

Vertigo

One of the questions we always ask when a client comes to see us for a hearing test is, 'do you suffer from vertigo or experience any sort of dizzy spells?' Some of the answers we get suggest that not everyone understands or knows what vertigo really is.

What vertigo is not!

We sometimes hear people describe a fear of heights as Vertigo, but it's not that. Nor is it a sense of almost fainting – this is normally caused by lowered blood pressure. Unsteadiness due to poor balance or strength, often seen in older people, is not vertigo. Sometimes when people feel light headed they may describe it as vertigo. But again, this is not what it is. In medical terms, vertigo is a specific kind of dizziness where you or your environment is moving or spinning, even though there is no actual movement occurring

So what is it?

Vertigo isn't really a condition in and of itself, but a symptom of other health conditions. These symptoms can often be distressing and if the sensation last for any length of time, or is reoccurring, it can affect a person's quality of life. Often it is accompanied by a feeling of nausea, ringing in the ears and sometimes hearing loss.

Vertigo is something that affects the body's balance system, which involves the brain, ears and eyes. Doctors describe it as a 'rotational dizziness', which is either caused by problems in the ears, or a disturbance in the sensory nerve pathways in the brain.

The first of these is often called '**peripheral vertigo**' and is a term applied to vertigo caused by problems in the inner ear. Inside the ear there are tiny organs that send messages to the brain when there is movement from the vertical position. These messages enable us to keep our balance. When there is a disturbance to this system it often produces a sensation of dizziness and nausea. Most vertigo is the result of a disturbance of the inner ear's role in balance perception. Among other things, the cause can be inflammation of the balance organs, often caused by a viral infection.

Vertigo is also associated with Ménière's disease, thought to be caused by high blood pressure in the fluid compartment of the inner ear. Ménière's disease can also result from metabolic and immune disorders.

Benign paroxysmal positional vertigo (BPPV) is thought to be caused by little crystals of calcium carbonate within the inner ear fluid that affect the sensory hair cells in the cochlear during movement causing the sensation of vertigo.

'**Central vertigo**' is the term used to describe vertigo caused by a disturbance of the central nervous system. This could be an effect on parts of the brain that deal with the interaction between vision and balance, or the sensory messages to and from the thalamus (part of the brain).

Migraine headache is the most common cause of central vertigo. 40% of migraine sufferers will have some accompanying vertigo, causing imbalance and a feeling of dizziness. Occasionally, central vertigo can result from a stroke, a brain tumour, multiple sclerosis or an acoustic neuroma (a benign growth on the acoustic nerve).

Treatment

Treatment for vertigo depends on its cause. In many cases, vertigo goes away without any treatment. This is because it is temporary condition or the brain can adapt, at least in part, to the inner ear changes, relying on other mechanisms to maintain balance. If infection is thought to be involved then antibiotics may be prescribed. For some, other treatment may be needed, including surgery if the cause is found to be the result of a tumour.

Often people visit our Hearing Healthcare Centre and describe symptoms of vertigo. Our highly skilled Audiologists may refer you to your GP or an ENT consultant if they feel there is an underlying cause that requires further investigation. ■

This is another area where the Correct Hearing Healthcare service goes beyond just the sale and fitting of hearing aids.

To make an appointment please phone **0115 961 8351** or email **info@correcthearing.co.uk**

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