



## The Dizzy and Imbalanced Patient

### Part III: Treatment

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Note to Participants: There are interactive pop-up questions throughout this lecture. If you choose to pause the lecture and return at a later time, a natural break time would be after answering the interactive questions. (You are able to pause at any time and the presentation will "remember" where you were. It's just a more natural time to pause after the interactive questions.) For your convenience, this outline reflects where/when within the lecture the interactive questions occur.

This lecture has 88 slides and is 94 minutes in duration.

- I. Overall approach
  - A. Determine if central vs. peripheral.
    - 1. If central, exercise approach, compensate.
  - B. If it's peripheral, determine if it's BPPV.
    - 1. If BPPV, use repositioning maneuvers.
    - 2. If not BPPV, use exercise approach.
- II. Repositioning maneuvers
  - A. Treatment for posterior or anterior canal canalithiasis
    - 1. Epley maneuver
    - 2. Roll maneuvers
      - a. Barbeque roll
      - b. Gufoni
  - B. Treatment for posterior or anterior canal cupulolithiasis
    - 1. Semont maneuver

Notes

Interactive questions — slide 20 @ 23 minutes

- III. Exercise treatments
  - A. Brandt-Daroff exercises for BPPV
  - B. Vestibular habituation exercises (VHT)
    - 1. Determine what provokes symptoms in order to determine what exercises to use for treatment.
  - C. Assessment of provocation
    - 1. Motion sensitivity quotient
    - 2. Habituation
  - D. Guidelines for treatments

Interactive questions — slide 32 @ 46 minutes

- IV. Balance and fall treatment: Developing a fall treatment program
  - A. Possible impairments
  - B. Identify risk factors for falling

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- C. Recommendations for interventions
  - D. Targeting risk factors
  - E. Effective home exercise
  - F. Progression variables

Notes

Interactive questions — slide 46 @ 65 minutes

- V. Treatment of the cervical spine
  - A. Gentle manual traction
  - B. Towel traction
  - C. Proprioception training
    - 1. Using foveal glasses or a laser pointer
    - 2. Through joint repositioning
  - D. Muscle training
    - 1. Treating muscle function
    - 2. Endurance/strength programs

Interactive Questions – slide 64 @ 77 minutes

- VI. Outcomes assessment
  - A. Measuring outcomes for
    - 1. Functional changes
    - 2. Symptomatic changes
  - B. Studies of fall prevention tactics: Measuring the outcomes for
    - 1. Gait training
    - 2. Multidimensional exercises
    - 3. Tai chi quan
    - 4. Group-based exercise
  - C. Meeting patients' goals

Interactive Questions: Slide 80 @ 89 minutes

- VII. Conclusion
  - A. Summary
  - B. Resources