

Pre-visit questionnaire can help ID common vestibular diagnoses

March 2 2016



(HealthDay)—Use of a vestibular intake questionnaire can predict

common vestibular diagnoses, prior to clinical assessment, according to research published online Feb. 25 in *JAMA Otolaryngology-Head & Neck Surgery*.

David R. Friedland, M.D., Ph.D., from the Medical College of Wisconsin in Milwaukee, and colleagues conducted a retrospective review of 414 consecutive new vestibular patient intake questionnaires and associated medical records to develop a statistical model for predicting vestibular diagnoses, prior to clinical evaluation.

The researchers found that 381 of the intake questionnaires had clinician information necessary to define a final diagnosis. Overall, 48 percent of the diagnoses were ear-related (103 of 183 benign paroxysmal positional vertigo [BPPV] and 49 Ménière's disease), 37 percent were neurological (109 of 141 vestibular migraine), 9 percent were medical, 2 percent were of psychological origin, 12 percent were of unknown etiology, and 9 percent had other causes. Four variables could predict diagnosis of BPPV with sensitivity and specificity of 79 and 65 percent, respectively. Five variables could predict Ménière's disease with sensitivity and specificity of 81 and 85 percent, respectively. Vestibular migraine could be predicted from four variables, with sensitivity and specificity of 76 and 59 percent, respectively.

"A pre-encounter history questionnaire can provide useful diagnostic information for common vestibular disorders," the authors write. "This can help direct appointment scheduling to improve clinical efficiency, time to intervention, and use of resources."

More information: [Abstract](#)
[Full Text \(subscription or payment may be required\)](#)

Copyright © 2016 [HealthDay](#). All rights reserved.

Citation: Pre-visit questionnaire can help ID common vestibular diagnoses (2016, March 2)
retrieved 23 April 2024 from

<https://medicalxpress.com/news/2016-03-pre-visit-questionnaire-id-common-vestibular.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.