

## Scoring for Dizziness Handicap Inventory

Eval	Total Functional	Total Emotional	Total Physical	TOTOL SCORE
Reassess #1				
Reassess #2				
Reassess #3				
Reassess #4				

The patient is asked to answer each question as it pertains to dizziness or unsteadiness problems, specifically considering their condition during the last month. Questions are designed to incorporate functional (F), physical (P), and emotional (E) impacts on disability.

To each item, the following scores can be assigned:

No = 0 Sometimes = 2 Yes = 4

### Scores:

Scores greater than 10 points should be referred to balance specialists for further evaluation.

16-34 points (mild handicap)

36-54 points (moderate handicap)

54+ points (severe handicap)

### Notes:

1. Subjective measure of the patient's perception of handicap due to dizziness.
2. Top score is 100 (maximum perceived disability).
3. Bottom score is 0 (no perceived disability).
4. The following 5 items can be useful in predicting BPPV.
  - Does looking up increase your problem?
  - Because of your problem, do you have difficulty getting into or out of bed?
  - Do quick movements of your head increase your problem?
  - Does bending over increase your problem?
5. Can use subscale scores to track change as well.

### References:

- Asmundson, G., Stein, M., & Ireland, D. (1999). A factor analytic study of the dizziness handicap inventory: Does it assess phobic avoidance in vestibular referrals? *J Vestib Res.* 9(1): 63-68.
- Jacobson, G., Newman, C., Hunter, L., & Balzer, G. (1991). Balance function test correlates of the Dizziness Handicap Inventory. *J Am Acad Audiol.* 2(4): 253-260.
- Jacobson, G. & Newman, C. (1990). The development of the Dizziness Handicap Inventory. *Arch Otolaryngol Head Neck Surg.* 116(4): 424-427.