Vertigo: Scientific Way...

Dizziness/Vertigo is one of the leading patient complaints reported to doctors. Vertigo is just the symptoms of an underlying disorder. The cause of vertigo should be identified and corrected for curative treatment. Historically, it has been very difficult to determine the cause of dizziness, but medical advances in the last twenty years have significantly improved the diagnosis and treatment of dizziness.

“Nothing can be done even after spending a lot of time in evaluation and examination of patients with vertigo, as their ultimate treatment is Cinnarazine or Betahistidine” as preoccupations in the 21st century have to be dropped out, because most of the causes of vertigo can be identified with an appropriate evaluation and tests conducted by a qualified clinician and once cause has been indentified, its management could be very scientific.

The trend of blaming cervical spine as the cause of vertigo in each and every patient above 45 years by observing slight spondylytic change in an X-ray has to be improved, as various studies have disagreed mild cervical spondylosis as a cause of rotatory vertigo.

Various studies in several tertiary centre have identified out common disorders that presents as vertigo. BPPV, Functional dizziness, Central–vestibular, Vestibular migraine, Meniere’s disease, Vestibular neuritis, Bilateral vestibulopathy, Vestibular paroxysmia, Psychogenic vertigo, Labyrinthitis, Perilymph fistula, Unkonwn vertigo syndromes are common disorder among the long list. Treatment of individual disorders is different, so treating these patients only with anti-vertigo drugs without indentifying its cause is irrational, illogical and unscientific.

Most patients are prescribed only some anti-vertigo medication which can only provide temporary relief from symptoms. Prescribing anti-vertigo drugs for patients with vertigo are like prescribing just a paracetamol for a patient suffering from enteric fever. Symptoms relieving drugs are continued unnecessarily even after the symptoms subside, exposing to various serious side effects of most anti-vertigo drugs.

Anti-vertigo drugs when used for long period are expected to jeopardize the vestibular compensating mechanism and induce some imbalance as these anti-vertigo drugs or vestibular sedatives act by reducing the sensitivity of vestibular labyrinth and the brain is inadequately informed about the stability of subject. So if brain is not adequately informed about body movement, it cannot take the corrective measures i.e. the requisite motor activity to stabilize the person. We all know that restoration of normal balance function is possible only by vestibular compensatory mechanism which is natural process and the medicines have practically no role in enhancing this process after the balance organs in the ear has been damaged. At the same time most of anti-vertigo drugs jeopardize this natural process, so how justified is it to use anti-vertigo drugs for longer period.

If proper history taking and clinical examination along with requisite vestibular function test are carried out, the cause of vertigo can be indentified in most patients and a suitable corrective therapy can be started which will actually reverse the pathology and cure the patients.

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