

# ON THE LEVEL

A QUARTERLY NEWSLETTER OF THE VESTIBULAR DISORDERS ASSOCIATION



INFORMATION

SUPPORT

AWARENESS

ADVOCACY



## I Got Vertigo For My Birthday

Michele Croteau's Battle With Vertigo, by Barbara Roggenbeck & Cynthia Ryan

Michele Croteau's battle with dizziness began in 1989, when she was plagued with acute episodes of dizziness ranging from general feelings of being off balance to full blown vertigo attacks. This continued for about 9 years, during which time she consulted with multiple medical specialists at some of the best vestibular centers in the country.

Michele's first episode of vertigo occurred on her 29<sup>th</sup> birthday. She was attending a friend's wedding and remembers turning to the left and standing up, then suddenly her world was spinning out of control. The vertigo lasted for hours and was accompanied by several days of dizziness and imbalance. That's when Michele sought help from her family physician, who referred her to an ENT. Her MRI, CT scan, and EEG tests were all normal. She attempted an ENG test, but couldn't complete it because of a serious intolerance that resulted in vomiting. The ENT prescribed Antivert, which did not resolve her symptoms. Michele had spent half of her career in the fashion industry working

CONTINUED ON PAGE 2

### IN THIS ISSUE

Vestibular Evaluation	4
Case Study	6
Ambassador Spotlight	7
Journaling	8
Meet Terri	9
Sponsors	9
Annual Report	10
2015 Milestones	12
2015 Supporters	13
Balance Awareness Week	
2016 Save the Date!	18
Sustaining Circle Invite	19
Research Update	20



TOP LEFT: MICHELE AND HUSBAND, TOM, VOLUNTEERING AT THEIR CHURCH; BOTTOM LEFT: MICHELE, TOM, AND MICHELE'S MOTHER, ROSEMARIE, AT HER COUSIN'S WEDDING; BOTTOM RIGHT: MICHELE & TOM VOLUNTEERING FOR UGANDA FARMERS INC.

**On the Level** is a quarterly publication of the Vestibular Disorders Association (VEDA). Information in this newsletter is not intended as a substitute for professional health care. VEDA does not recommend any particular course of treatment, clinic, or health care practitioner. The opinions expressed in these articles are those of the authors and not necessarily those of VEDA's staff, medical and scientific advisors, or board of directors. The publisher reserves the right to accept, reject, or edit any materials received for publication. No part of this publication may be reproduced without written permission. © All rights reserved.

#### BOARD of DIRECTORS

President: Sheelah Woodhouse, BScPT  
*Calgary, AB Canada*

Vice President: Louise Geib, M. Ed  
*Atlantic Beach, FL*

Treasurer: Doug Nielsen, CPA  
*Rensselaer, NY*

Secretary: Kathleen Stross, DPT  
*Pearland, TX*

Gary Breitbord  
*Holliston, MA*

Stacey Buckner, DPT  
*North Potomac, MD*

Jill Craig, MA  
*Hillsboro, OR*

Dennis Fitzgerald, MD  
*Washington D.C.*

Jack King, PhD  
*Bloomsburg, PA*

#### EXECUTIVE DIRECTOR

Cynthia Ryan, MBA  
*Portland, OR*

#### MEDICAL & SCIENTIFIC ADVISORS

Chair: P. Ashley Wackym, MD  
*Portland, OR*

Richard Clendaniel, PT, PhD  
*Durham, NC*

Joel A. Goebel, MD, FACS  
*St. Louis, MO*

Timothy C. Hain, MD  
*Chicago, IL*

Janet Helminski, PT, PhD  
*Chicago, IL*

Gary Jacobson, PhD  
*Nashville, TN*

Jeffrey Kramer, MD  
*Chicago, IL*

David Newman-Toker, MD, PhD  
*Baltimore, MD*

James Phillips, PhD  
*Seattle, WA*

Steven Rauch, MD  
*Boston, MA*

Jay Rubinstein, MD, PhD  
*Seattle, WA*

Michael Schubert, PT, PhD  
*Baltimore, MD*

Alain Semont, PhD, PT  
*Paris, France*

Neil T. Shepard, PhD  
*Rochester, MN*

Hinrich Staecker, MD, PhD  
*Kansas City, MO*

Jack J. Wazen, MD, FACS  
*Sarasota, FL*

#### BIRTHDAY VERTIGO...CONTINUED FROM PAGE 1:

for several major companies and the other half as a high school and college teacher. She also had a personal jewelry business creating custom fine jewelry. When vertigo hit, everything changed. She couldn't ride the train into New York City for her jewelry business or attend family social occasions. She never knew when an attack would hit, and when it did she was so incapacitated a friend or family member had to stay with her to make sure she could get to and from the bathroom.

