

Do you get white spots on your fingernails? ___ Yes ___ No ___ Not sure

White spots on the nails are a sign of a zinc deficiency. A zinc deficiency leads to elevated copper levels. Excess copper can create anxiety, nervousness, insomnia, and fatigue. Long-term elevated copper levels lead to depression.

For a thorough discussion on vitamins, minerals, amino acids, and essential fatty acids, please see my book "Treating and Beating Fibromyalgia and Chronic Fatigue Syndrome."

Bowel Function see chapter 7

Do you have normal, daily bowel movements (at least one bowel movement a day)? ___ Yes ___ No

Do you have loose bowels (diarrhea), constipation, or perhaps both? Please describe:

If a patient's constipated, it usually means he is deficient in magnesium. Once he starts taking 600-700 mg. of magnesium, normal bowel function will return. The CFS/Fibromyalgia Formula has 700mg of magnesium.

Have you been diagnosed with Irritable Bowel Syndrome (IBS)?

___ Yes ___ No

IBS usually goes away after one to two weeks on my program. (There are more serotonin receptors in the intestinal tract than in the brain!) Serotonin helps control the speed at which food is broken down and moved through the intestinal tract. A serotonin deficiency causes IBS. Restoring normal serotonin levels with 5HTP usually cures IBS once and for all.

Do you ever have floating stools (floats on top of toilet water)?

___ Yes ___ No

Floating stools are a sign that the person is not breaking down the fats in her diet. She might have problems with her gallbladder (or no gallbladder). This person should take pancreatic digestive enzymes or bile salts with

each meal.

Immune Function see chapter 8

Check all that apply to you:

Chronic Sinus Congestion **Chronic Sinus Infections (2 or more a year)**

Chronic Sore Throat infections each year **Chronic Colds or Flu**

Chronic Upper Respiratory Infections (Bronchitis, Pneumonia)

Chronic means a minimum of 3-4 times a year.

These items will be checked by true CFS patients. Those with FMS may also have chronic infections. Chronic sinusitis is a common complaint seen in those with CFS and FMS. I always suspect a low thyroid if someone suffers from chronic sinus infections.

Please see chapter 8 “Immune Dysfunction Disorders.”

Liver Function see chapter 14

Have you ever had elevated (high) liver enzymes on laboratory blood work?

Yes **No** **Not Sure**

A “yes” could possibly mean a sluggish liver, usually from taking prescription medications. It could also be due to a fatty liver or hepatitis.

Do you have any funny reactions when you drink alcohol (a little goes a long way, can’t drink red wine, etc.)? If so, please describe:

A positive answer suggests you may have a sluggish liver.

Do you have any problems eating raw onions? Yes No

Raw onion can cause problems in individuals with a sluggish liver. The sulphur in raw onions is the culprit.

The day after eating asparagus, do you get a very strong odor when urinating?

Yes **No**

This is a sign of a molybdenum deficiency. It is also a sign that a person may be allergic to sulphites.

Do you have hepatitis? Yes No

Do you have a fatty liver? Yes No

Do you have funny/strange reactions to medications? Yes No

Do strong odors (such as gasoline, smoke, cleaning supplies, perfume, etc.) bother you? Yes No

Answering yes to any of these questions suggests you may have a sluggish liver. Remember that smells are nothing more than invisible chemicals floating in the air. These foreign chemicals must be processed by

the liver. The longer you've had the illness, the less your tolerance to certain odors.

If any of these questions apply to you then I recommend you read chapter 14 **"Liver Detoxification."** **If you've got severe chemical sensitivities (have funny reactions to drugs or nutritional supplements) then I recommend you read chapter on Liver Detoxification first.**

Adrenal Function see chapter 6

If you skip a meal, do you feel bad (have headaches, become irritable, get jittery, tired, etc.) ___ Yes ___ No

This is a sign of hypoglycemia (low blood sugar) and adrenal dysfunction. Many of the patients I see aren't hungry in the morning and instead rely on caffeine to get them going. But if they don't eat lunch or skip dinner they become very irritable.

