

Introduction

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The papers in this special issue of the Journal of Vestibular Research resulted from a preconference symposium on June 10, 2012, prior to the June 2012 meeting of the Bárány Society, Uppsala, Sweden. The symposium, Measures for Level of Functioning and Quality of Life in People with Vestibular Disorders, was sponsored by the Bárány Society's Ad Hoc Committee on Vestibular Rehabilitation Therapy. The speakers included six physical therapists, an occupational therapist, and an epidemiologist. The problem of defining and measuring behavioral or functional limitations and resulting disability caused by physiologic impairments has a long history and may be confused with the problem of measuring physiologic impairment [2]. The symposium reviewed the most widely-used assessments of functional limitations and disability as well as new research regarding the World Health Organization's International Classification of Functioning, Disability, and Health (ICF). Therefore, the participants obtained a better understanding of the available assessment tools. We hope that the papers in this issue enlighten the international community of physicians, therapists, and investigators who are concerned with the functional problems of patients who have vestibular and balance disorders.

The first three papers discuss assessment tools that are specific to patients with vestibular disorders. The first paper, by a unique team of a physical therapist/audiologist and a physician/ audiologist, Ms. Mutlu and Dr. Serbetcioglu, describes the Dizziness Handicap Inventory, a well-normed and widely used self-rating scale. Its widespread use around the world and its ease of administration allow many clinicians and investigators to obtain and compare data. They describe its strengths and its limitations. The University of California Dizziness Questionnaire is another widely used,

easily administered, self-rating scale. It is described in the second paper, by Drs. Zur and Carmell, who are physical therapists. They provide an objective review of the advantages and disadvantages of the scale.

The developer of the Vestibular Disorders Activities of Daily Living Scale (VADL), Dr. Cohen, an occupational therapist, describes the VADL in the third paper. Based on research since publication of the scale, the paper describes its strengths and weaknesses, and mentions an important skill that is assessed in the VADL but that, to date, is not addressed in the ICF, namely transferring into and out of a bathtub or shower stall.

The ICF is not, strictly speaking, an assessment tool. It is a classification system of health and health-related domains as a framework for measuring disability within individuals and within populations. It has been adopted by the World Health Organization [1]. This comprehensive taxonomy addresses a wide range of functional limitations and levels of disabilities. Each contribution in the second group of three papers discusses the ICF. In the fourth paper, Ms. Graziano, a physical therapist, describes the use of the ICF in clinical practice, and explains its use with the vestibular disorders population.

The ICF is so comprehensive that core subsets have been developed for ease of use. The paper by Dr. Grill, an epidemiologist, and her coauthors, Dr. Furman, a neurologist, Dr. Muller, an epidemiologist, and Drs. Alghwiri and Whitney, physical therapists, describes the core set for describing disability in vestibular disorders that Dr. Grill and her colleagues developed. The paper also describes the international plan for testing the new Vestibular Activities and Participation instrument (VAP), which was developed prior to the development of the Vestibular Core Set. The final paper, by Drs. Alghwiri, Whitney, and Alghadir, all physical

therapists, provides more detail about the development of the VAP.

In this issue we have provided information about a wide range of assessment tools with which to evaluate patients with vestibular disorders. Therefore, the reader should be able to make informed decisions when selecting an assessment tool, based on the needs of the individual patient, the clinician's practice setting, or other considerations for data collection. These papers may also point the way toward future research to improve our understanding of functioning and qual-

ity of life in persons with vestibular disorders in this population.

References

- [1] International Classification of Function, Disability, and Health, World Health Organization, Geneva, 2010. www.who.int/classifications/icf/en/.
- [2] H. Cohen, Defining disablement in otolaryngology, *Ear Nose Throat J* **74** (1995), 233–237.