Eventually her episodic dizziness transformed into chronic dizziness in the form of constant imbalance with intermittent vertigo attacks exacerbated by head and body movements, bright lights, loud noises, busy visual environments, computer screens, ceilings fans, and traveling, and also accompanied by migraine related headache



WHEN SHE CLOSED HER EYES SHE  
WOULD SEE JAGGED TRIANGULAR  
SHAPES OF A MILLION COLORS, LIKE  
A KALEIDOSCOPE ON STEROIDS.

pain that increased in intensity and frequency over time.

Life as she knew it ceased to exist, and most of her friends thought she was exaggerating because she didn't look ill. Everywhere she went people offered "medical" suggestions and diagnoses. She felt frustrated, embarrassed, and emotionally drained.

In 1990, after several years with no answers and the beginning of what was now developing into a chronic problem, Michele had further testing done at the Yale Balance Disorder Center, including another ENG test. Doctors were still unable to explain her symptoms, except the possibility that there might be a cervical connection. Again, Antivert was prescribed for vertigo, as well as Compazine to control the associated nausea, neither of which provided Michele any relief.

This chronic phase became even more challenging with the addition of new symptoms, including right sided body numbness and numbness at the back of the skull with severe migraine symptoms.

Typically a migraine would start with a knife-like pain through her left eye, and when she closed her eyes she would see jagged triangular shapes of a million colors, which she describes as “a crazy kaleidoscope on steroids.” Sometimes a migraine could bring on vertigo, other times vertigo could bring on a migraine. Both were accompanied by vomiting and residual effects which lasted for days. Basically her life had become a living nightmare.

In 1998 Michele was referred to Neurologic Associates in New York City. The examination involved a vast array of tests, including hearing tests, an MRI, balance tests including ENG and rotary chair testing, CAT scans of her temporal bones to look for any structural defects, and glucose testing, which is often performed when a metabolic inner ear disease is suspected. Michele was diagnosed with otosclerosis and hyperinsulinemia, for which she was prescribed several medications and diet modifications. Finally, some relief! Her symptoms were mitigated for about four years, although sporadic episodes of vertigo still occurred.

However, in 2001, Michele’s chronic phase took a turn for the worse. She suffered a severe attack of vertigo while looking through files at work and the daily dizziness resumed. Her neuro-otologist recommended that she continue the same regimen, even though her symptoms were becoming more difficult to manage.

In 2002, Michele sought medical treatment at New York Eye and Ear Infirmary, where she underwent hearing tests and a platform posturography test. Her medical treatment included Valium for daily symptoms, Compazine for nausea, Antivert for vertigo attacks, and vestibular rehabilitation. She was diagnosed with possible left sided Meniere’s

and an alternative diagnosis of recurrent viral neuronitis. At this point, Michele was informed that if the vestibular rehabilitation did not help there was nothing they could do for her. The vestibular rehabilitation caused her symptoms to flare and left Michele confined to her home, so she discontinued treatment.

That same year Michele was evaluated by a naturopathic doctor and another general physician in Westport, CT. She was tested for Lyme’s disease, prescribed a 30-day treatment of antibiotics, histamine drops, mold drops, vertigo heel tablets, and lipoflavonoid tablets for dizziness. Unfortunately, the treatments were unsuccessful and the daily dizziness prevailed.

Finally, in 2003, Michele was diagnosed with vestibular migraines by Dr. David Newman-Toker at John Hopkins University. Once he figured out the right formula of medications she slowly started to feel better. Car rides from Baltimore to Connecticut became easier, and even

though she still experiences severe migraine pain and occasional brief episodes of dizziness, she is able to function and even be productive.

