Vestibular case A - Sarah Sokolich

43-year-old female vertigo type dizziness turning at night from the right to the left side. She realized that she also has acute dizziness when she bows down to put on her shoes. Since last week, every time she goes to bed, the room is spinning. She feels her heart beating fast has extreme nausea and feels off-balance when she walks. She is afraid of moving her head, as the dizziness is very acute and scary. She is a rather anxious person, is usually catastrophizing when she is in pain or has other physical problems, although so far, she did not have any serios illness. She is on sick leave for a week now and is scared she might fall.

- 1. What is your hypothesis? What does she have? Why do you think that?
 - I think she may have BPPV. She is having difficulty particularly with turning her head when she is lying down. It is also exacerbated by bowing her head. Her dizziness is exacerbated by head movement.

2. What is your physical examination and treatment plan?

- Start by providing patient education regarding dizziness and plan for assessment and treatment to help decrease anxiety.
- Then assess the Dix-Hallpike test, if positive I would move to the Epley maneuver for treatment.
- If the Dix-Hallpike test was negative I would assess the supine roll test and then depending on what is positive move to treatment using the appropriate maneuver (Gufoni or CuRM).
- Following treatment I would provide additional patient education. Including written information and organize to see the patient again in 2-3 days.
- I would also provide a graduated return to work and activity plan with a review of current activities. To both increase her confidence and decrease anxiety around her dizziness but also to make sure work and activities are relatively symptom free.
- 3. There are several symptoms that are not typical for the disorder named question 1. Explain why she has these symptoms and what it means for your treatment.
 - Anxiety around her dizziness and fear of falling Advice and education around her dizziness, diagnosis and provide strategies to help manage her anxiety.
 - Feeling off balance when she walks Following treatment of BPPV. Assessment of balance including steady state and dynamic gait index. Determine elements of balance affected and then provide a treatment plan based on assessment.
 - Heart beating and extreme nausea Confirm when her last GP review was and if not settling with treatment may benefit from a review to determine if there is another cause of her dizziness.
- 4. How would you evaluate your treatment plan?
 - Dizziness frequency, intensity measured using VAS scale if needed.
 - Level of anxiety maybe use HADS assessment. May need psychology involvement if anxiety is not decreasing with treatment.
 - Current engagement in work and activities of daily living aiming for symptom free.