

The background of the entire page is a dark, almost black, color. Overlaid on this is a large, flowing, translucent red fabric that moves from the top left towards the bottom right, creating a sense of motion and depth. The fabric's folds and highlights are rendered in various shades of red, from deep maroon to bright, glowing reds.

OPTIMOVE

Physical Therapy and Wellness

Taking Control Of

Dizziness or Vertigo

In the Current Healthcare System

Dr. Jeffrey R. Guild, PT, DPT, CSCS

What To Do About Dizziness or Vertigo That Will Not Go Away?

Taking Control Of Dizziness In The
Current Healthcare System, Figure
Out What Is The Cause, And Solve
This Problem

By:

Dr. Jeffrey R. Guild, PT, DPT, CSCS

Health Advice Disclaimer

This book only applies to chronic dizziness or vertigo. Recommendations about sudden and acute dizziness or vertigo are beyond the confines of this book. If you experience sudden vertigo or dizziness, consult your primary healthcare provider. We make every effort to ensure that we accurately represent the condition displayed throughout this guide. However, examples of conditions are based on typical representations that we commonly see in physical therapy and in medical research. The information given is not intended as representations of every individual's potential condition. As with any condition, each person's symptoms can vary widely and each person's recovery can also vary depending upon background, genetics, previous medical history, psychological status and history, motivation to follow physical therapy advice and various other factors.

The purpose of this book is not to provide an individual diagnosis and prognosis without a thorough physical examination and likewise the advice given cannot be deemed fully accurate in the absence of this examination from a licensed healthcare provider.

Significant injury risk is possible if you do not follow due diligence and seek suitable professional advice about your condition. No guarantees of specific results are expressly made or implied in this report.

About The Author

Dr. Jeffrey Guild has worked with people for the past 15 years in various settings of fitness and rehabilitation to help people return to *their* optimal movement. He started his journey as a strength & conditioning professional working with elite Division I athletes and applied those principles to the general public. Jeffrey's first career as a strength & conditioning professional focused on preventing falls and helping adults move better in a fitness setting.

Once shifting to physical therapy, Jeffrey placed his emphasis on vestibular (inner ear balance) and neurological rehabilitation. This was the key ingredient that was missing on the quest to fully understand how to address balance and falls; the inner ear balance system and its intimate connection with the nervous system, which helps us balance and move. To broaden his understanding of helping adults move better, Jeffrey worked as a physical therapist in acute care hospital settings, intensive multidisciplinary inpatient rehabilitation, outpatient orthopedics, outpatient neurological, skilled nursing, assisted living, Hospice, and pediatrics. His passion for research has resulted in publications in a peer reviewed journal and a geriatric rehabilitation journal.

In this tips report about dizziness or vertigo that will not go away, I share with you powerful ways for you to navigate the healthcare system in order for you to take control of your chronic dizziness or vertigo. Some of these tips will help you live your life again and improve your symptoms quickly. Other tips will start you on a journey which will allow you to take charge of this condition with a plan of action which will produce great results.

I have spent several years now trying to get the message out about how treatable chronic dizziness or vertigo can be, all without medication or costly tests. The biggest problem with these symptoms is their obscurity in our healthcare system. This book is intended not only to lead you on a path to take control of your chronic dizziness or vertigo, but to be spread far and wide to get the word out about how many people can be helped by getting on the right path. This is important, because dizziness and vertigo are not just annoying symptoms to be put up with, but a debilitating condition that truly limits peoples' lives and livelihood.⁽¹⁾⁽²⁾

Now that you have the power of this information in your hands, it is up to you to act, to begin the journey that will give you the power over your dizziness.

So pour yourself a coffee or tea, read this on the go, or enjoy a little night reading to help you sleep. This information is gold, and will put the power back in your hands for you to achieve your optimal movement in order to return to engaging fully in your life again.

About The Evidence

Within this tips report is information cited from the medical literature. In other tips reports I cite information based on original sources of high quality evidence or systematic reviews about those original studies. In this tips report, I cite original studies wherever possible, however, since this particular tips report is based on sifting through symptoms and reporting on different causes to dizziness or vertigo, some of the cited information is based on recent articles in quality medical journals with less emphasis on original content.