Finally, after 15 years of searching for relief, Michele has found an effective regimen for controlling her debilitating vestibular migraine symptoms. She credits Dr. Newman-Toker with her recovery success, elevating him to the height of “superstar.” Throughout her vestibular journey Michele’s husband, Thomas, and best friend, Joanne, have stood by her side and supported her. Michele’s story is yet another example of the importance of getting an accurate diagnosis, which starts with finding a qualified vestibular specialist. Thanks to Dr. Newman-Toker, and all of VEDA’s professional members, for their service to the vestibular community.

AFTER 15 YEARS,  
MICHELE FOUND  
RELIEF FROM  
HER VESTIBULAR  
MIGRAINE  
SYMPTOMS, THANKS  
TO SUPERSTAR,  
DR. DAVID-  
NEWMAN TOKER

# What To Expect During Your Vestibular Evaluation

By Cammy Bahner, M.S., CCC-A



Seeking appropriate medical attention for dizziness and/or imbalance can be an overwhelming task for many patients. What kind of doctor should I see? Will s/he be able to figure out what's causing my dizziness? How will it be treated? What kind of tests will I have?

There are many tests that can help your physician determine why you are feeling dizzy. To help you better understand what to expect during your vestibular evaluation, we will explore a few of the more common diagnostic tests for dizziness.

## VIDEONYSTAGMOGRAPHY (VNG)

Videonystagmography (VNG) is the most common vestibular test. VNG utilizes cameras that are imbedded into goggles to monitor and measure eye movements. Specifically, a VNG is a series of several tests that will help the medical professional determine how well your eyes communicate with your inner ear balance system and your brain. While wearing the goggles, you will be asked to perform several tasks while watching a screen. These tasks are very simple, but will yield important information about how well your eyes are communicating with your brain. The next step in the VNG process is for the examiner to assist you into several different postural positions. This helps to determine whether a change in the position of your head and/or body will evoke the dizzy symptoms. The final VNG test is known as caloric irrigation. During

calorics, the examiner will put either warm or cool air (or water) directly into one ear at a time, during which you may experience a "spinning" or "floating" sensation. The examiner will perform this procedure a total of four times, to determine if your inner ear balance organs are functioning equally when compared to each other. The entire VNG should take less than one hour to complete.

## ROTARY CHAIR

The rotary chair test provides additional information about a patient's vestibular system. During the rotary chair test, you will be seated in a comfortable chair with security straps to keep your body and head stable during the rotations. Your eye movements will be monitored during rotations using the same goggles that are used in the VNG. The chair spins at various speeds throughout the test while the goggle cameras record eye movement in response to the spinning. The rotary chair test aids in diagnosing vestibular problems by yielding information about how well the balance systems are functioning.





## VIDEO HEAD IMPULSE TEST (vHIT)

vHIT is another common test used to evaluate your vestibular system. Once again, you will wear a lightweight goggle with a camera and motion sensors built in. You will be instructed to focus on a target in front of you while the examiner will assist you in making small, quick, random head movements, called impulses. When your head moves to the left your eyes should move to the right. This reflex, called the Vestibulo-Ocular Reflex (VOR), keeps our eyes on a stationary target while we move our head and allows us to read a sign while we are walking. vHIT measures and analyzes this reflexive eye movement and provides the examiner with immediate information about whether your symptom of “dizziness” is

caused by one (or both) inner ear vestibular systems. The entire process takes less than 10 minutes.

There are several other tests that your physician may order as well, but VNG, Rotary Chair, and vHIT are some of the most common tests used to evaluate the inner ear vestibular system. They will provide your physician with valuable information regarding how well your vestibular system is relaying information to your brain and other parts of your body and will help your physician to make appropriate recommendations to treat the underlying problem causing the dizziness.

BROUGHT TO YOU BY MICROMEDICAL TECHNOLOGIES

## Ambassador Spotlight

By Verity Joyce



VERITY FORCED HER BRAIN TO LEARN TO SWIM AGAIN AFTER SURGERY FOR MENIERE'S DISEASE.

I have been deaf since I was a baby and I've had balance problems from the age of six. At 11 years old I was diagnosed with Meniere's disease.

I underwent surgery when I was 17, which was designed to destroy my balance system while

preserving any remaining hearing, during which I had 42 intra-muscular streptomycin injections. Ultimately the surgery was unsuccessful.

Prior to my surgery I was ranked 3rd in the world for (high school) Senior Deaf Women in the 200 meter backstroke, but following the injections I was unable to swim without knowing which way was up. I forced my brain to learn to swim again, but never got back in the rankings, which led to years of learning to deal with loss and grief.

