**Background**

- “A voice disorder occurs when voice quality, pitch, and loudness differ or are inappropriate for an individual’s age, gender, cultural background, or geographic location” (American Speech-Language Hearing Association [ASHA], “Voice Disorders”)
- It is estimated that 3-9% of Americans have a voice disorder (dysphonia), (American Speech-Language Hearing Association [ASHA], “Voice Disorders”)
- How speech pathologists assess dysphonia: Disorders)"
- Voice Handicap Index (VHI) to measure patient’s perceived impact of their dysphonia on as it relates to functional, physical, and emotional aspects of their lives (Behrman, Sulica, He, 2004)
- CAPE-V and VHI scores were recorded
- Statistically analyzed using the Pearson Product Moment Correlation to determine the correlation between the CAPE-V and VHI scores

**Purpose of the Study**

- The goal of this study was to determine if there is a correlation between patient perception of the severity of their voice disorder and clinician rating of severity.
- Participants
  - 89 patients from the UTHSC Hearing and Speech Center diagnosed with dysphonia
  - 15-88 years old, 16 males and 73 females

Gender of Participants

- 82% Female
- 18% Male

**Procedure**

- Retrospective analysis of patient records from 2015 to 2019
- Assessments chosen for this study:
  - Voice Handicap Index (VHI) to measure patient’s perceived impact of their dysphonia on as it relates to functional, physical, and emotional aspects of their lives (Behrman, Sulica, He, 2004)
- CAPE-V and VHI scores were recorded
- Statistically analyzed using the Pearson Product Moment Correlation to determine the correlation between the CAPE-V and VHI scores

**Results**

- A correlation of r=0.558 (<0.001) was found between CAPE-V and VHI scores for all patients
- Results indicate that patients’ perception and clinicians’ perception have a positive correlation
- Patients’ perception of the impact of their voice disorder on the VHI is generally consistent with clinician rating of severity on the CAPE-V
- No statistically significant difference in gender or occupation / lack thereof
- However, the sample has an unequal ratio between genders

**Discussion**

- Clinicians should take patients’ feelings and impacts into consideration when diagnosing and treating voice disorders.
- Occupation did not seem to be a significant factor.
- Future research should consider identifying differences between gender and occupation

**Literary Discussion**

- Results are consistent with findings by Sardesai et al. where patient perception of impact and clinician ratings are consistent when the CAPE-V, VHI, and GRBAS are used.
- Sardesai et al. also did not find a relationship between age and gender for patients’ perceptions

**Results Continued**

Reduction in 2019

- 18 patients from the UTHSC Hearing and Speech Center diagnosed with dysphonia
- 15-88 years old, 16 males and 73 females

Gender of Participants

- 82% Female
- 18% Male

**Procedure**

- Retrospective analysis of patient records from 2015 to 2019
- Assessments chosen for this study:
  - Voice Handicap Index (VHI) to measure patient’s perceived impact of their dysphonia on as it relates to functional, physical, and emotional aspects of their lives (Behrman, Sulica, He, 2004)
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**References**