

The LARS Score - Scoring Instructions

Add the scores from each 5 questions to one final score.

Do you ever have occasions when you cannot control your flatus (wind)?

- | | |
|---|---|
| <input type="checkbox"/> No, never | 0 |
| <input type="checkbox"/> Yes, less than once per week | 4 |
| <input type="checkbox"/> Yes, at least once per week | 7 |

Do you ever have any accidental leakage of liquid stool?

- | | |
|---|---|
| <input type="checkbox"/> No, never | 0 |
| <input type="checkbox"/> Yes, less than once per week | 3 |
| <input type="checkbox"/> Yes, at least once per week | 3 |

How often do you open your bowels?

- | | |
|---|---|
| <input type="checkbox"/> More than 7 times per day (24 hours) | 4 |
| <input type="checkbox"/> 4-7 times per day (24 hours) | 2 |
| <input type="checkbox"/> 1-3 times per day (24 hours) | 0 |
| <input type="checkbox"/> Less than once per day (24 hours) | 5 |

Do you ever have to open your bowels again within one hour of the last bowel opening?

- | | |
|---|----|
| <input type="checkbox"/> No, never | 0 |
| <input type="checkbox"/> Yes, less than once per week | 9 |
| <input type="checkbox"/> Yes, at least once per week | 11 |

Do you ever have such a strong urge to open your bowels that you have to rush to the toilet?

- | | |
|---|----|
| <input type="checkbox"/> No, never | 0 |
| <input type="checkbox"/> Yes, less than once per week | 11 |
| <input type="checkbox"/> Yes, at least once per week | 16 |

Total Score:

Interpretation:

- 0-20: No LARS**
21-29: Minor LARS
30-42: Major LARS