The neuro-plasticity I learned through my vestibular rehabilitation helped me on land, and kick started my career in physiotherapy and later psychological therapy. As such, I developed a daily tool box to manage my symptoms, particularly related to my vision problems.

I become a VEDA ambassador because I am keen to encourage people to find a way to become masters over their lives, even when what they feel and see seems such a muddle, as this can make them doubt themselves and their identity.

CORRECTION: IN THE WINTER 2016 ISSUE OF ON THE LEVEL, SUSAN WHITNEY WAS ACKNOWLEDGED AS A CHAMPION OF VESTIBULAR MEDICINE, BUT THE PHOTO IN THE PRINT EDITION WAS OF SUSAN HERDMAN. WE SINCERELY APOLOGIZE FOR THE ERROR AND THANK SUSAN WHITNEY FOR HER MANY CONTRIBUTIONS TO THE VESTIBULAR COMMUNITY.

# An Old Drug Makes A Big Difference

A collaboration with Dr. Joel F. Lehrer and his patient, Barbara Strongin (with Sherron Laurell)

Barbara Strongin has struggled with vestibular problems for over fifty years. Few treatments had provided her with relief, but she had learned to cope with her symptoms.

Barbara suffered a mild head injury when she was three years old, along with hospitalization for severe dehydration from an unknown virus, and has had spinning and non-spinning dizziness since that time. Barbara's symptoms included positional vertigo, a sensation she calls "swimminess," and imbalance, which at times could be quite severe and has been intermittently present her entire life, with positional vertigo episodes lasting from four to nine hours.

Barbara initially consulted with Dr. Joel F. Lehrer, MD., F.A.C.S., a specialist in Otology/Neurotology, twenty-five years ago, but never followed up with him because her symptoms came and went, and she was unwilling to endure some of the tests

required to ascertain a proper diagnosis. Then, on the night of February 16, 2014, Barbara awakened with right ear pain, fullness in the right ear, and severe imbalance. Her primary doctor treated her with Bactrim, Levaquin, Benadryl and Antivert; none provided any relief. She continued to have a lingering sense

of fogginess, and while the symptoms would occasionally subside for several days they were unpredictable. Her ear pain was sharp at times, an ache at times, and a deep fullness at other times. Although ear "fullness" is not uncommon in patients with vestibular disorders, ear pain is less common, and can occur even with a normal examination of the outer and middle ears. Barbara's symptoms of earache and fullness, and severe imbalance continued through February and March. In early April, she turned again to Dr. Lehrer for help.



BARBARA CREDITS HER HUSBAND, ROGER DIXON, AS A CONTINUAL SOURCE OF STRENGTH AND SUPPORT

During that visit Barbara described a dreadful and relentless imbalance that occurred even when she was still, along with ear pain and fullness that were nearly constant. She did not look "sick," which is typical of most vestibular patients and can throw off both the doctor and their family. It is also a source of great distress to the patient, who may feel anxious and terrified since nothing can be found to explain their symptoms, or relieve them.

When Dr. Lehrer originally consulted with Barbara 25 years earlier her symptoms included both spinning and non-spinning vertigo, but this time she described a swimmy feeling but no spinning. There was no evidence of spontaneous or positional nystagmus, so disorders such as vestibular neuritis and BPPV were ruled out. Barbara's imbalance was confirmed via the Quix and Romberg Tests.

The Quix Test, described by Professor F.H. Quix in 1924, and updated by Professor C.W. Hart in 1983, is performed much as police officers do when examining a driver for being intoxicated. The feet are together, the chin is up, and the arms and index fingers are outstretched. One



DR. JOEL F. LEHRER

looks for a sway or shakiness as abnormal findings. It is more sensitive than the Romberg Test, which is also performed with the feet together but with the arms at the sides or crossed over the chest. In Barbara's case, there was slight shakiness on the Romberg test and a sway to the right on the Quix test.

After a series of other diagnostic tests Dr. Lehrer narrowed his consideration to the less understood non-spinning vestibular disorders. The most common of these in his practice are Nucleo-Reticular Vestibular Syndrome (NRVS), disorders of the inner ear fluid system, Perilymphatic Fistula (PLF) and Perilymphatic Hypertension (PLHT). Ultimately Dr. Lehrer determined that NRVS was the cause of Barbara's condition.

