Dizziness, balance and rehabilitation in vestibular disorders

av

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Akademisk avhandling

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Abstract


Dizziness and balance problems are common symptoms at all ages. The aims were; to evaluate rehabilitation, static, dynamic balance and recovery in acute unilateral vestibular loss (AUVL), to evaluate the treatment of benign paroxysmal positional vertigo (BPPV) with assessment of static and dynamic balance and to evaluate the prevalence of dizziness and BPPV in a population of 75-year-olds.

**Study 1:** Twenty-seven patients (51 years) with AUVL were included and the recovery was followed regarding vestibular function, dizziness, and sick-leave. The recovery was rapid, with disappearance of spontaneous nystagmus and rapid return to work.

**Study II:** Forty-two patients (51 years) with AUVL were included and compared with a reference group. Static and dynamic balance were assessed after six months. Significant instability was found both in static and dynamic balance compared to a reference group.

**Study III.** Seventeen patients (52 years) with severe BPPV (> 3 months) were treated with Semont’s manoeuvre and/or Brandt-Daroff exercises. The recovery was evaluated by Dix-Hallpike test, subjective dizziness, unsteadiness and balance tests, after 1, 6 and 12 months. Semont’s manoeuvre resolved dizziness but the long term follow up showed impaired balance.

**Study IV:** A large cohort (675) of elderly was assessed regarding dizziness and BPPV. Side lying test and balance tests were applied. A high prevalence of dizziness (36%) and BPPV (11%) was found.

**Conclusions:** Patients with AUVL and BPPV have despite good symptomatic relief, still impaired static and dynamic balance at long term follow up. BPPV in elderly is common and should be examined since it can be treated.

**Keywords:** benign paroxysmal positional vertigo, static balance, dynamic balance, unilateral vestibular loss, dizziness, walking, vestibular rehabilitation.

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