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Vestibulopathy

Labyrinthitis and Vestibular Neuritis

Patient information leaflet

If you need this leaflet in a different language or accessible format
please speak to a member of staff who can arrange it for you.

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Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil,
vă rog să discutați cu un membru al personalului să se ocupe
de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق
يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

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Vestibulopathy

A vestibulopathy is an inner ear condition affecting a sensory organs deep inside your inner ear and skull on both sides of your head which they detect sound and movement. These sensory organs can be affected by head trauma, vascular restrictions, alcohol, smoking and viral events as well as age.

One or both sides can be affected leading to an underworking and present with a loss of hearing and/ or balance, dizziness or vertigo. Usually only one ear is affected but it is possible for both to be underworking especially as people grow older.

Other symptoms can vary in severity from very mild unsteadiness, to more violent vertigo (spins), dizziness, difficulties with balance and walking, nausea and vomiting. Difficulty with vision and occasionally hearing loss may result. It may come on abruptly and affect your walking or ability to go outside.

After and acute vestibulopathy symptoms usually start to improve over a few days; occasionally medication helps in the early stages (for a few days only) if you are vomiting or very nauseous, but should be avoided long term. The majority of patients are completely free of symptoms within a few weeks or months.

However, a small number of people develop chronic dizziness. Balance is a crucial part of everyday activities from the minute we get out of bed, bend to put on our socks, walk down the street, turn our head to talk or read, and take part in social and sport activities. It is controlled by very complex coordination of information from the eyes, inner ears, joints, feet and brain.

This all normally happens automatically, but there are many things that can go wrong.

Further information

Patients have found the following websites helpful:

www.dizziness-and-balance.com

www.vestibular.org

www.labyrinthitis.org.uk

www.emedicinehealth.com

www.nhs.uk/Conditions/Vertigo

Physiotherapy

Some patients continue with a milder balance problem several months after onset despite the above advice. If this is the case, when you have been seen in Balance Clinic, you may be referred for some specific input from Physiotherapy.

Whilst this is very unlikely, some patients may experience symptoms in the future. There is a 2% recurrence rate within 2 years and it usually affects the other ear. This is often triggered by:

- Times of stress.
- Marked tiredness.
- Following a different illness or period of prolonged inactivity.

It may leave you feeling more unsteady. At such times, it is important that you restart any exercises and advice you were previously given, and your symptoms will typically settle again over several weeks.

This does not mean you need to be seen, although your GP will re-refer you back if it is appropriate.

Symptoms

Associated problems

The vestibular system is closely linked to parts of the brain involved with migraine and headaches, anxiety and nausea. Because of these anatomical links, many patients with long term vertigo and imbalance become aware of various additional problems.

Common other complaints seen are:

- Frequent headaches, even vestibular migraine.
- Reduced concentration.
- Discomfort in busy places, typically shopping centres.
- Increased fatigue as well as often becoming quite emotional.
- Difficulty reading especially computer screens.

Generally as the balance problem improves, these associated problems will naturally reduce, but at times you may need some specific help to address these varied problems.

Diagnosis

In some cases people need further investigations like MRI scan or vestibular function tests. Diagnosis is usually made by listening to symptoms. There are many other medical conditions which can bring on vertigo so you will be asked questions to help exclude all of these.

Vestibular rehabilitation exercises

These are specific exercises practiced in order to retrain the brain's ability to adjust to the vestibular imbalance by compensating and adapting. To enable this to work fully, patients need to be dedicated to doing exercises regularly through the day for several months, even though initially these may seem to increase your dizziness for a short period of time (no more than 2-3 minutes).

Common exercises

Place a small card or target on the wall at eye level. Sitting, keep your eyes fixed on this target whilst you turn your head to the left and right and build up to repeating for one minute. Progress as able, to performing the same exercise faster or for longer. 30 seconds to 1 minute (max) x5 daily is usually sufficient.

Within a few weeks of doing this, aim to do the above as you walk forwards and backwards, still moving your head (stay close to the kitchen units or wall for safety).

Practise standing with your feet together, progressing to balancing on one leg, building up to 20 seconds as you improve. When this gets easier, repeat but try to challenge your balance by closing your eyes.

Make sure you are safe when doing these, stand close by the table or something to hold onto if needed.

Walking – one of the best exercises, however, is simply starting to go out for a walk every day. Initially you may feel as if you are staggering but with daily practice, this will improve gradually over a month.

As you regain the ability to walk well, you will regain confidence to go outside the house alone, cross roads, and resume many of the activities you have been unable to do since the problem began.

What else can I do?

There are usually local community exercise or balance groups you may be able to join online resources such as the Otago balance programme on you tube you can access to help you get into a routine of training your strength and balance.

Numerous patients now find that exercise at home using commercially available can be useful to improve balance.

Gentle yoga or tai chi can be helpful, and some patients manage to do this at home using a DVD or find a local class.

Going for a walk outside every day gives your balance system a much better chance of improving. Try to limit the time you spend resting on the sofa or bed in the daytime and the amount of time you spend on screens such as TV, phones, tablets, computers, etc.