NRVS was first described in the European literature in 1959 as a syndrome localized in the brain stem that can cause both spinning

BARBARA  
CREDITS  
DR. LEHRER  
WITH "GIVING  
HER BACK  
HER LIFE."

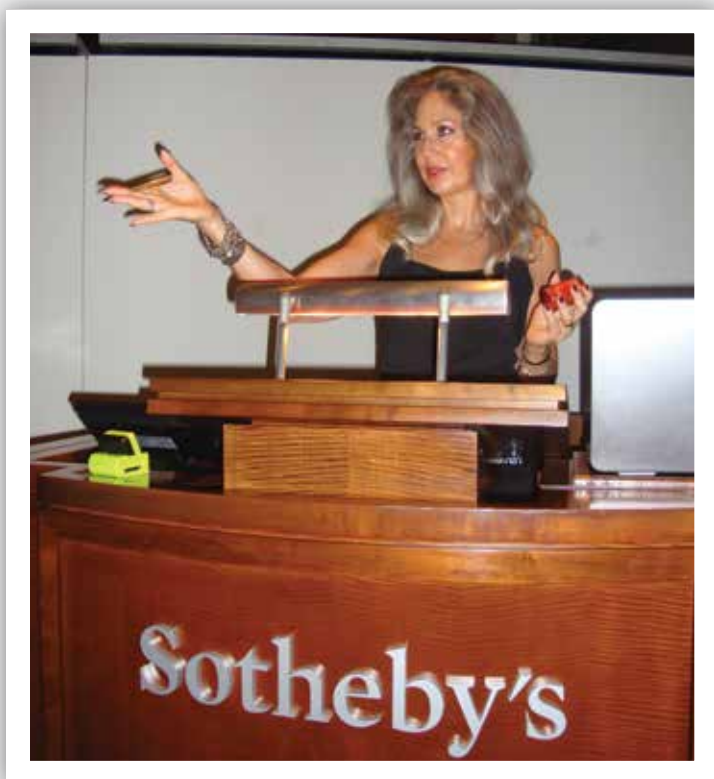
and non-spinning symptoms. Dr. Lehrer began using the drug Cyproheptadine (CH) (brand name Periactin, a Merck product) in the early 1970's to treat NRVS after Gordon Gilbert's paper in *The Journal of the American Medical Association* in which he suggested a connection between vertigo and migraine. CH is an anti-serotonin and an anti-migraine drug, although it is better known for being an antihistamine.

According to Dr. Lehrer, who has done research on the distribution of Serotonin (5HT) in the brain, the brain stem is rich in 5-HT and neurons that utilize 5-HT in transmission. In 1976, he posited that the brain stem, which receives vestibular impulses, could be the site of pathology in dizzy patients who respond to CH. More recently Halbertadt and Balaban have described 5-HR transporter fibers as being most dense in certain vestibular nuclei in the brain stem.

When Barbara was examined on April 7, 2014, a hearing test was performed as well as tympanometry, both of which were normal. Fistula testing was negative. CH was prescribed for her imbalance and proved to be successful in controlling her symptoms.

Barbara's balance has improved considerably. Her ear pain resolved over a period of months. Follow up balance examinations were normal. In November, 2015, she reported that she was 90% symptom free on a small dose of CH.

Barbara credits Dr. Lehrer with "giving her back her life." If she is tired she may experience blurry vision but her symptoms are nothing compared to what she suffered in the past. She was in a bad way when she went to see Dr. Lehrer in 2014 and is now able to work and function normally. The positional vertigo that she suffered comes and goes but that is also much decreased since she has begun taking CH. She is deeply grateful to Dr. Lehrer for helping her get her balance back, for the first time in her life.



BARBARA IN HER ROLE AS DIRECTOR OF ADMINISTRATION OF  
SOTHEBY'S INSTITUTE OF ART



# Journaling Your Vestibular Experience

By Kelly Gregory and the Vestibular Disorders Association



KELLY GREGORY,  
VESTIBULAR PATIENT

Journaling can help you work through the emotional challenges you face as a result of your vestibular disorder. Journaling is not a perfect science. Try to stick with it long enough to see if it is helpful to you. There is no one "correct way" to journal. The following instructions can help you get started. Don't hold back or get caught up in

what to say or how to say it. Just let it flow.

