

EAR, NOSE AND THROAT ASSOCIATES OF CHESTER COUNTY

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DIZZINESS AND VERTIGO

Dizziness is a symptom that a vast number of people experience at least once in their lives. Because there are so many potential causes, it is helpful for the patient to characterize their symptoms. This may be a sense of lightheadedness or even a faint feeling, as if they are going to black out. Symptoms such as these are usually secondary to cardiovascular or neurological problems.

Another form of dizziness is vertigo which is also a symptom and not a diagnosis. This is a sense of abnormal movement in terms of one's surroundings in space. It may be a feeling of spinning, rocking or sea sickness and may be accompanied by other symptoms such as nausea, vomiting, ringing in the ears, hearing loss or fullness of the ears. Vertigo is most frequently secondary to a dysfunction of the inner ear. Other forms of dizziness, such as lightheadedness, may be caused by neurological disorders, cardiovascular disease, metabolic disorders, side effects of medication, etc.

The cochleovestibular nerve is the eighth cranial nerve and is responsible for two special senses, both hearing and balance. The hearing apparatus, or cochlea, transmits sound vibrations from the outer environment to the auditory or hearing nerve through the cochlea or spiral organ of the inner ear. The vestibular or balance apparatus is responsible for sensing position changes of the head and the response to gravity. These sensations are transmitted from the semicircular canals and other sensory apparatus of the inner ear to the vestibular nerve. As a result of the proximity of these two senses in the inner ear, hearing and balance disorders are frequently interconnected.

Examples of vestibular disorders include benign paroxysmal postural vertigo (BPPV), Meniere's disease, acute labyrinthitis, medication toxicity to the vestibular system, acoustic neuromas (benign tumors of the vestibulocochlear nerve), etc. Vertigo may also be a manifestation of central nerve system problems, such as multiple sclerosis or vertebrobasilar insufficiency, migraines, brain tumors, Lyme's disease and medications.

Patients who experience lightheadedness, dizziness or vertigo should carefully record their symptoms in terms of where and when they occur and what factors may tend to aggravate or lessen the symptoms. Because of the multiplicity of problems that might cause these symptoms, your primary health care provider may refer you to an otolaryngologist (ENT physician), cardiologist, neurologist or endocrinologist. The vestibular system of the inner ear is the leading cause of vertigo but still accounts for less than 50 percent of the causes.

Otolaryngologists evaluate vertigo initially by performing a thorough history and physical examination. Audiometric (hearing) testing is usually a part of the initial evaluation. After additional studies of the inner ear balance and hearing mechanism, such as a VNG (videonystagmography) and ABR (auditory brain stem response test), various blood tests and X-ray studies may be ordered. If these studies indicate that the problem is a vestibular disorder, then the otolaryngologist will direct medical, surgical and other treatment options that are available. This may include head repositioning maneuvers, vestibular rehabilitation, surgery to decompress the pressure of the inner ear, or medications to lower the pressure of the inner ear or suppress the inner ear to control the patient's symptoms of disequilibrium.

The health care providers of ENTACC have available to them a highly trained Audiological Department which can perform all of the testing described above. The full complement of medical, repositioning and surgical treatment options are available and can be directed by our ENT physicians and PAs.