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HEAD POSITION

Chair positioning, vibrating equipment, and other factors can make visiting the dentist challenging for vestibular patients.

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Dentist's Guide to the Dizzy Patient

By Teresa Hughes, D.D.S.

Dizziness, vertigo, and disequilibrium are symptoms frequently reported to physicians. Common causes include benign paroxysmal positional vertigo (BPPV), labyrinthitis and vestibular neuritis, Meniere's disease, vestibular migraine, medications, head and neck trauma, blood-flow irregularities, autoimmune conditions, stress, and allergies.¹

Various types of trauma have been associated with traumatic BPPV, including head trauma, whiplash injury, ear surgery, or dental surgery.² BPPV symptoms may include a sense of spinning or moving typically brought on by head movement, dizziness, lightheadedness, unsteadiness, nausea, and vomiting.³

Tinnitus is also affiliated with vestibular disorders. Tinnitus can be caused by temporomandibular disorders.⁴

Dental visits are especially challenging for patients with dizziness and vertigo because dental chair positioning, equipment, and instruments can worsen their condition. Fortunately, dental office personnel can minimize patient symptoms and agitation by implementing the following protocols:



DIZZINESS PROTOCOL

- Schedule dizziness patients at their best time of day.
- Symptoms can come on suddenly, resulting in possible last minute scheduling changes.
- Offer an arm for the patient to hold while walking, as hallways and busy pattern flooring exacerbate disequilibrium.
- Accommodate a friend or family member who may accompany the patient.
- Communicate while sitting knee-to-knee and in front of the patient as much as possible. Politeness eases tension and the closeness will aid those with hearing loss and/or tinnitus.
- Speak slowly while keeping your head and arms still. Be patient as these patients tend to behave anxiously due to their physical symptoms.
- Do not move the dental chair without discussing it with the patient first. Some patients will want to sit forward while the chair reclines.
- Ask the patient for positioning feedback and always keep their head above their feet.
- Reduce light as much as possible and offer dark safety glasses.
- Empower the patient by allowing them to take breaks, if needed, by raising their hand.
- During the procedure, inform the patient when to anticipate vibration and check on their wellbeing.
- Conversation should pertain to the patient. Do not engage in side-talk, which can be distracting and cause anxiety, unless the patient initiates it to relieve tension.
- Move your operator chair and change your position to accommodate patients who cannot lie supine and/or turn their head.

THE FOLLOWING WILL ALSO INCREASE COMFORT:

- Offer a neck pillow and blanket.
- Avoid scents such candles, perfume, cologne, and air fresheners.
- Do not wear print scrubs or patterned clothing, as busy visual environments cause discomfort for people with vestibular disorders.⁵
- If BPPV is suspected to be a complication of dental treatment, refer the patient to an otolaryngologist or physical therapist for evaluation.

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