



1...white wine    2...beer    3...red wine    4...wine    5...imported wine  
 6...other (Please indicate on the line: \_\_\_\_\_)

**Personal and family history of diseases**

*Put the corresponding number in the cell according to your situation*

Diseases	Have you ever been diagnosed with the disease? 0...no 1...yes 9...forget	Diagnosis year	Have your immediate family ever been diagnosed with the disease? 0...no 1...yes 9...unclear	Relationship with you: 1...father 2...mother 3...sister or brother 4...child
Hypertension				
Diabetes				
Hyperlipidemia				
Fatty liver				
Liver cirrhosis				
Viral hepatitis				
Coronary disease				
Cholecystitis				
Stroke				
Cancer				
Mental illness				