CIWA-ar

Clinical Institute Withdrawal Assessment Scale for Alcohol, Revised

Purpose : Assessment of alcohol withdrawal symptoms

Admin time : 5 min

User Friendly : High

Administered by : GP or nurse

Content : 10-item questionnaire that measures the current degree of severity of an individual's alcohol withdrawal symptoms.
Items 1-9 are scored on a scale from 0 to 7, 0 being no symptoms and 7 being severe symptoms.
Item 10 is scored on a scale from 0 to 4:
0 = oriented and can do serial additions
1 = cannot do serial additions or is uncertain about date
2 = disoriented for date by no more than 2 calendar days
3 = disoriented for date by more than 2 calendar days
4 = disoriented for place/or person

Author : Sullivan JT, 1989 **access**

https://www.cgakit.com/ciwa-ar

CIWA-Ar

Clinical Institute Withdrawal Assessment of Alcohol Scale - Revised

Date:

Name:

NAUSEA AND VOMITING
Ask "Do you feel sick to your stomach? Have you vomited?" Observation.

0 No nausea and no vomiting
1 Mild nausea with no vomiting
2
3
4 Intermittent nausea with dry heaves
5
6
7 Constant nausea, frequent dry heaves and vomiting

TREMOR
Arms extended and fingers spread apart. Observation.

0 No tremor
1 Not visible, but can be felt fingertip to fingertip
2
3
4 Moderate, with patient's arms extended
5
6
7 Severe, even with arms not extended

PAROXYSMAL SWEATS
Observation.

0 No sweat visible
1 Barely perceptible sweating, palms moist
2
3
4 Beads of sweat obvious on forehead
5
6
7 Drenching sweats

ANXIETY
Ask "Do you feel nervous?" Observation.

0 No anxiety, at ease
1 Mild anxious
2
3
4 Moderately anxious, or guarded, so anxiety is inferred
5
6
7 Equivalent to acute panic states as seen in severe delirium or acute schizophrenic reactions

AGITATION
Observation.

0 Normal activity
1 Somewhat more than normal activity
2
3
4 Moderately fidgety and restless
5
6
7 Paces back and forth during most of the interview, or constantly thrashes about

TACTILE DISTURBANCES
Ask "Have you any itching, pins and needles sensations, any burning, any numbness, or do you feel bugs crawling on or under your skin?" Observation.

0 None
1 Very mild itching, pins and needles, burning or numbness
2 Mild itching, pins and needles, burning or numbness
3 Moderate itching, pins and needles, burning or numbness
4 Moderately severe hallucinations
5 Severe hallucinations
6 Extremely severe hallucinations
7 Continuous hallucinations

AUDITORY DISTURBANCES
Ask "Are you more aware of sounds around you? Are they harsh? Do they frighten you? Are you hearing anything that is disturbing to you? Are you hearing things you know are not there?" Observation.

0 Not present
1 Very mild harshness or ability to frighten
2 Mild harshness or ability to frighten
3 Moderate harshness or ability to frighten
4 Moderately severe hallucinations
5 Severe hallucinations
6 Extremely severe hallucinations
7 Continuous hallucinations

VISUAL DISTURBANCES
Ask "Does the light appear to be too bright? Is its colour different? Does it hurt your eyes? Are you seeing anything that is disturbing to you? Are you seeing things you know are not there?" Observation.

0 Not present
1 Very mild sensitivity
2 Mild sensitivity
3 Moderate sensitivity
4 Moderately severe hallucinations
5 Severe hallucinations
6 Extremely severe hallucinations
7 Continuous hallucinations

HEADACHE, FULLNESS IN HEAD
Ask "Does your head feel different? Does it feel like there is a band around your head?" Do not rate for dizziness or lightheadedness. Otherwise, rate severity.

0 Not present
1 Very mild
2 Mild
3 Moderate
4 Moderately severe
5 Severe
6 Very severe
7 Extremely severe

ORIENTATION AND CLOUDING OF SENSORIUM
Ask "What day is this? Where are you? Who am I?"

0 Oriented and can do serial additions
1 Cannot do serial additions or is uncertain about date
2 Disoriented for date by no more than 2 calendar days
3 Disoriented for date by more than 2 calendar days
4 Disoriented for place/or person

Withdrawal scales were developed to assist the monitoring and management of withdrawal symptoms. It is important to note that withdrawal scales are not diagnostic tools.

Total CIWA-ar Score

Source: Sulivan JT, Sykora K, Schneiderman J, Naranjo CA, Sellers EM. Assessment of alcohol withdrawal: The Revised Clinical Institute Withdrawal Assessment for Alcohol scale (CIWA-Ar). British Journal of Addiction to Alcohol and Other Drugs. 1989;84(11):1353-7. doi: 10.1111/j.1360-0443.1989.tb00737.x

Cumulative score	Approach
0 – 8	No medication needed
9 – 14	Medication is optional
15 – 20	Definitely needs medication
>20	Increased risk of complications