The M.D. Anderson Dysphagia Inventory

This questionnaire asks for your views about your swallowing ability. This information will help us understand how you feel about swallowing.

The following statements have been made by people who have problems with their swallowing. Some of the statements may apply to you.

Please read each statement and circle the response which best reflects your experience in the past week.

1								
My swallowing ability limits my day-to-day activities.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
E2. I am embarrassed by my eating habits.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
F1. People have difficulty cooking for me.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
P2. Swallowing is more difficult at the end of the day.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
E7. I do not feel self-conscious when I eat.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
E4. I am upset by my swallowing problem.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
P6. Swallowing takes great effort.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
E5. I do not go out because of my swallowing problem.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
F5. My swallowing difficulty has caused me to lose income.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			
P7. It takes me longer to eat because of my swallowing problem.								
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree			

P3. People ask me, "Why can't you eat that?"									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
E3. Other people are irritated by my eating problem.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
P8. I cough when I try to drink liquids.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
F3. My swallowing problems limit my social and personal life.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
F2. I feel free to go out to eat with my friends, neighbors, and relatives.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
P5. I limit my food intake because of my swallowing difficulty.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
P1. I cannot maintain my weight because of my swallowing problems.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
E6. I have low self-esteem because of my swallowing problems.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
P4. I feel that I am swallowing a huge amount of food.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				
F4. I feel excluded because of my eating habits.									
	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree				

Thank you for completing this questionnaire!

Source: Chen AY, Frankowski R, Bishop-Leone J, et al. The development and validation of a dysphagia-specific quality-of-life questionnaire for patients with head and neck cancer: the M. D. Anderson dysphagia inventory. Arch Otolaryngol Head Neck Surg. 2001;127:870–876. [PubMed]

Scoring

Two scores are obtained: a Global Score and a Composite Score.

All questions except for E7 and F2: E7 and F2:

Strongly Agree = 1 point Strongly Agree = 5 points

Agree = 2 points

No Opinion = 3 points

Disagree = 4 points

Disagree = 2 points

Disagree = 2 points

Strongly Disagree = 5 point Strongly Disagree = 1 point

Global Score: first question (not numbered)

Global Score ranges from 1 (extremely low functioning) to 5 (high functioning)

Composite Score: 19 numbered questions

Calculate total points: add scores for the 19 questions Calculate the mean point score: Divide total points by 19

Calculate final score: Multiply the mean by 20

Composite Score ranges from 20 (extremely low functioning) to 100 (high functioning)

Note about interpretation

"A recent methodological paper suggests that a change of 20 points in an individual's within-subject MDADI scores may be meaningful. We agree with this notion as a 20-point change in an individual's MDADI scores over time equates to consistently moving responses up or down one level on the 5-point Likert ratings of the questionnaire (e.g., from "strongly agree" to "agree", or from "disagree" to "strongly disagree")." (Hutcheson, et al)

18. Lu W, Wayne PM, Davis RB, et al. Acupuncture for dysphagia after chemoradiation in head and neck cancer: rationale and design of a randomized, sham-controlled trial. Contemp Clin Trials. 2012;33:700–711. [PMC free article] [PubMed]

Hutcheson K, Portwood M, Lisec A, et al. What is a Clinically Relevant Difference in MDADI Scores between Groups of Head and Neck Cancer Patients? Laryngoscope. 2015 Nov 6. [10.1002/lary.25778]