



Use and interpretation of the COWS – Clinical Opiate Withdrawal Scale

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UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES

Introduction



- Background
- History
- Interobserver agreement
- Confounding factors

Opioid Withdrawal



Withdrawal intensity

- 1) Severity of physical dependence
- 2) Relative occupancy of mu opiate receptor at a point in time

Wesson DR, Ling W. The Clinical Opiate Withdrawal Scale (COWS). J Psychoactive Drugs. 2003 Apr-Jun;35(2):253-9. doi: 10.1080/02791072.2003.10400007. PMID: 12924748.

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Withdrawal Scales



Initially developed and used in research

To:

Compare efficacy of treatments for withdrawal

Assess degree of physical dependence before induction

Assess physiological patients' readiness for induction (e.g. buprenorphine)

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Himmelsbach Scale (1941)



First rating scale

TABLE 1
Himmelsbach's Point System for Measuring Opioid Abstinence Syndrome Intensity by the Day or Hour (Himmelsbach 1941)

Sign or Symptom	By Day (D)		By Hour (H)	
	Points	Limit	Points	Limit
Yawning	1	1	1	1
Lacrimation	1	1	1	1
Rhinorrhea	1	1	1	1
Perspiration	1	1	1	1
Mydriasis	3	3	3	3
Tremor	3	3	3	3
Gooseflesh	3	3	3	3
Anorexia (40% decrease in caloric intake)	3	3	—	—
Restlessness	5	5	5	5
Emesis (each spell)	5	—	5	5
Fever (for each 0.1° C. rise over mean addiction level)	1	—	1	10
Hyperpnea (for each resp./min rise over mean addiction level)	1	—	1	10
Rise in a.m. systolic B.P. (for each 2 mm. Hg over mean addiction level)	1	1.5	1	10
Weight loss (a.m.) (for each lb. from last day of addiction)	1	—	—	—

Total abstinence syndrome intensity score per day or per hour is the sum of the points scored in the (D) or (H) columns, respectively, with due attention to the limits.

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Evolution of measuring opiate withdrawal



1960s

- 1: Opiate Withdrawal Subjective Experience Scale (OPW)

1970s (*Advent of methadone maintenance treatment*)

- 1: Strong Opiate Withdrawal Scale – high levels of physical dependence
- 2: Weak Opiate Withdrawal Scale – measuring less intense withdrawal symptoms

1980s (*move to more sensitive and validated instruments*)

- 1: Opiate Withdrawal Scale
- 2: Subjective Opiate Withdrawal Scale
- 3: Objective Opiate Withdrawal Scale

1990s

- 1: Short Opiate Withdrawal Scale – shortened version of the Opiate Withdrawal Scale
- 2: Short Opiate Withdrawal Questionnaire – measure before and after withdrawal. Only one above not based on the Himmelsbach Scale, included mood

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1980s



Attempts to separate subjective and objective measures

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Subjective



TABLE 2					
The Subjective Opiate Withdrawal Scale (Handelsman et al. 1987)					
Item	Score				
	0	1	2	3	4
	Not at All	A Little	Moderately	Quite a Bit	Extremely
1. I feel anxious					
2. I feel like yawning					
3. I'm perspiring					
4. My eyes are tearing					
5. My nose is running					
6. I have goose flesh					
7. I am shaking					
8. I have hot flashes					
9. I have cold flashes					
10. My bones and muscles ache					
11. I feel restless					
12. I feel nauseous					
13. I feel like vomiting					
14. My muscles twitch					
15. I have cramps in my stomach					
16. I feel like shooting up now					
Patients are asked to score each item on how they feel at the time they are completing the rating sheet. The scale score is the total of all item scores.					

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Objective



TABLE 3 The Objective Opiate Withdrawal Scale (Handelsman et al. 1987)	
Item	Score One Point for Each Item if:
1. Yawning (Frequency = # of yawns per observation period)	One or more
2. Rhinorrhea (Frequency = # of sniffs per observation period)	Three or more
3. Piloerection (Gooseflesh—observe patient's arm)	Present
4. Perspiration	Present
5. Lacrimation	Present
6. Mydriasis	Present
7. Tremors (hands)	Present
8. Hot and cold flashes (Shivering or huddling for warmth)	Present
9. Restlessness	Present
10. Vomiting	Present
11. Muscle Twitches	Present
12. Abdominal cramps (Holding stomach)	Present
13. Anxiety (Range: mild to severe)	Present
<i>Mild:</i> observable manifestations—foot shaking, fidgeting, finger tapping	
<i>Moderate to severe:</i> agitation, unable to sit, trembling, panicky; complains of difficulty in breathing, choking sensations, palpitations.	

