

DIZZINESS

Disturbances of balance are a common event, often troubling and commonly associated with other health problems. Analysing the problem requires an exact understanding of the symptoms of imbalance as present, plus any attendant events.



Dizziness: Common, troublesome, sometimes dangerous

Balance is derived from functions of the ear, the nerve connections to the brain, and the brain itself. Other supporting mechanisms include eyesight and proprioception (the ability to judge the position of the body's skeletal structures- joints, ligaments).

Imbalance or dizziness can arise from derangement of any of these components; therefore treatment depends on careful identification of the malfunction.

Characteristics:

Dizziness presents in six ways:

- **Syncope:** Common fainting or sensations of about to “pass out”.
- **Vertigo:** A sensation of spinning oneself, or the world spinning around.
- **Dysequilibrium** : Unsteadiness on moving the head, or when moving
 - around.
- **Ataxia:** Unsteadiness on the feet due to muscular incoordination.
- **Drop Attacks:** sudden collapse but without losing consciousness. Due to
 - Meniere's disease.
- **Confusional States:** Impaired clarity of perception due to trauma,
 - intoxication, etc.
- **Psychological:** Impaired thought patterns, neurosis etc.

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Other Locations

Beenleigh

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Management:

The surgeon's history-taking will endeavour to clarify the **pattern** of symptoms that have troubled the patient, particularly the exact nature of the imbalance as per the above varieties.

Any **related ear symptoms** are especially important, e.g. deafness, tinnitus. Questioning then attempts to identify any **associated health** problems or other aspects that may be relevant to the case, e.g. headaches, diabetes.

In many cases, the history will be very suggestive of the cause of the problem, but investigations are used to support a diagnosis and also to avoid overlooking other difficulties that may not be evident otherwise. Audiology, balance testing and X-ray testing are often employed for these reasons.

The history, examination, and tests identify the site and nature of the problem, usually in the ear, its connections, the brain or the cardiovascular system. Treatment as appropriate is then initiated.

The management of often subtle unsteadiness may therefore be complex, but will generally elucidate the origins and permit the management needed.

Specific conditions are outlined in the sections on inner ear disease.

More information:

[Dizziness](#)

[Dizziness Methodology](#)

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