Do you have low blood pressure? ___ Yes ___ No ___ Don't Know

This is a sign of low adrenal function. It can also occur when taking certain prescription medications (beta-blockers, Topamax, etc.). Low blood pressure causes fatigue and lethargy. Blood helps deliver vital nutrients and oxygen to all the cells in the body including those in the brain. A normal blood pressure is between 100-120 systolic (top number) over 60-80 diastolic (bottom number).

Individuals with low blood pressure need to be drinking 70 ounces (at least) of water a day and using plenty of salt. This will improve their energy.

Do you crave salty foods? ___ Yes ___ No

A "yes" is a sure sign of adrenal stress. Salt increases the production of certain adrenal hormones. Individuals with low adrenal function will be drawn towards salty snack foods.

Does an increase in stress or stressful situations make your symptoms worse?

___ Yes ___ No

A "yes" is a sign that a patient's stress coping account and adrenal glands are severely challenged.

How's your energy level? Choose 1 to 5, with 5 being the best. _____

Low energy (3 or lower) suggests low adrenal function and perhaps low thyroid.

How's your concentration and memory, on the same scale? _____

Individuals who are low in norepinephrine (adrenal hormone) will have poor mental clarity.

How do you feel in the morning?

Refreshed **Hung over** **Exhausted**
 Nauseated **Achy All Over**

Are you hungry in the morning? Yes No

Low adrenaline levels (norepinephrine) will cause decreased mental clarity.

Nausea and a lack of appetite first thing in the morning is a sign of poor adrenal function. People with adrenal deficiency will prefer to skip breakfast. This artificially raises their normally low adrenal cortisol levels and gives them a false boost of energy. They will often use caffeine in ever increasing doses to jumpstart their adrenal glands. The digestion of food requires energy and puts the breaks on fasting cortisol levels, so they skip breakfast.

Nausea in the morning is associated with low adrenal function and low blood sugar levels. It is also a sign (along with not dreaming at night) of a vitamin B6 deficiency.

Please eat breakfast—even something as light as a handful of cashews and an apple. These people should avoid simple sugars (we all should) in the morning. They should avoid milk, cereals, fruit juices, muffins, doughnut, pastries, and other high glycemic foods (simple carbohydrates or starches, and sugar laden foods).

I recommend everyone read the chapter 6 “Adrenal Fatigue.”

Digestion see chapter 7

Do you experience any of these?

Bloating: **Yes** **No**

Gas: **Yes** **No**

Indigestion: **Yes** **No**

A “yes” is a sign that you need to be taking digestive enzymes (one with each meal).

Are there certain foods that give you problems (sugar, spicy foods, fruits, meats, fats, dairy, etc?) If so, please list:

If you answers yes to the question above please read chapter 10 “ Food Allergies and the elimination diet.”

Diet

What do you eat for breakfast? Please (honestly) describe here:

What do you eat for lunch?

What do you eat for dinner?

What are your usual snack foods (popcorn, ice cream, cookies, potato chips, candies)? Please be honest and specific:

Do you drink coffee? If so, how many cups a day and when?

Do you drink sodas? If so, how many?

Do you drink tea? If so, how many glasses and when?

I recommend you review your answers above. The most potent drug we put into our body is the food we eat. Our food turns into the chemicals, hormones (thyroid, serotonin, estrogen, testosterone, etc.), enzymes, and nutrients the body needs on a moment to moment basis. Poor food choices increase the rate of degeneration and poor health. We all know that eating doughnuts and drinking diet coke can't be healthy. I strongly encourage you to clean your diet up. Reduce or eliminate all white foods; sugar, milk, white potatoes, and white bread. Reduce or eliminate caffeine (avoid all sodas like the plague), fried foods, sweets, and processed foods. Try to eat at least 2 fruits and 2 vegetables each day (fresh salads with raw vegetables; broccoli, peppers, tomatoes, etc.). To lose weight reduce or avoid the high glycemic foods (see appendix). Try to eat less processed foods and more natural foods. Shop the outside aisles in grocery stores; unprocessed cheese, meats, vegetables, and fruits. Skip the middle aisles that are stocked with processed foods; potato and corn chips, cereals, sweets, and snacks.