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The Clinical Opiate Withdrawal Scale (COWS)



First published in a training manual for Buprenorphine Treatment (1999)

Items included were validated in previous assessment instruments

Rating system taking into account signs (objective) and symptoms (subjective) which may occur along a continuum

Ability to be serially administered to track changes over time

Modelled after the Clinical Institute Withdrawal Assessment of Alcohol Scale revised (CIWA-Ar)

Most commonly used tool

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Day/Month/Year

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COWS

Resting Pulse Rate: _____ beats/minute <i>Measured after patient is sitting or lying for one minute.</i> 0 pulse rate 80 or below 1 pulse rate 81–100 2 pulse rate 101–120 4 pulse rate greater than 120	GI Upset: <i>Over last half-hour</i> 0 no GI symptoms 1 stomach cramps 2 nausea or loose stool 3 vomiting or diarrhoea 5 multiple episodes of diarrhoea or vomiting
Sweating: <i>Over past half-hour not accounted for by room temperature or patient activity.</i> 0 no report of chills or flushing 1 subjective report of chills or flushing 2 flushed or observable moistness on face 3 sweat streaming down face	Tremor: <i>Observation of outstretched hands</i> 0 no tremor 1 tremor can be felt but not observed 2 slight tremor observable 4 gross tremor or muscle twitching
Restlessness: <i>Observation during assessment</i> 0 able to sit still 1 reports difficulty sitting still, but is able to do so 3 frequent shifting or extraneous movements of legs/arms 5 unable to sit still for more than a few seconds	Yawning: <i>Observation during assessment</i> 0 no yawning 1 yawning once or twice during assessment 2 yawning three or more times during assessment 4 yawning several times per minute
Pupil size 0 pupils pinned or normal size for room light 1 pupils possibly larger than normal for room light 2 pupils moderately dilated 5 pupils so dilated that only the rim of the iris is visible	Anxiety or irritability 0 none 1 patient reports increasing irritability or anxiousness 2 patient obviously irritable or anxious 4 patient so irritable or anxious that participation in the assessment is difficult
Bone or joint aches: <i>If patient was having pain previously, only the additional component attributed to opiates withdrawal is scored</i> 0 not present 1 mild diffuse discomfort 2 patient reports severe diffuse aching of joints/muscles 4 patient is rubbing joints or muscles and is unable to sit still because of discomfort	Gooseflesh skin: 0 skin is smooth 3 piloerection of skin can be felt or hairs standing up on arms 5 prominent piloerection
Runny nose or tearing: <i>Not accounted for by cold symptoms or allergies</i> 0 not present 1 nasal stuffiness or unusually moist eyes 2 nose running or tearing 4 nose constantly running or tears streaming down cheeks	Total score: The total score is the sum of all 11 items. Initials of person completing assessment:

Score: 5–12 = mild; 13–24 = moderate; 25–36 = moderately severe; more than 36 = severe withdrawal.

COWS



Do we all score the same?

Tomaszewski CA, Quenzer F, Corbett B, Lafree A, Lasoff D, Romo J, Mukau L. Interobserver agreement between emergency clinicians and nurses for Clinical Opiate Withdrawal Scale. J Am Coll Emerg Physicians Open. 2021 Jun 18;2(3):e12462. doi: 10.1002/emp2.12462. PMID: 34179884; PMCID: PMC8212561.

Subjective vs Objective Measurements

Dilemma

Mix of clinical signs and reported symptoms

Resting Pulse Rate: _____ beats/minute <i>Measured after patient is sitting or lying down for 5 minutes</i> 0 pulse rate 80 or below 1 pulse rate 81–100 2 pulse rate 101–120 3 pulse rate greater than 120	GI Upset: <i>Over last half-hour</i> 0 no GI symptoms 1 stomach cramps 2 nausea or loose stool 3 vomiting or diarrhoea 4 multiple episodes of diarrhoea or vomiting
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Interobserver agreement



Study looking at correlation of scoring for opioid withdrawal using the COWS

ED clinicians and nurses independently scored 120 patients

Interobserver agreement



TABLE 3 Observed concordance along with weighted kappas for agreements by individual contributor to COWS

