

Vertigo

The bedside assessment of vertigo

Kaski D. & Seemungal BM. Clinical Medicine, Journal of the Royal College of Physicians. Vol. 10, No. 4., pp. 402-405



Sandy Siegert
medical student Internal Medicine B
Sheba medical Center

Vertigo



- latin *vertere* =to rotate, to turn
- Illusory sensation of self or environmental rotation

= symptom not a diagnosis

Vertigo



History Taking

1. *Character*
- .2 *Duration and timecourse*
- .3 *Trigger*
- .4 *Accompanying Symptoms*

Vertigo



History Taking – Character

- systematic (illusion of movement = oscillopsia) or 'unsystematic (dizziness(
- turning vertigo (merry-go-round) or swinging (rocking like a boat(

Vertigo



History Taking – Duration and timecourse

- seconds (vestibularis paroxysmia)
- several hours (Morbus Menière (
- chronical over days and weeks) Neuritis vestibularis)
- attacks of swinging vertigo (z.B. brainstem-TIA) or
- continuity of swinging (bilateral Vestibulopathy)

Vertigo



History Taking – Trigger

- rest (z.B. Neuritis vestibularis)
- movement/positioning (z.B. Benign paroxysmal position vertigo=BPPV) or
- situations (phobic postural vertigo)

Vertigo



History Taking – accompanying symptoms

- nausea, vomiting, sweating
- tinnitus, loss of hearing
- other neurological symptoms like ataxia

Vertigo



Examination

- eye movements (Frenzel goggles)
 1. spontaneous nystagmus, Gaze-evoked nystagmus
 2. vestibular ocular reflex: **Halmagyi**-Head-impulse-test
 3. Dix-Hallpike manoeuvre
- Gait assessment (Romberg, Unterberger, Tandem)
- hearing assessment, Otoscope
- internal medicine

Vertigo



Examination

eyemovements (Frenzl goggles)

1. spontaneous nystagmus, Gaze-evoked nystagmus
→ vestibular neuritis

2. vestibular ocular reflex: **Halmagyi-Head-impulse-test**
→ cerebellar pathology, drugs

3. Dix-Hallpike manoeuvre
→ BPPV

Vertigo



Halmagyi-Head-impulse-test



Dix-Hallpike manoeuvre

Vertigo

Symptoms	peripheral vestibular	central vestibular	nonvestibular
Nausea, vomiting, sweating	pronounced	moderate	mild
Quality of vertigo	oscillopsias	oscillopsia	more dizziness
Nystagmus	One direction, Inhibited through Fixation	Variable directions, Not inhibited	No nystagmus
Loss of hearing, tinnitus	yes	no	no
Other neurological symptoms	no	yes	maybe

Vertigo-the End