Pain see chapter 9

Where do you have pain?

| | | | |
|--|--|---|--|
| <input type="checkbox"/> Joints | <input type="checkbox"/> Muscles | <input type="checkbox"/> Neck | <input type="checkbox"/> Shoulder |
| <input type="checkbox"/> Mid Back | <input type="checkbox"/> Low Back | <input type="checkbox"/> Chest | <input type="checkbox"/> Hips |
| <input type="checkbox"/> Arms | <input type="checkbox"/> Back of Legs | <input type="checkbox"/> Front of legs | |
| <input type="checkbox"/> Knees | <input type="checkbox"/> Feet | <input type="checkbox"/> Ankles | <input type="checkbox"/> Hands |

Fingers **Head**

Most of the pain associated with FMS goes away once you boost your serotonin level and begin to consistently go into deep restorative sleep each night.

The high doses of magnesium (which naturally relaxes muscles), malic acid (which blocks pain), and essential fatty acids (which decrease inflammation) contained in the CFS/Fibro formula also help to quickly reduce the pains associated with FMS and CFS.

I also recommend you get chiropractic adjustments (by a doctor familiar with gentle therapies), physiotherapy (electrical muscle stim, moist heat, and myofascial percussion), and massage therapy.

See Chronic Pain Protocol in chapter 9 “Chronic Pain and Inflammation.”

Intestinal Dysbiosis see chapter 11

This is basically a yeast overgrowth questionnaire. I go into more detail about yeast overgrowth in the chapter on yeast.

Have you ever been on long-term (more than 2 weeks) antibiotic therapy?

Yes **No**

Have you ever had vaginal yeast infections? Yes No

If yes, when was your most recent infection? _____

Do you have chronic vaginal yeast infections (more than two a year)? Yes No

A “yes” strongly suggests a problem with yeast overgrowth.

Are you bothered by memory or concentration problems? Do you sometimes feel “spaced out?” Yes No

Do you feel “sick all over,” yet in spite of visits to different physicians, the causes haven’t been found? _____

Have you been pregnant two or more times? _____

Have you taken birth control pills? _____ For more than 2 years?

_____ for more than 1 year? _____ For 6 months to 1 year?

Are your pain symptoms worse on damp, muggy days or in moldy places?

Yes **No**

Do you ever have itchy ears? Yes No

Itchy nose? Yes No

Rectal Itching? Yes No

Positive answers strongly suggest a problem with yeast overgrowth.

Do you crave sugar? Yes No

Does eating sugar make your symptoms worse? Yes No

Positive answers strongly suggest a problem with yeast overgrowth.

Do you have rectal itching after eating sugar, fruit, or a lot of starches?

Yes **No**

A positive answer strongly suggests a problem with yeast overgrowth. Yeast which live in the intestinal tract, including the colon (rectum), feed off of sugar.

Have you ever been on long-term (weeks) steroid therapy (prednisone, cortisone)? **Yes** **No** **These promote yeast overgrowth.**

Have you ever been on long-term (month or more) nonsteroidal anti-inflammatory medications (Such as Vioxx, Celebrex, Naprosyn, Advil, Bextra, Mobic, etc.)?