Individual measurements	Observed concordance	Weighted kappa	95% CI LL	95% CI UL	Strength of agreement
Heart rate	84.1%	0.78	0.68	0.88	Substantial
Sweating	65.8%	0.45	0.31	0.59	Moderate
Restlessness	64.2%	0.50	0.28	0.56	Moderate
Pupil size	70.0%	0.18	0	0.38	Fair
Bone/joint aches	60.0%	0.42	0.29	0.54	Moderate
Runny nose/tears	70.8%	0.33	0.15	0.51	Fair
Gastrointestinal upset	65.0%	0.48	0.35	0.61	Moderate
Tremor	65.0%	0.32	0.15	0.49	Fair
Yawning	81.7%	0.29	0.10	0.48	Fair
Anxiety/irritability	58.3%	0.46	0.35	0.58	Moderate
Gooseflesh	83.3%	0.44	0.21	0.66	Moderate

Abbreviations: CI, confidence interval; COWS, Clinical Opiate Withdrawal Scale; LL, lower limit; UL, upper limit.

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COWS Score



TABLE 2 Buprenorphine ED induction based on withdrawal physician categorization

Withdrawal severity	Number of patients	Number induced	Percentage induced (%)
None (0–4)	51	9	17.6
Mild (5–12)	53	34	64.2
Moderate (13–24)	22	22	100
Moderate severe (25–36)	3	3	100
Severe (> 37)	0	0	N/A
TOTAL	120	70	58.3

Abbreviation: ED, emergency department.

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Buprenorphine Dose



TABLE 1 Buprenorphine dosing

Induction in ED	Dose (mg)	Number (n = 120)	Percentage
No	0	52	43
Yes	2	7	5.8
	4	1	0.8
	6	1	0.8
	8	38	32
	16	19	16
	24	2	1.6

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Confounders



What else can impact scoring?

Day/Month/Year

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What else do we need to consider?



Medical factors?

Psychological factors?

Medications?

Footnote to go here

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Vignette



Day/Month/Year

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Vignette



44yo single Aboriginal female, on DSP, admitted to the inpatient psychiatric service in the context of worsening psychotic symptoms over 2 months, including auditory hallucinations from a device she believes is implanted in her body, on a background of daily methamphetamine and cannabis use with previous admissions for Schizophrenia and Opioid Use Disorder on maintenance therapy.

Referred to DOAM during psychiatric admission requesting early administration of her Buvidal depot. On 224mg 3/52

Opiate withdrawal symptoms: commented 'jittery, restless and crying' then stated 'sluggish, tired and off colour'; unable to state specifically due to opiates.

History of akathisia from anti-psychotics and noted to be restless on exam



Day/Month/Year

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COWS Score?



Hypothetically

Restlessness = 5

Anxiety or irritability = 4

Also a tremor = 4

COWS Score = 13 or Moderate Withdrawal

Implications?



Day/Month/Year

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Akathisia and EPSE scores



Day/Month/Year

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Barnes Akathisia Rating Scale



BARNES AKATHISIA RATING SCALE

Barnes TR (1989) A rating scale for drug-induced akathisia. *British Journal of Psychiatry* 154: 672-676

1. Objective

SCORE: ____

0. Normal, occasional fidgety movements of limbs.
1. Presence of characteristic restless movements: shuffling or tramping movements of the legs/feet or swinging of one leg while sitting, *and/or* rocking from foot to foot or 'walking on the spot' when standing, *but* movements present for less than half the time observed.
2. Observed phenomena, as described in (1) above, which are present for at least half the observation period.
3. Patient is constantly engaged in characteristic restless movements, *and/or* has the inability to remain seated or standing without walking or pacing, during the time observed.

2. Subjective: Awareness of restlessness

SCORE: ____

0. Absence of inner restlessness.
1. Non-specific sense of inner restlessness.
2. Patient is aware of an inability to keep the legs still, or a desire to move the legs, *and/or* complains of inner restlessness aggravated specifically by being required to stand still.
3. Awareness of an intense compulsion to move most of the time *and/or* reports a strong desire to walk or pace most of the time.

