HPQ 28 – Questionnaire on Hypoparathyroidism

with parathyroid gland insufficiency (hypoparathyroidism). Please think about each question carefully and choose the answer that best fits, ticking the respective box. Please answer every question. In the past 4 weeks, how much did you suffer from? In the past 4 weeks, how much did you suffer from? 1numbness or tingling sensation in certain parts of the body? 2memory problems 3pain in the lower back? 4trembling muscles? 5heart palpitations or racing heart? 6joint pain or pain in the limbs? 7self-blame? 8nausea or upset stomach? 9inner tension and restlessness? 10abdominal pain or stomach cramps? 11hot flushes or the chills? 12muscle pain? 13anxious thoughts? 14neck or shoulder pain?	Name/Number.:	Date:							
Please think about each question carefully and choose the answer that best fits, ticking the respective box. Please answer every question. In the past 4 weeks, how much did you suffer from? In th	This questionnaire contains a list of questions about symptoms and complaints that can occur in connection								
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1numbness or tingling sensation in certain parts of the body?	, , , , , , , , , , , , , , , , , , ,								
2memory problems	In the past 4 weeks, how much did you suffer from?	not at all	somewhat	quite a bit	severely				
3pain in the lower back?	1numbness or tingling sensation in certain parts of the body?								
4trembling muscles?	2memory problems								
5heart palpitations or racing heart?	3pain in the lower back?								
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14neck or shoulder pain?	12muscle pain?								
•	13anxious thoughts?								
15melancholia?	14neck or shoulder pain?								
	15melancholia?								
16 a sense of weakness?	16 a sense of weakness?								
17dizziness or a feeling that you might faint?	17dizziness or a feeling that you might faint?	_	_		_				
18difficulty making decisions?									
19diarrhea?	19diarrhea?								
20muscle cramps?	20muscle cramps?								
In the past 2 weeks, how often have you been bothered not at all Several more than half the		not at all							
by any of the following problems days days every day	by any of the following problems		days		every day				
21. Little interest or pleasure in doing things? $\ \square$	21. Little interest or pleasure in doing things?								
22. Feeling down, depressed or hopeless?	22. Feeling down, depressed or hopeless?								

In the next section, we ask you some questions about your quality of life. Please note: the answer "not at all" in these questions indicates that your sense of well-being is highly impaired. The answer "strongly" thus is positive, meaning that you experienced only little or no impairment of your sense of well-being.

In the past 4 weeks, how much have you	not at all	somewhat	quite a bit	strongly
23felt full of energy?				
24felt physically fit and vital?				
25taken pleasure in sexuality?				
26been calm and serene?				
27been happy?				
28felt healthy?				