

# VASCULITIS DAMAGE INDEX (VDI)

This is for recording organ damage that has occurred in patients *since the onset of vasculitis*  
 Patients often have co-morbidity before they develop vasculitis, **which must not be scored**  
 Record features of active disease using the Birmingham Vasculitis Activity Score (BVAS)

A new patient should **usually have a VDI score of zero**, unless:

- (a) they have had vasculitis for more than three months of onset of disease. **and**
- (b) the damage has developed or become worse since the onset of vasculitis

	No	Yes		No	Yes
<b>1. Musculoskeletal</b>			<b>Name</b>		
None	<input type="checkbox"/>		<b>Trial Number</b>		
Significant muscle atrophy or weakness		<input type="radio"/>	<b>Date</b>		
Deforming/erosive arthritis		<input type="radio"/>	<b>Centre</b>		
Osteoporosis/vertebral collapse		<input type="radio"/>	<b>7. Peripheral vascular disease</b>		
Avascular necrosis		<input type="radio"/>	None	<input type="checkbox"/>	
Osteomyelitis		<input type="radio"/>	Absent pulses in one limb		<input type="radio"/>
<b>2. Skin/Mucous membranes</b>			2 <sup>nd</sup> episode of absent pulses in one limb		<input type="radio"/>
None	<input type="checkbox"/>		Major vessel stenosis		<input type="radio"/>
Alopecia		<input type="radio"/>	Claudication >3 mths		<input type="radio"/>
Cutaneous ulcers		<input type="radio"/>	Minor tissue loss		<input type="radio"/>
Mouth ulcers		<input type="radio"/>	Major tissue loss		<input type="radio"/>
<b>3. Ocular</b>			Subsequent major tissue loss		<input type="radio"/>
None	<input type="checkbox"/>		Complicated venous thrombosis		<input type="radio"/>
Cataract		<input type="radio"/>	<b>8. Gastrointestinal</b>		
Retinal change		<input type="radio"/>	None	<input type="checkbox"/>	
Optic atrophy		<input type="radio"/>	Gut infarction/resection		<input type="radio"/>
Visual impairment/diplopia		<input type="radio"/>	Mesenteric insufficiency/pancreatitis		<input type="radio"/>
Blindness in one eye		<input type="radio"/>	Chronic peritonitis		<input type="radio"/>
Blindness in second eye		<input type="radio"/>	Oesophageal stricture/surgery		<input type="radio"/>
Orbital wall destruction		<input type="radio"/>	<b>9. Renal</b>		
<b>4. ENT</b>			None	<input type="checkbox"/>	
None	<input type="checkbox"/>		Estimated/measured GFR ≤ 50%		<input type="radio"/>
Hearing loss		<input type="radio"/>	Proteinuria ≥ 0.5g/24hr		<input type="radio"/>
Nasal blockage/chronic discharge/crusting		<input type="radio"/>	End stage renal disease		<input type="radio"/>
Nasal bridge collapse/septal perforation		<input type="radio"/>	<b>10. Neuropsychiatric</b>		
Chronic sinusitis/radiological damage		<input type="radio"/>	None	<input type="checkbox"/>	
Subglottic stenosis (no surgery)		<input type="radio"/>	Cognitive impairment		<input type="radio"/>
Subglottic stenosis (with surgery)		<input type="radio"/>	Major psychosis		<input type="radio"/>
<b>5. Pulmonary</b>			Seizures		<input type="radio"/>
None	<input type="checkbox"/>		Cerebrovascular accident		<input type="radio"/>
Pulmonary hypertension		<input type="radio"/>	2 <sup>nd</sup> cerebrovascular accident		<input type="radio"/>
Pulmonary fibrosis		<input type="radio"/>	Cranial nerve lesion		<input type="radio"/>
Pulmonary infarction		<input type="radio"/>	Peripheral neuropathy		<input type="radio"/>
Pleural fibrosis		<input type="radio"/>	Transverse myelitis		<input type="radio"/>
Chronic asthma		<input type="radio"/>	<b>11. Other</b>		
Chronic breathlessness		<input type="radio"/>	None	<input type="checkbox"/>	
Impaired lung function		<input type="radio"/>	Gonadal failure		<input type="radio"/>

## 6. Cardiovascular

None	<input type="checkbox"/>	Marrow failure	<input type="radio"/>
Angina angioplasty	<input type="radio"/>	Diabetes	<input type="radio"/>
Myocardial infarction	<input type="radio"/>	Chemical cystitis	<input type="radio"/>
Subsequent myocardial infarction	<input type="radio"/>	Malignancy	<input type="radio"/>
Cardiomyopathy	<input type="radio"/>	Other	<input type="radio"/>
Valvular disease	<input type="radio"/>	<div style="border: 1px solid black; padding: 5px;"><p>Total VDI Score. Record the number of positive items (1 point for each). The VDI score can either increase or remain the same over time. Remember to carry forward any previous items of damage.</p><input style="width: 40px; height: 20px;" type="text"/></div>	
Pericarditis $\geq$ 3 mths or pericardectomy	<input type="radio"/>		
Diastolic BP $\geq$ 95 or requiring antihypertensives	<input type="radio"/>		

VDI Modified from Exley AR, Bacon PA, Lugmani et al (1997) Development and initial validation of the VDI ... *Arthritis Rheum* 40: 371-380

## Utfylling/vurdering VDI

VDI er et skår for alle organskader som har stått i minimum 3 md., og som har oppstått etter at vaskulittdiagnosen er stilt. Man skårer derfor også skader som er relatert til behandling og/eller andre interkurrente skader selv om man ikke kan se at de er vaskulittrelaterte.

- Skår forandringer som har vart i  $\geq$ 3 md. selv om de senere går tilbake, f.eks. hudulcera
- Andre eksempler
  - Skoper og tetthet i nese – kan skyldes skadde slimhinner, uten aktiv vaskulitt
  - Nevropati – gir ofte langvarige symptomer, som skyldes den initiale skaden