

## Vertigo

### Red flags for central

- Any neurologic deficit
- Total ipsilateral hearing loss
- Inability to walk without support
- Direction changing nystagmus

### Neuro exam

- cerebellar tests (rapid alternating hand mvts, finger-nose test, heel on shin)
- power, sensation ULs and LLs
- gait – tandem walk
- speech, facial droop

### Nystagmus

- Named by direction of fast phase
- Fast phase beats towards the side of increased vestibular activity
- Increased if look to hyperactive side, decreased if look to hypoactive side
- Pure directional or torsional with upbeat/downbeat component

### Advice to patients

- Fluids – reduce severity of symptoms
- Gradual return to head movements
- Reassurance +++
- Post manoeuvre precautions – limited evidence for them, ++ literature on internet

	BPPV	Vestibular Neuritis	Meniere's disease	Labrynthitis	Migrainous vertigo	Stroke
Vertigo	Brief spells 30sec-1min	Continuous <4 days then episodic	Repeat attacks lasting 20mins to 24hrs	Same as neuritis + hearing loss	Recurrent spells lasting for minutes to hours	Continuous Direction changing
Symptoms	Vertigo, nausea, imbalance	Gradual onset vertigo, nausea, imbalance	Vertigo, fluctuant hearing with documented loss		Vertigo + photophobia/headache/Aura	Vertigo, nausea, ataxia, incoordination (maximal at onset)
Circumstance	Head movement provoked	Gradual onset progressing to head movement provoked	Spontaneous	Gradual onset	Gradual onset	Sudden onset, unaffected by head position/movement
Hearing	Unaffected	Unaffected	Fluctuant loss Aural fullness Tinnitus	Loss	May have sensitivity	May have complete ipsilateral loss
Percipitants	Age Head injury	Viral illness		Viral illness	Diet, stress	Risk factors – HTN, cardiac
Neuro exam	Normal	Normal	Normal	Normal	Normal	Deficit in coordination, power or sensation Ds (diplopia, dysarthria, dysphagia)
Visual exam	Abnormal VOR	Abnormal VOR	Nil specific	Nil specific	Nil specific	Disruption smooth pursuit or saccades; direction changing nystagmus
Gait	Unsteady	Unsteady	?Unsteady	?Unsteady	?Unsteady	Unable to walk without support
Management	Repositioning manoeuvres Stemetil/ Serc Vestibular rehab	Stemetil Fluids Vestibular rehab	Meds Surgery/Gentamycin Vestibular rehab	Steroids? Vestibular rehab	Migraine meds Repositioning manoeuvres Vestibular rehab	Medical intervention Neuro rehab