The purpose of emphasizing the evidence is because the biggest problem with dizziness and vertigo is its obscurity in our healthcare system. Bringing out the evidence for the general public and healthcare providers is one strategy to address the obscurity problem. One of the best ways we can help those affected is to let them know exactly what is going on, the ***physical cause***, and that there ***is evidence and consistency*** all throughout the medical literature on this topic, not based on anatomical theory or animal studies (I will clearly let you know when this is the case). This way, more people suffering from inner ear balance disorders can get the help within our healthcare system as quickly and effectively as possible.

Dizziness lasting for longer than a couple months (chronic dizziness and/or vertigo) can have many causes. So what to do about these symptoms when they keep lingering? Dizziness or vertigo that does not go away can be frustrating and confusing. You may be asking questions like...

- Is this ever going to get better or go away?
- I've already seen a few specialists about this, but nobody seems to have a clue as to **actually why** I am dizzy. Where do I go now?
- Do I move more to stay active or move less to avoid falls?
- Who would be able to help me with this?
- Is this something life-threatening that I should be worried about?
- Should I just look up exercises or repositioning for vertigo on the internet?
- People are beginning to look at me like I am crazy. Am I crazy?

Dizziness can be caused by problems with the inner ear balance system (the vestibular system), blood pressure and other circulatory problems, medications, anxiety and other psychological situations, neck problems and whiplash, head injuries and concussions, heart rhythm problems, and even more scary things like strokes, tumors, multiple sclerosis, etc.

So how to figure out what is going on and what to do?

The worst thing to do is to do nothing. If you are experiencing dizziness or vertigo that will not go away, talk to your doctor without delay. Most of the time these symptoms are not immediately life-threatening,⁽³⁾⁽⁴⁾ but sometimes they can be,⁽³⁾⁽⁵⁾⁽⁶⁾ so getting the problem addressed by a licensed medical professional is important. Even if the cause is not life-threatening, dizziness and vertigo can be very debilitating,⁽¹⁾⁽²⁾ which can negatively change your life,⁽¹⁾⁽²⁾ and increase risk of falling.⁽¹⁾⁽⁴⁾ Even worse, dizziness or vertigo can turn into long-term problems which can become even more debilitating and complex.⁽⁷⁾⁽⁸⁾⁽⁹⁾

Often times dizziness or vertigo are caused by problems in the inner ear balance system (the Vestibular System).⁽¹⁾⁽³⁾ It is common for many healthcare providers to not be aware of how to identify causes or treatment for dizziness or vertigo.⁽¹⁰⁾ This problem in our healthcare system often leads to the over prescription of medications which do not help and can actually cause harm.⁽²⁾⁽¹¹⁾⁽¹²⁾

This tips report will help you to know when to ask your doctor about when to see an inner ear balance specialist, a Vestibular Specialist.

What is a Vestibular Specialist?

A Vestibular Specialist is specifically trained in rehabilitation of the inner ear balance system (the vestibular system) and the way the vestibular system works with the rest of the body to help us balance. These specialists are trained to specifically identify the problem⁽¹³⁾ and treat the *individual* person *specifically* to what is causing the

problem with good results.⁽¹⁰⁾⁽¹⁴⁾ Since these specialists are usually physical therapists by training, they are not able to order imaging or medical tests. However, these specialists do not need these medical tests or imaging to spot when something other than the inner ear balance system is the cause of the problem, even life-threatening causes.⁽¹⁵⁾ A vestibular specialist will then refer you to a physician for testing.

When To Talk To Your Doctor About Seeing A Vestibular Specialist?

- 1) If you feel dizzy when you move your head or when you are up and moving around, especially walking.
- 2) If you feel spinning, rocking, or shifting when you Roll over in bed, bend forward, or tilt the head upward.⁽²⁾
- 3) If you feel dizzy *looking* at objects moving, especially crowded areas, shopping aisles, escalators, action movies, etc.⁽¹⁶⁾⁽¹⁷⁾⁽¹⁸⁾
- 4) If you have balance problems with dizziness, or balance problems without dizziness.
- 5) If you have dizziness as a result of a concussion, head injury, whiplash, or related to headaches.
- 6) If you feel dizzy and anxious or panicky or fearful when you are simply standing, walking, or moving.

- 7) If you have ringing in the ear (tinnitus) or hearing loss as well as dizziness.