3. Subjective: Distress related to restlessness

SCORE: ____

0. No distress.
1. Mild.
2. Moderate.
3. Severe.

4. Global clinical assessment of akathisia

SCORE: ____

Footnote to go here



Day/Month/Year

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Abnormal Involuntary Movements Scale

MOVEMENT RATINGS: Rate highest severity observed. Rate movements that occur upon activation one less than those observed spontaneously. Circle movement as well as code number that applies.		RATER	RATER	RATER	RATER
		Date	Date	Date	Date
Facial and Oral Movements	1. Muscles of Facial Expression e.g. movements of forehead, eyebrows, periorbital area, cheeks, including frowning, blinking, smiling, grimacing	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	2. Lips and Perioral Area e.g. puckering, pouting, smacking	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	3. Jaw e.g. biting, clenching, chewing, mouth opening, lateral movement	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	4. Tongue Rate only increases in movement both in and out of mouth. NOT inability to sustain movement. Darting in and out of mouth.	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
Extremity Movements	5. Upper (arms, wrists, hands, fingers) Include <i>choreic</i> movements (i.e., rapid, objectively purposeless, irregular, spontaneous) <i>athetoid</i> movements (i.e., slow, irregular, complex, serpentine). DO NOT INCLUDE TREMOR (i.e., repetitive, regular, rhythmic)	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	6. Lower (legs, knees, ankles, toes) e.g. lateral knee movement, foot tapping, heel dropping, foot squirming, inversion and eversion of foot.	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
Trunk Movements	7. Neck, shoulders, hips e.g., rocking, twisting, squirming, pelvic gyrations	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
Global Judgments	8. Severity of abnormal movements overall	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	9. Incapacitation due to abnormal movements	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
	10. Patient's awareness of abnormal movements Rate only patient's report! No awareness 0 Aware, no distress 1 Aware, mild distress 2 Aware, moderate distress 3 Aware, severe distress 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4	0 1 2 3 4
Dental Status	11. Current problems with teeth and/or dentures?	No Yes	No Yes	No Yes	No Yes
	12. Are dentures usually worn?	No Yes	No Yes	No Yes	No Yes
	13. Edentia?	No Yes	No Yes	No Yes	No Yes
	14. Do movements disappear in sleep?	No Yes	No Yes	No Yes	No Yes

Footnote to go here

Day/Month/Year

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Conclusion



COWS is a validated tool to measure opiate withdrawal

A mix of objective and subjective measures can vary scores between clinicians

Careful assessment of signs and symptoms to ensure attributable to opioid withdrawal, as there can be considerable overlap in scoring patients who may have co-morbid medical and psychiatric conditions which can alter scores

Day/Month/Year

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Thank You

UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES



UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES

Monitoring symptoms pre and post withdrawal



TABLE 5
The Subjective Opiate Withdrawal Questionnaire (Loimer, Linzmayer & Grunberger 1991)

1. I feel very good	I feel very bad
2. My concentration is poor	My concentration is good
3. I cannot think clearly	I can think clearly
4. I have a good appetite	I have a poor appetite
5. My thoughts revolve around drugs	Drugs do not preoccupy me
6. I am optimistic	I feel pessimistic
7. I feel active	I feel apathetic
8. I have feelings of anxiety	I have no feelings of anxiety
9. I am indifferent	I take an interest in my environment
10. I sleep very well	I sleep very badly
11. I feel restless	I am at peace with myself
12. My mood is changeable	My mood scarcely changes
13. I am depressed	I am in good humor
14. I am tired and weak	I am lively and awake
15. I have severe withdrawal symptoms	I have no severe withdrawal symptoms
16. I am irritable and grumpy	Nothing upsets me
17. I have no pain	I have severe pain
18. Sex interests me greatly	Sex does not interest me
19. I have severe diarrhea	I am severely constipated
20. I am sweating heavily	I am not sweating

Each of the 20 items was rated on a 100 mm. line anchored on one end by the items on column 1 and on the other end by the items in column 2. The total score was the sum of analogue scores for all 20 items.

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CIWA-Ar

CLINICAL INSTITUTE WITHDRAWAL ASSESSMENT OF ALCOHOL SCALE, REVISED (CIWA-AR)

Patient: _____ Date: _____ Time: _____ (24 hour clock, midnight = 00:00)

Pulse or heart rate, taken for one minute: _____ Blood pressure: _____

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

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

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

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

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

VISUAL DISTURBANCES — Ask: "Does the light appear to be too bright? Is its color 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

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

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 no present
1 very mild
2 mild
3 moderate
4 moderately severe
5 severe
6 very severe
7 extremely severe

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

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/person

The CIWA-Ar is not copyrighted and may be reproduced freely.
Sullivan, T.T., Spence, K., Schwedtmann, J., Narang, C.A., and Sellers, E.M.
Assessment of alcohol withdrawal: The revised Clinical Institute Withdrawal Assessment for Alcohol scale (CIWA-Ar). British Journal of Addiction 84:1353-1357, 1989.

Patients scoring less than 10 do not usually need additional medication for withdrawal.

Total CIWA-Ar Score _____
Rater's Initials _____
Maximum Possible Score 67