Dizziness, Vertigo, Motion Intolerance

The primary organ of equilibrium in the human body is located in the inner ear which serves as both the sensory organ for spatial orientation and head movement as well as hearing.

If for any reason there is an abnormal increase or decrease in the signal being sent to the brain, from any of the balance canals, the brain will perceive this as an exaggeration or hallucination of motion. The result is what we commonly term dizziness or vertigo.

Illness, infections, disease, head trauma, and the natural aging process may cause changes in the equilibrium portion of the inner ear. For others, motion sickness may be traced to their early childhood. Motion intolerance may be experienced as either a sense of exaggerated motion or an inability to watch moving objects while stationary.

Although symptoms may only last for several days it is not uncommon, if left improperly diagnosed or treated, for them to linger for years. The good news is that 90% of all causes of dizziness can be found through a thorough evaluation. Eighty-five percent are caused by inner ear disturbance and can be treated medically, surgically, or with Vestibular Rehabilitation.

For more information on vestibular disorders please visit: **www.dizzy.com**

AIB Patient Self Quiz

A feeling of motion, spinning, or falling when moving your head quickly, or changing your position, e.g. getting in and out of bed?	❑ Yes	❑ No
Uncomfortable trying to get around in the dark?	❑ Yes	❑ No
Walking down grocery store aisles or through the mall is upsetting?	❑ Yes	❑ No
Your feet just won't go where you want them to?	❑ Yes	❑ No
A sense of unsteadiness? A feeling you are not sure footed?		
A fear of falling or stumbling?	❑ Yes	❑ No
Looking at moving objects such as escalators or looking out the side window of a car makes you queasy?	❑ Yes	❑ No
Difficulty keeping your balance as you walk on different surfaces, e.g. tile to carpet?	❑ Yes	❑ No
A feeling like you are drifting or being pulled to one side when walking?	❑ Yes	❑ No
No one really understands how frustrating all this is?	❑ Yes	❑ No

If you answered YES to one or more of these questions, a vestibular and equilibrium evaluation should be considered.

AIB AFFILIATE™

Understanding

Vertigo, Imbalance, and Motion Sickness

A Patient's Guide

The American Institute of Balance®

Patient Education Series

Dizziness or loss of balance is the second most common complaint heard in doctors' offices. National Institute of Health statistics indicate that dizziness will occur in 70% of the nation's population at sometime in their lives. Although very common, acute or chronic problems with equilibrium may indicate serious health risks, or limit a person's everyday living.

Equilibrium disorders fall into two categories. The first is dizziness, vertigo or motion intolerance that may occur in acute or sharp attacks lasting only seconds or sometimes for several hours. This condition may be caused or worsened by rapid head movements, turning too quickly, walking or riding.

The second is a persistent sense of imbalance, unsteadiness or what some people refer to as a loss of surefootedness.

The good news is that diagnosis and treatment options have become more effective over the past ten years. There is hope for many who once thought there might be no relief.

LOSS OF BALANCE

Many people believe that loss of balance and unsteadiness are a natural result of aging. In fact, fear of falling is the number one health concern of individuals in their later years -- not unfounded as the National Institute of Health statistics indicate that balance-related falls account for half of accidental deaths in the population over 65. In addition, nearly 300,000 hip fractures and 3 billion dollars in medical expense result from balance related falls each year.

Human equilibrium is a complex interaction which requires correct input from the inner ear, vision and somatosensory (contact with the earth as perceived by our feet, muscles & joints.). All three signals must then be correctly received by our central nervous system. Then the brain must execute the correct movement of our musculoskeletal system, so that we may maintain our center of gravity. If any one or several components of this system do not work properly, the patient will suffer loss of balance.

The natural aging process may affect any one or all of these senses, as well as the brain's ability to interpret them and then to react quickly. It is very common to hear from someone who has fallen that they saw the curb or step but just weren't able to react fast enough or to keep their balance.

With proper diagnosis and therapeutic exercises, called Balance Retraining, many older adults are able to return to more active lives.

DID YOU KNOW ...

1. Vertigo, dizziness or imbalance will affect 90 million Americans sometime during their lifetime.

2. Each year, over 9 million people consult with their doctors with complaints of dizziness -- the number one malady for those over 70.

3. Balance related falls account for more than one-half of the accidental deaths in the elderly.

4. Balance related falls cause over 300,000 hip fractures a year in individuals over 65 years of age.

5. Inner ear disorders such as Meniere's Disease, benign positional vertigo, perilymph fistula, and endolymphatic hydrops, have symptoms which are virtually indistinguishable to most people. Because imbalance and vertigo can affect a person's ability to stand and walk, to see or think clearly, to read or watch television, and to make decisions; diagnoses are sometimes confused with multiple sclerosis and clinical depression.

6. Children with treatable vestibular disorders are sometimes incorrectly diagnosed as learning disabled, dyslexic, or psychologically disturbed.

7. Blows to the head and whiplash are frequent causes of balance dizziness and

8. Ear infections can also lead to vestibular disorders.

The American Institute of Balance is nationally and internationally known for its expertise in testing and rehabilitation, helping thousands of patients who were told “learn to live with it” to return to normal lives. AIB's evaluation protocols and therapy programs are used by physicians, audiologists, therapists, clinics, and hospitals worldwide.