



<b>38</b>	No	<b>Yes</b>	No	<b>Yes</b>	No	No	<b>Yes</b>	No	No	<b>Yes</b>	No	No	No	No
<b>39</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	No	No	No	No	No	No	<b>Yes</b>	No
<b>40</b>	<b>Yes</b>	<b>Yes</b>	No	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	No	No	No	No	No	<b>Yes</b>	No	No
<b>41</b>	No	No	No	<b>Yes</b>	<b>Yes</b>	No	No	No	<b>Yes</b>	No	No	No	No	No
<b>42</b>	No	No	No	No	No	No	No	No	No	No	No	No	No	<b>Yes</b>
<b>43</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	No	No	No	No	No	No	<b>Yes</b>	No
<b>44</b>	No	No	No	No	No	No	<b>Yes</b>	<b>Yes</b>	No	No	No	No	No	No
<b>45</b>	No	No	No	No	No	No	<b>Yes</b>	<b>Yes</b>	No	No	No	No	No	No
<b>46</b>	No	No	No	No	No	No	No	No	No	No	No	No	No	<b>Yes</b>
<b>47</b>	No	No	<b>Yes</b>	<b>Yes</b>	No	No	No	No	<b>Yes</b>	No	No	No	No	No
<b>48</b>	NE	NE	NE	NE	NE	NE	NE	NE	NE	NE	NE	NE	NE	NE
<b>49</b>	No	<b>Yes</b>	No	<b>Yes</b>	No	No	<b>Yes</b>	No	No	<b>Yes</b>	No	No	No	No

Question 1: Do you feel dry oral mucosa sensation?; Question 2: Do you feel dry lips sensation?; Question 3: Do you have difficult to swallow dry food?; Question 4: Do you drink liquids to aid swallowing dry food?; Question 5: Do you feel change in saliva viscosity?; Question 6: Do you feel a decreased amount of saliva in your mouth?; Question 7: Do you feel enough or increased amount of saliva in your mouth?; Score: number of positive answers; NE: Not evaluated