

## TINNITUS HANDICAP INVENTORY

This quiz is useful to help identify the degree of problems that your tinnitus may be causing you. Print out this questionnaire and mark your answers next to each question.

Name:	Date:

## **TINNITUS HANDICAP INVENTORY (THI) POINTS** 4 0 2 1. Because of your Tinnitus is it difficult for you to concentrate? Yes No Sometimes 2. Yes No Sometimes Does the loudness of your Tinnitus make it difficult for you to hear people? 3. Does your Tinnitus make you angry? Yes No Sometimes 4. Does your Tinnitus make you confused? Yes No Sometimes 5. Sometimes Because of your Tinnitus are you desperate? Yes No 6. Do you complain a great deal about your Tinnitus? Yes No Sometimes 7. Because of your tinnitus do you have trouble falling asleep at night? Yes No Sometimes 8. Do you feel as though you cannot escape from your Tinnitus? Yes No Sometimes 9. Does your Tinnitus interfere with your ability to enjoy social activities (such as Yes Sometimes No going out to dinner, to the cinema)? 10. Because of your Tinnitus do you feel frustrated? Yes No Sometimes 11. Yes No Sometimes Because of your Tinnitus do you feel that you have a terrible disease? 12. Sometimes Does your Tinnitus make it difficult to enjoy life? Yes No 13. Does your Tinnitus interfere with your job or household responsibilities? Yes No Sometimes 14. Because of your Tinnitus do you find that you are often irritable? Yes No Sometimes 15. Because of your Tinnitus is it difficult for you to read? Yes No Sometimes 16. Does your Tinnitus make you upset? Yes No Sometimes

17.	Do you feel that your Tinnitus has placed stress on your relationships with members of your family and friends?	Yes	No	Sometimes		
18.	Do you find it difficult to focus your attention away from your Tinnitus and on to other things?	Yes	No	Sometimes		
19.	Do you feel that you have no control over your Tinnitus?	Yes	No	Sometimes		
20.	Because of your Tinnitus do you often feel tired?	Yes	No	Sometimes		
21.	Because of your Tinnitus do you feel depressed?	Yes	No	Sometimes		
22.	Does your Tinnitus make you feel anxious?	Yes	No	Sometimes		
23.	Do you feel you can no longer cope with your Tinnitus?	Yes	No	Sometimes		
24.	Does your Tinnitus get worse when you are under stress?	Yes	No	Sometimes		
25.	Does your Tinnitus make you feel insecure?	Yes	No	Sometimes		
	TOTAL SCORE PER COLUMN					
	TOTAL SCORE:					

Reference: McCombe, A., Bagueley, D., Coles, R., McKenna, L., McKinney, C. & Windle-Taylor, P. (2001), Guidelines for the grading of tinnitus severity: the results of a working group commissioned by the British Association of Otolaryngologists, Head and Neck Surgeons, 1999, Clin Otolaryngol 26, 388-393.

**TOTAL YOUR POINTS** and then compare your total with the grade levels below.

0 – 16	Slight (Only heard in quiet environments)	GRADE 1
18 – 36	Mild (Easily masked by environmental sounds and easily forgotten with activities	GRADE 2
38 – 56	Moderate (Noticed in presence of background noise, although daily activities can still be performed)	GRADE 3
58 – 76	Severe (Almost always heard, leads to disturbed sleep patterns and can interfere with daily activities)	GRADE 4
78 – 100	Catastrophic (Always heard, disturbed sleep patterns, difficulty with any activities)	GRADE 5