



Do I need any preparation for the test?

No preparation is needed.

How long will it take and when does my consultant get the results?

The appointment may take up to one hour. A therapy plan will be discussed with you during your follow-up appointment. We recommend a course of Vestibular Therapy for optimum results.

What will I feel during the test?

You may experience dizziness with some of the exercises.

Are there any risks?

There are no risks associated with VRT.

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What is Vestibular Therapy?

Information and advice for patients

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Science and care combined

What is Vestibular Therapy?

When the vestibular organs are damaged with disease or injury, the brain can no longer rely on them for accurate information about equilibrium and motion, often resulting in dizziness, vertigo, balance problems, and other symptoms.

Vestibular Therapy (VRT) is an exercise-based and often hands-on program designed to promote central nervous system compensation for peripheral and central balance system dysfunction. It can help with a variety of vestibular conditions, including benign paroxysmal positional vertigo (BPPV) and the unilateral or bilateral vestibular hypofunction (reduced inner ear function on one or both sides) associated with Ménière's disease, labyrinthitis and vestibular neuritis.

Additionally, individuals suffering with dizziness and balance problems following neurological injury (e.g. head injuries, stroke, brain tumours) or neurological illness (e.g. multiple sclerosis) can also benefit from VRT.

Even individuals with long-term unresolved inner ear disorders who have undergone a period of medical management with little or no success may benefit.

VRT can also help people with an acute or abrupt loss of vestibular function following any type of surgery. In addition, the balance and rehabilitation tests at Wimbledon NeuroCare uses new techniques involving special exercises that can greatly improve balance and routine activities.

Vestibular Therapy may include the following assessments

- Vestibular impairment assessment
- Benign paroxysmal positional vertigo assessment (BPPV)
- Headache assessment
- Facial assessment
- Neurological assessment



How does Vestibular Therapy help?

Some of the exercise and activities that form the therapy session may at first cause an increase in symptoms as the body and brain attempt to sort out the new pattern of movements. Because of this, people sometimes find VRT quite challenging to continue with, thinking it is making their vestibular disorder worse. However, in most cases balance improves over time if the exercises are correctly and faithfully performed. Muscle tension, headaches, and fatigue will diminish, and symptoms of dizziness, vertigo, and nausea will decrease or disappear. Many times, VRT is so successful that our patients demonstrate that no other treatment is required.

What is decompensation?

After the brain has learned to compensate for vestibular dysfunction, events, such as a bad cold or flu, minor surgery, or anything that interrupts normal activity for a few days, can cause the brain to 'forget' what it learned and symptoms to reoccur. This is called decompensation. Most people are able to quickly recover from decompensation by immediately returning to the home-based exercise program developed during their initial course of VRT. However, if symptoms persist or are severe, it is important to get a diagnosis and medical treatment because this suggests that additional vestibular damage has occurred.

How is the assessment performed?

To start with, a comprehensive initial assessment will be taken, to include detailed medical history, assessing posture, balance, gait, and compensatory strategies. The assessment will also include eye-head coordination tests that measure how well a person's eyes track a moving object with or without head movement. Additionally, a test will be carried out to ascertain whether symptoms are arising from BPPV (benign paroxysmal positional vertigo). We also have further investigative equipment if necessary for assessment such as Dynamic Posturography. Other assessments may be used, such as a questionnaire measuring the frequency and severity of symptoms and associated lifestyle changes.

Depending on the diagnosis, the outpatient treatment may also involve a specialised form of Vestibular Therapy called the Epley manoeuvre.

