

## **HPA Axis Questionnaire**

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Patient Name	Date	
The hypothalamus, pituitary, adrenal (HPA) axis is the body's central stress resport to help assess and differentiate possible dysfunction within this system.		
Please score only the items you experience on a scale of 1-4:  1 (This is a mild problem) 2 (This is a significant problem) 3 (This is a maximum of the context of the cont	uior problem) 4 (This is a severe problem)	
(This is a fine problem) 2 (This is a significant problem) 0 (This is a fine	gor problem) 4 (This is a sovere problem,	
SECTION 1: LOW CORTISOL STATE		
1Lethargic depression		
2Excessive need for sleep		
3Chronic fatigue syndrome		
<b>4.</b> Chronic pain		
5Fibromyalgia (musculoskeletal tender points)*		
6Dizziness when you stand or bend		
7Low blood pressure and/or drop of blood pressure on standing*		
<b>8.</b> Craving salty foods-pretzels, pickles etc.		
9Poor wound healing*		
10Easy bruising		
11Fatigue		
12Inability to handle even slight stresses		
Hypoglycemia: dizzy, irritable, or sleepy if you go without food for 4-5 hours; symptoms relieved by food		
<b>14.</b> Scars, elbows, nipples, or skin near nails that are unusually dark*		
15Slow healing of cuts*		
<b>16.</b> Unstable body temperatures (hot or cold)		
SECTION 2: ELEVATED CORTISOL STATE		
17Agitated depression		
18Weight gain around your abdomen, back of neck, and in the face ar	nd cheeks*	
19Stretch marks-not from weight loss *		
<b>20.</b> Adult onset diabetes		
21Osteoporosis		
<b>22.</b> Craving sweets		
23Trouble falling or staying asleep		
SECTION 3: ADRENAL HYPERPLASIA		

- **24.** \_\_\_\_Excessive dark male pattern hair growth (women)\*
- **25.** \_\_\_\_Irregular or no periods (not menopausal)
- **26.** \_\_\_\_Eastern European heritage

## **HPA Axis Questionnaire: Practitioner Interpretive Key**

The goal of this intake sheet is to obtain and collate data that will give you an idea of the presence and type of HPA axis dysfunction in your patient. These symptoms and signs are primarily a compilation from the *Williams Textbook of Endocrinology*—11th edition, as well as recent literature, and lastly, clinical experience. There are three sections divided by lines.

- Section 1 is correlated with low cortisol states
- Section 2 is correlated with high cortisol states
- Section 3 is correlated with adrenal hyperplasia.

## Instructions:

Add up the patient's totals for each section. Enter them below over the highest possible score for each section. The totals will indicate which areas to focus on. There is no absolute cutoff to use, rather there is a continuum between normal and dysfunction. Use this information in conjunction with blood testing and salivary cortisol testing.

Section 1: Low cortisol state	/64 =
Section 2: Elevated cortisol state	/28 =
Section 3: Adrenal hyperplasia	/12 =



<sup>\*</sup>Items should be assessed by physical examination.