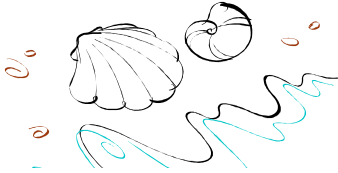


# The Dizziness, Balance and Vertigo Report

Summer 2009



Brought to you by



**Kanata Orthopaedic  
Physiotherapy Clinic**

## New to KOPC

Kanata Orthopaedic Physiotherapy Clinic is now offering Vestibular Rehabilitation and Balance Services.

Vestibular Rehabilitation is an emerging branch of Physiotherapy that focuses on the assessment and treatment of a variety of conditions involving pathology of the inner ear.

Our Physiotherapists at Kanata Orthopaedic Physiotherapy Clinic have trained in Vestibular Rehabilitation at the Emory University Vestibular Certification Program.

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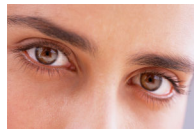
*Vestibular Rehabilitation can be provided by your Physiotherapist at  
**Kanata Orthopaedic Physiotherapy Clinic***

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## It's All in the Eyes



One of the important tools we have in treating a vestibular pathology correctly is in carefully analyzing the involuntary eye movements that often accompany problems of the inner ear. Because nystagmus can manifest from many different causes, including central pathologies, it is imperative to have a patient medically cleared before initiating vestibular rehabilitation.

Vestibular Rehabilitation by a trained Physiotherapist involves analysis of nystagmus with Video Infrared, or Frenzel goggles (see right). These are specially designed viewing glasses to eliminate fixation (room light), thereby accentuating any nystagmus that may be present.

The direction and duration of nystagmus induced in a variety of positions and eye movements, allow us to assess the underlying vestibular pathology, and initiate an appropriate treatment program.

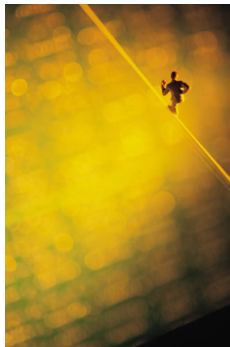


**Frenzel goggles**

## Vestibular Rehabilitation Quick Reference Guide\* for the Top 3 Vestibular Disorders seen in our Practice

\*This guide is meant as an educational tool only, to increase awareness of the type of conditions that are commonly treated with vestibular rehabilitation. Anyone suffering from symptoms of dizziness, imbalance or vertigo must first consult with their physician for proper medical screening before initiating any type of rehabilitation program.

Pathology	Presentation	Nystagmus	Treatment
BPPV (Calcium carbonate crystals migrate into 1 of the 3 semi-circular canals)	Usually short duration, movement induced bouts of vertigo	Elicited during provocative maneuvers (Dix-Hallpike, Head Roll)  Can be purely horizontal or mixed torsional/up/down beating depending on the canal that is affected	Must be specific to the affected canal and/or nystagmus characteristics  <i>Treatment may involve:</i>  Canalith Re-positioning (Epley's Maneuver) Semont Maneuver Head Roll Casani Maneuver
UVL (Unilateral Vestibular Lesion)	Usually caused by an inner ear infection  Labyrinthitis (may also have hearing loss)  Neuritis (hearing usually spared)	In the acute stages < 3-7 days, there is usually significant vertigo and resting nystagmus  In the sub-acute stage > 3-7 days, there is some symptom reduction due to central compensation, and usually nystagmus beats to the unaffected side with certain provocative tests, or when viewed without fixation	<i>Vestibular Rehabilitation Exercises:</i>  Improve static and dynamic gait/balance defects Maximize central compensation and vestibulo-ocular function via adaptation, substitution and/or habituation exercises
Presbystasis (Disequilibrium of aging)	Generalized dizziness, imbalance, disequilibrium, weakness  May have other co-morbid conditions	May have some difficulties with smooth pursuit and saccadic eye movements  Usually no frank nystagmus	<i>Vestibular Rehabilitation Exercises:</i>  General strengthening, conditioning Eye/head exercises to maximize vestibulo-ocular function Balance/gait exercise



*Find the balance in your life*

THE DIZZINESS, BALANCE AND VERTIGO REPORT  
*brought to you by KOPC*

**For more information or to book an appointment, please contact**



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