Yes **No**

*If “yes,” suspect intestinal permeability. Intestinal permeability leads to yeast overgrowth. Please see chapter 7 and “**Intestinal Permeability.**”*

Yeast Questionnaire see chapter 13

Please mark your symptoms as follows: MI: mild M: moderate S: severe

- feeling of being “drained”
- abdominal pain
- constipation and/or diarrhea
- bloating, belching or intestinal gas**
- indigestion or heartburn
- prostatitis
- endometriosis or infertility
- cramps and/or menstrual irregularities
- premenstrual tension (PMS)
- sore throat
- recurrent sinus infections**
- chronic hives
- recurrent cough or bronchitis
- nasal congestion or postnasal drip**
- nasal itching**
- eczema**
- psoriasis**
- cystitis or interstitial cystitis**
- pressure in the ears
- troublesome vaginal burning, itching, or discharge**
- rectal itching*
- dry mouth or throat
- mouth rashes, including “white tongue”**
- bad breath
- foot, hair, or body odor not relieved by washing
- wheezing or shortness of breath

- ___ urinary frequency or urgency
- ___ burning on urination
- ___ burning or tearing eyes

I pay particular attention to the highlighted statements.

See *Yeast Overgrowth Protocol* in chapter 13 **“Yeast Overgrowth.”**

Thyroid see chapter 11

Symptoms Checklist

- | | |
|--------------------------------------|---|
| ___ fatigue | ___ high cholesterol |
| ___ headaches | ___ cold hands/feet |
| ___ migraines | ___ changes in skin pigmentation |
| ___ PMS | ___ irritability |
| ___ irregular periods | ___ hypoglycemia |
| ___ fluid retention | ___ severe menstrual cramps |
| ___ dry hair | ___ low blood pressure |
| ___ dry skin | ___ frequent colds/sorethroats |
| ___ hair loss | ___ heat and/or cold intolerance |
| ___ depression | ___ lightheadedness |
| ___ decreased memory | ___ ringing in the ears |
| ___ decreased concentration | ___ infertility |
| ___ decreased sex drive | ___ asthma |
| ___ unhealthy nails | ___ low motivation |
| ___ constipation | ___ frequent infections |
| ___ Irritable Bowel Syndrome | ___ allergies |
| ___ inappropriate weight gain | ___ difficulty falling asleep |

This questionnaire is helpful but not essential. I pay more attention to blood work (TSH above 3) and low body temperature (below 98 degrees). All of the above can suggest low thyroid.

I pay particular attention to the statements in bold above.

If you suspect you have hypothyroid (low thyroid function) then please see chapter 11 “Thyroid Dysfunction.”

Brain Function Questionnaire see chapter 12

The Brain Function Questionnaire will help show which brain chemicals (neurotransmitters) you’ve depleted.

The "O" Group

Do any of these apply to your present feelings?

- ___ **Your life seems incomplete.**
- ___ **You feel shy with all but your close friends.**
- ___ **You have feelings of insecurity.**
- ___ **You often feel unequal to others.**
- ___ **When things go right you sometimes feel undeserving.**
- ___ **You feel something is missing in your life.**
- ___ **You occasionally feel a low self-worth or self-esteem.**

- You feel inadequate as a person.**
 - You frequently feel fearful when there is nothing to fear.**
- If three or more of the above apply then see chapter 10 "Mood Disorders."*

The "G" Group

Do any of these apply to your present feelings?

- You often feel anxious for no reason.**
- You sometimes feel "free floating" anxiety.**
- You frequently feel "edgy" and it's difficult to relax.**
- You often feel a "knot" in your stomach.**
- Falling asleep is sometimes difficult.**
- It's hard to turn your mind off when you want to relax.**
- You occasionally experience feelings of panic for no reason.**
- You often use alcohol or other sedatives to calm down.**

If three or more of the above apply, then see chapter 10 "Mood Disorders."

The "D" Group

Do any of these apply to your present feelings?

- You lack pleasure in life.**
- You feel there are no real rewards in life.**
- You have unexplained lack of concern for others, even loved ones.**
- You experience decreased parental feelings.**
- Life seems less "colorful" or "flavorful".**
- Things that used to be fun aren't any longer enjoyable.**
- You have become a less spiritual or socially concerned person.**

If three or more of the above apply, then see chapter 10 "Mood Disorders."