When people experience these types of problems, the main treatment or one of the main treatments may be vestibular rehabilitation. If another healthcare provider is needed coinciding with vestibular rehabilitation, a vestibular specialist will team up with another healthcare provider. As always, if the vestibular specialist suspects the problem is due to something else other than a vestibular disorder, they will be able to figure that out and refer you to the appropriate healthcare provider.

Bonus: Things To Avoid Doing When Feeling Chronically Dizzy or Experiencing Vertigo

- 1) Do Not Stop Moving Or Exercising.
 - Dizziness is likely to get worse with less movement and is likely to improve with more movement. When people stop moving because of dizziness or vertigo, they can feel worse very fast and are more likely to lose their ability to move without help.
- 2) Do Not Avoid Participating In Your Life
 - When people stop working, doing the things they enjoy, or stop going out into the community, this is where the worst

side effects of dizziness and vertigo happen. If you continue to live your life, you will not get worse, and you are likely to get better.

3) Do Not Try To Reposition Yourself For Vertigo

It is tempting to avoid the hassle of seeing a medical professional for vertigo when there are articles online and YouTube videos showing how to do the repositioning maneuvers for vertigo. While if done correctly, this can work, if done **incorrectly**, it can have severe consequences and side effects for the following reasons...

- Repositioning can seem simple to someone not feeling the world spinning around them. Since the repositioning purposely creates the sensation of spinning, these maneuvers can be difficult to do correctly while feeling the extremes of your symptoms, you may not know which way is up.
- Vertigo can be complicated, so knowing which type of repositioning to do is the first step. This is based on the right diagnosis, which requires a trained and experienced medical professional who is able to figure out where the vertigo is originating from in the inner ear.⁽²⁾
- If done incorrectly, the condition can become more complicated for healthcare providers to fix, and at the same time, you may feel worse with even more nausea by spreading the crystals even more around the inner ear.

- Since the repositioning is usually done on the edge of a bed or table, the sensation of spinning can actually cause people to fall off if not guided by a professional, possibly resulting in serious injury.
- If the cause of vertigo is something more serious such as a tumor, stroke, multiple sclerosis, or cardiovascular problem, a vestibular professional will be able to spot this and refer you to the correct healthcare provider. Without a specialist to observe these potential warning signs, an important life-threatening diagnosis could go without being discovered.

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Balance and Falls Checklist

A Quick & Simple Tool To Make Sure You Are Taking The Action You Need To Prevent Falls

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General		Answers		Doctor/Healthcare Provider Notes
Do you exercise regularly?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
If you've fallen, did you tell your doctor?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Check Meds, Vitamin D, BP, Arrhythmias, Cataracts, Refer To Specialists
Has your cane or walker been checked by a Physical Therapist?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Physical Therapy
Do you have problems with Balance, Dizziness, or Vertigo?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Vestibular Specialist
Do you have problems walking, or do you walk slower than you used to?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Physical Therapy
Do you have a fear of falling? Or do you touch furniture when you walk?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Physical Therapy
Environmental		Answers		Doctor/Healthcare Provider Notes
Is your home safe for your ability to move around?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Occupational Therapy
Do you have difficulties with bathing, grooming, or dressing yourself?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Occupational Therapy
Do you have problems with thinking and/or remember important things lately?	Yes <input type="checkbox"/> No <input type="checkbox"/>			Refer To Speech Therapy Or Neurological Psychology
Frailty		Answers		Doctor/Healthcare Provider Notes
Have you lost 5% or more of your weight in the past year?	Yes <input type="checkbox"/> No <input type="checkbox"/>			If "yes" is the answer to at least two of these questions, frailty is a problem and fall risk is higher
Are you unable to stand up from a chair 5 times without using hands?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Would you say your energy level is low?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
History		Answers		Doctor/Healthcare Provider Notes
When is the last time you had a bone scan?	Date: _____			Reduces fractures. Low bone density is associated with vestibular/balance problems
When is the last time you had your Vitamin D checked?	Date: _____			Supplementing low Vitamin D reduces fall risk and may reduce risk of vertigo

Information for development of this checklist is based primarily on, but not limited to: Deandrea S, et al. 2010. *Epidemiology, Ther.*, Muir SW, et al. 2010. *J Clin Epidemiol.*, Gillespie LD, 2012. *Cochrane*, Lusardi MM, et al. 2017. *J Geriatr Phys*, Dhalwani NN, et al. 2017. *BMJ Open*, and Sherrington C, et al. 2011. *NSW Public Health Bull.*

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