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ORIGINAL ARTICLE

Health-related quality of life and disability in patients with acute unilateral peripheral vestibular disorders[☆]

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KEYWORDS

Unilateral peripheral vestibular disorders;
DHI;
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Abstract

Introduction: Health-related quality of life (HRQoL) is used to denote that portion of the quality of life that is influenced by the person's health.

Objectives: To compare the HRQoL of individuals with vestibular disorders of peripheral origin by analyzing functional, emotional and physical disabilities before and after vestibular treatment.

Methods: A prospective, non randomized case-controlled study was conducted in the ENT Department, between January 2015 and December 2015. All patients were submitted to customize a 36 item of health survey on quality of life, short form 36 health survey questionnaire (SF-36) and the Dizziness Handicap Inventory (DHI) for assessing the disability. Individuals were diagnosed with acute unilateral vestibular peripheral disorders classified in 5 groups: vestibular neuritis, Ménière Disease (MD), Benign Paroxysmal Positional Vertigo (BPPV), cochlear-vestibular dysfunction (other than MD), or other type of acute peripheral vertigo (as vestibular migraine). **Results:** There was a statistical significant difference for each parameter of DHI score (the emotional, functional and physical) between the baseline and one month both in men and women, but with any statistical significant difference between 7 days and 14 days. It was found a statistical significant difference for all eight parameters of SF-36 score between the baseline and one month later both in men and women; the exception was the men mental health perception. The correlation between DHI and SF-36 scores according to diagnostics type pointed out that the Spearman's correlation coefficient was moderate correlated with the total scores of these instruments.

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Conclusion: The DHI and the SF-36 are useful, proved practical and valid instruments for assessing the impact of dizziness on the quality of life of patients with unilateral peripheral vestibular disorders.

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PALAVRAS-CHAVE

Distúrbios
vestibulares
periféricos
unilaterais;
DHI;
SF-36;
QVRS

Qualidade de vida relacionada à saúde e incapacidade em pacientes com distúrbios vestibulares periféricos unilaterais agudos

Resumo

Introdução: Qualidade de Vida relacionados à saúde (QVRS) é utilizada para designar a parte da qualidade de vida que é influenciada pela saúde do indivíduo.

Objetivos: Comparar a QVRS de indivíduos com distúrbios vestibulares de origem periférica, analisando incapacidades funcionais, emocionais e físicas antes e após o tratamento vestibular.

Método: Um estudo de caso-controle prospectivo, não randomizado foi conduzido no Departamento de Otorrinolaringologia, entre janeiro de 2015 e dezembro de 2015. Todos os pacientes foram submetidos a uma pesquisa de saúde personalizada de 36 itens sobre qualidade de vida, ao formulário abreviado de avaliação de saúde 36 (SF-36) e ao Dizziness Handicap Inventory (DHI) para avaliar a incapacidade. Os indivíduos foram diagnosticados com distúrbios vestibulares periféricos unilaterais agudos, classificados em 5 grupos: neurite vestibular, Doença de Ménière (DM), vertigem posicional paroxística benigna (VPPB), disfunção cócleo-vestibular (exceto DM), ou outro tipo de vertigem periférica aguda (como enxaqueca vestibular).

Resultados: Houve uma diferença estatisticamente significante para cada parâmetro de escore no DHI (emocional, funcional e físico) entre a avaliação basal e depois de um mês, tanto em homens quanto em mulheres, mas sem diferença estatística significativa entre 7 dias e 14 dias. Foi encontrada uma diferença estatisticamente significante para todos os oito parâmetros do escore no SF-36 entre a avaliação basal e um mês mais tarde, tanto em homens quanto em mulheres; a exceção foi a percepção de saúde mental nos homens. A correlação entre DHI e o SF-36 de acordo com o tipo de diagnóstico mostrou que o coeficiente de correlação de Spearman foi moderado quando correlacionado com o escore total desses instrumentos.

Conclusão: O DHI e o SF-36 demonstraram ser instrumentos úteis, práticos e válidos para avaliar o impacto da tontura na qualidade de vida de pacientes com distúrbios vestibulares periféricos unilaterais.

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Introduction

Quality of life is defined as an individual perception of her/his position in life in the context of the culture and value systems in which she/he lives, and it encompasses a broad spectrum of domains including health status, economic resources, work status, relationships, and leisure activities.¹ Health-Related Quality of Life (HRQoL) is used to denote that portion of the quality of life that is influenced by the person's health.

Vertigo or dizziness is one of the most common conditions that brings patients to emergency and its incidence increases with age.² Despite a lifetime prevalence of dizziness and vertigo estimated at 20–30% and 1-year prevalence estimate for vertigo of 4.9%, the healthcare burden of vertigo is still relatively under-reported due to the unpredictability of attacks and the nature of the disease.³ An individual's progress or lack of progress in vestibular

rehabilitation is usually measured by observing changes in motion intolerance, balance, functional abilities and more recently, health-related quality of life.⁴ Currently available conventional diagnostic tests (i.e. bed-side vestibular examination, videonystagmography, caloric and rotational tests, and posturography) are inadequate for evaluating the debilitating effects associated with vestibular disorders.⁵ Consequently, various questionnaires (such as General Depression Scale, Strait-Trait Anxiety Index, Dynamic Gait Index, the Functional Gait Assessment, the Balance Error Scoring System)⁶ have been developed in an attempt to quantify the self-perceived health status in vestibular patients with dizziness and imbalance.

The Dizziness Handicap Inventory¹⁶ (DHI) and the Medical Outcomes Study (MOS) 36-Item Short-Form Health Survey (SF-36) are two commonly used health-related quality-of life survey instruments. The SF-36 is a generic questionnaire with a global approach to measure health status as it relates

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