The "N" Group

Do any of these apply to your present feelings?

- You suffer from a lack of energy.**
- You often find it difficult to "get going."**
- You suffer from decreased drive.**
- You often start projects and then don't finish them.**
- You frequently feel a need to sleep or "hibernate."**
- You feel depressed a good deal of the time.**
- You occasionally feel paranoid.**
- Your survival seems threatened.**
- You are bored a great deal of the time.**

If three or more of the above apply, then see chapter 10 "Mood Disorders."

The "S" Group

Do any of these apply to your present feelings?

- It's hard for you to go to sleep.**
- You can't stay asleep.**
- You often find yourself irritable.**
- Your emotions often lack rationality.**
- You occasionally experience unexplained tears.**
- Noise bothers you more than it used to. It seems louder than normal.**
- You "flare up" at others more easily than you used to.**
- You experience unprovoked anger.**
- You feel depressed much of the time.**
- You find you are more susceptible to pain.**
- You prefer to be left alone.**

*If three or more of the above apply, then see chapter 10 "**Mood Disorders.**"*

Important

Please Follow the Instructions Below

Now that you've finished filling out the new patient questionnaire you're ready to start working through the manual.

As you'll read in the chapters that follow I place a lot of attention on restoring deep restorative sleep, adrenal function, optimal digestion, and repairing nutritional deficiencies with high dose vitamin, mineral, amino acid, and essential fatty acids.

These make up my jump start package. After you've started these supplements then the next thing to look at is your thyroid. Make sure you have an optimally functioning thyroid. If your pain continues after 3-4 weeks then start to explore leaky gut and the other protocols in the chapter on Chronic Pain. Those with a compromised immune system will need to implement the protocols in chapter 8.

Keep working through the manual until you correct all of your underlying problems. It will be work, but in the end it will be worth it! Good luck and God bless you in your mission to get healthy.

Prioritizing where to start :

1. I recommend anyone with severe chemical sensitivities and liver dysfunction read chapter 14 first.
- 2. I recommend everyone read chapter 4.**
3. If you're having trouble falling asleep and staying asleep, or if you're taking sleep medications, then you should read chapter 5 next.
4. I recommend everyone read chapter 6 on stress and the adrenals.
5. After reading the chapters above, move on to chapter 7.
6. Now you're ready to implement the protocols in chapter 8 if needed (more important for those with CFS symptoms).

7. After 3-4 weeks if you're still having a good deal of pain, it's time to start to implement the protocols in chapter 9.
8. Chapter 11 is for those who suspect they have low thyroid.
9. Individuals who continue to have problems and suspect they have food allergies will should read chapter 10.
10. After reading and applying the above protocols it is now time to tweak your brain chemistry if needed. Please see chapter 12 on "Mood Disorders."
11. Some individuals will find that they checked a lot of the questions on yeast overgrowth. These individuals will need to do the above protocols first before attempting to treat their yeast overgrowth (wait at least 4 weeks before beginning yeast overgrowth protocols).

Chapter 15 is for wrapping things up. This chapter uses the treatment prescription hand out and recommendations I use in my practice.

Of course I suggest you read the entire manual. Since FMS and CFS involve such a diverse list of symptoms and conditions many of you will need to do all the protocols in this manual. For instance some individuals will have all the symptoms associated with fibromyalgia, pain, poor sleep, depression, IBS, etc. along with having osteoarthritis, high blood pressure, and food allergies. I've found that the only way to beat chronic illnesses including FMS and CFS is to get the person healthy from the inside out. You have to get healthy in order to get well. Yes, I know it sounds too simple to be true. But after working with these illnesses for over eight years, I can tell you from experience in treating thousands of patients, it really is the only thing that works.