

Don't Let Vertigo Limit Your Lifestyle



By Wendy Webb Schoenewald,
PT, OCS

People who have vertigo and are suffering from symptoms of dizziness, nausea, loss of balance, and vomiting may not know that there is a simple treatment that can cure those symptoms and allow them to return to normal life.

Physical therapists expertly trained in vestibular therapy can perform a single Epley maneuver on patients experiencing these symptoms that will eliminate the vertigo 80% of the time. They use infrared video goggle technology that records eye movements to accurately diagnose and effectively treat benign paroxysmal positional vertigo (BPPV).

It's a pretty amazing process—you lay someone down, maneuver their head and body, and their symptoms are gone," said Wendy Webb Schoenewald, physical therapist and owner of WWS Physical Therapy and Vestibular Rehabilitation in Doylestown. By watching the patient's eyes with the video goggles, a therapist can track the eye movement called nystagmus and then choose the appropriate maneuver for the least symptomatic treatment. "Many times, when we treat orthopedic conditions, it's six weeks before they're better; with this, it is very quickly resolved with a couple treatments and no medication involved."

BPPV is a mechanical vestibular disorder involving the inner ear that causes spells of vertigo that typically last less than a minute when the head is in certain positions. It occurs when calcium crystals called otoconia are displaced into the semicircular canals where they are not supposed to be. Patients think that the room is spinning because the otoconia cause nystagmus of the eyes that gives a rotatory eye movement. This creates a sense of imbalance often described by patients as being pushed over or back into bed when sitting up.

Vertigo can make common, everyday tasks, like doing sit-ups, reaching for a kitchen cabinet, or bending over to pick something up difficult. BPPV is commonly called top shelf vertigo because looking up can trigger an episode. Tilting the head backwards can cause an attack, so people with the condition avoid going to the hairdresser or the dentist.

Most cases of vertigo occur for no apparent reason, but the symptoms are caused by the body's movement, which leads to the sudden onset of vertigo. Often patients say it is triggered by laying down in bed or getting out of bed, causing a sensation that feels like spinning, and they have to hold on to something to stabilize themselves. The symptoms of vertigo commonly pass in seconds but can last up to a minute. Nausea and vomiting are commonly associated with attacks.

BPPV incidence increases significantly after age 65 and then incrementally with each decade of life. It is undiagnosed in 9% of senior citizens. Since BPPV can affect balance, it can increase the risk of falls, so it is important to have it diagnosed and treated quickly to prevent injury.

It is prevalent in persons with a history of diabetes, hypertension, or osteoporosis. People who have had a history of viral ear infections are also more likely to get BPPV than normal individuals. Once someone has an attack of vertigo, they are 50% more likely to have another attack in the next year.

Since we are writing in a women's journal, we should note that BPPV is more common in women than men. There are several physiological reasons for this. First, estrogen plays a role in regulation of bone and calcium metabolism. Since aging women have reduced estrogen levels, this can affect the degeneration of otoconia of the inner ear and contribute to osteoporosis. Migraine, which is more prevalent in females, can also trigger BPPV as a sequela of a migraine attack.

A recent study in Boston linked vertigo and the spring season. During the winter months with

shorter days, serum vitamin D levels are found to be lowest, peaking in the early spring months. The researchers found that, in patients with BPPV, serum vitamin D levels are lower than in normal controls, and there are more clinic visits for BPPV in the months of March through May. In my clinic, the fall season also seems to bring in many patients with vertigo, which I believe correlates with allergy season. This based on years of experience rather than any studies.

Treatment of BPPV, with the Canalith Repositioning Maneuver, more commonly called the

Epley maneuver, is very effective. In patients with recurrent vertigo, we will recommend having vitamin D and estrogen levels checked, and, in those with recurrent BPPV, possible supplementation of vitamin D and/or estrogen should be considered.

Balance issues are often commonly associated with BPPV. Though balance is often taken for granted, it is a complex skill and needs to be reset after a bout of vertigo. Good balance is achieved by proper sensory input from the visual, proprioceptive, and vestibular systems working together with the muscles of the body. Maintaining good balance depends on information received by the brain from three sources: the visual, musculoskeletal, and vestibular systems. In physical therapy, after the BPPV is treated, we will assess these systems and prescribe exercise for improving your balance to restore your postural control to prevent falls.

The professionals at WWSPT are experts in treatment of BPPV. They are all certified in vestibular rehabilitation for the treatment of inner ear and balance disorders which ensures the most successful diagnosis and treatment. A video demonstration of how therapists diagnose and treat BPPV is available online at WWSPT.com. Don't let vertigo limit your lifestyle. Call today for an appointment.



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