

Vestibular Disorders

The vestibular system is part of the inner ear and the brain that helps control balance and eye movements. When the ear or the brain is damaged by disease or injury, vestibular disorders can result.

The most commonly diagnosed vestibular disorders include positional vertigo (also known as BPPU, BPPN or BPU), Meniere's Disease, infections of the inner ear (also known as labyrinthitis or vestibular neuronitis), and injury caused by head blows (also known as inner ear concussion syndrome). A slow growing tumor of the acoustic nerve, also known as an acoustic neuroma, is a rare illness that may also be diagnosed as a vestibular disorder.

Symptoms:

The most frequently reported symptoms of balance "vestibular" disorders are dizziness, unsteadiness or imbalance when walking, vertigo, and nausea. These symptoms range from mild to severe and may result in total disability. Other symptoms range from headaches to muscular aches in the back and neck, and increased sensitivity to the noise and bright light. Patients with vestibular disorders often report fatigue and an inability to concentrate. Difficulty with reading and speech may occur.

Statistics:

Vestibular disorders can affect people of all ages and walks of life. Approximately 42% of the American population will complain to their

physician of dizziness at least once in their lifetime and for seventy-six million of these people, the cause of the problem will be in the inner ear.

Causes:

Frequent causes of vestibular disorders include, but are not limited to the following: blows to the head, whiplash, neurological disorders (e.g., stroke and tumor), ear infections, and high doses or long term use of certain antibiotics. Aspirin, caffeine, alcohol, nicotine, sedatives and tranquilizers as well as many other illegal drugs, may result in temporary dizziness but generally do not cause damage to the vestibular system.

Diagnosis:

First, a complete physical is needed to rule out the possibility of an underlying condition such as cardiovascular or central nervous system disorders that may masquerade as a vestibular disorder. If an underlying condition is not diagnosed the patient is referred to a specialist, such as an otolaryngologist or neurologist, for further testing. Hearing and eye tests are often included in making a proper diagnosis.

Treatments:

Treatment varies according to the diagnosis and may consist of Physical Therapy, drugs, diet modification or in severe cases surgery.

In mild cases, the symptoms may go

away on their own as the vestibular apparatus heals or the nervous system learns to compensate. In moderate to severe cases treatment may offer a cure or simply control the symptoms that are present.

If you experience any of these symptoms of a vestibular disorder, please contact your physician.