1. Choose an experience that is emotionally difficult for you and that you have a hard time talking about or thinking about. It may be the point at which you were diagnosed with a vestibular disorder, or perhaps your first episode of dizziness, for example.
2. Tell yourself a story in which you describe both the experience and your feelings about it. Don't hold back. What has your illness taken away from you? How have you changed? Have you lost support from your family? Your job? How does that make you feel?
3. Don't worry about details. Spelling, grammar and punctuation aren't important. Your writing doesn't have to be perfect. It's more important to stay true to your emotion.
4. Write for 15-20 minutes without stopping or re-reading until the time has passed. Try to write continuously.
5. Write for 4 consecutive days.
6. On the second or third day, if you haven't already, write about

how this experience has impacted your life. How did it shape you? How has it affected how your life has evolved? What impact has it had on your relationships? On your family life? Be honest with yourself.

7. Notice your feelings as you write and afterwards. You may feel upset for a couple hours or even a couple days. This is normal.
8. Your journal is yours and private. You may want to let your family members know about it and ask them to respect your privacy.
9. You can use a hard copy (paper) journal or your computer. If you are using a hard copy journal you may want to draw pictures or cut out images from magazines, etc. and paste them into your journal.
10. If you are having a hard time beginning, relax, take a deep breath, and get into a comfortable position. Let images flow through your head. The thoughts will come.
11. If you have vision or cognitive problems, consider keeping a voice recorded journal.

\*Become a VEDA Sustaining Member and receive a complementary journal and additional guidance on how to track your symptoms.





## Meet Terri



VEDA is excited to welcome Terri Baltus to our team where she will be serving as our Development Director and leading the Balance Awareness Week campaign. Terri has over 20 years of experience working in the development field for health-related non-profit organizations. She held the position of Chief Development Officer for the American Tinnitus Association and the National Psoriasis Foundation, where she worked with many patients, physicians and donors. She began her development career with the American Cancer Society, where she developed and directed the Relay For Life (RFL) program for the western United States, then went on to develop and lead the International RFL program. Terri is a third generation Oregonian and has four grown daughters and a rock & roll musician husband, Tim.

### Balance Awareness Week Sponsors

You can sponsor Balance Awareness Week, our most visible and fun activity of the year!

WELCOME BACK RETURNING SPONSORS & PARTNERS!

PRESENTING SPONSOR



CORPORATE PARTNER



GOLD SPONSOR



PLATINUM SPONSOR



BRONZE SPONSOR

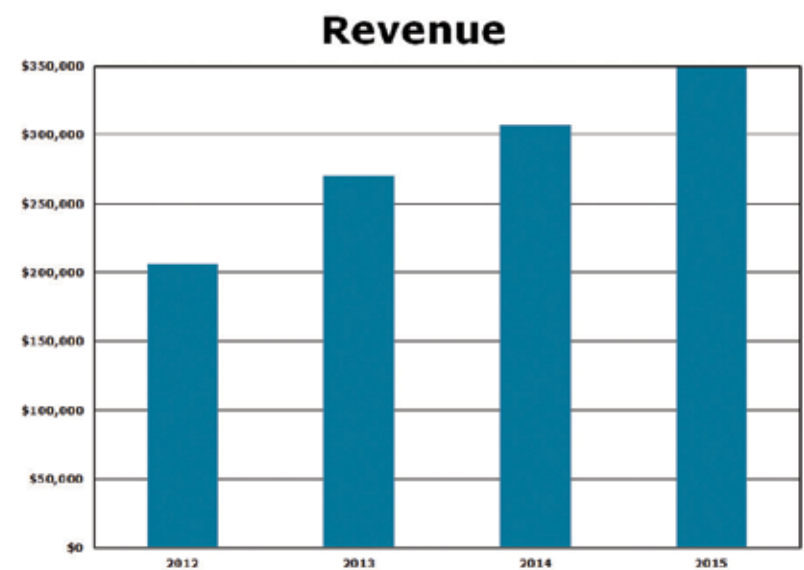


To join with VEDA as a 2016 Balance Awareness Week Sponsor, contact Terri Baltus at (800) 837-8428 or [terri.baltus@vestibular.org](mailto:terri.baltus@vestibular.org)

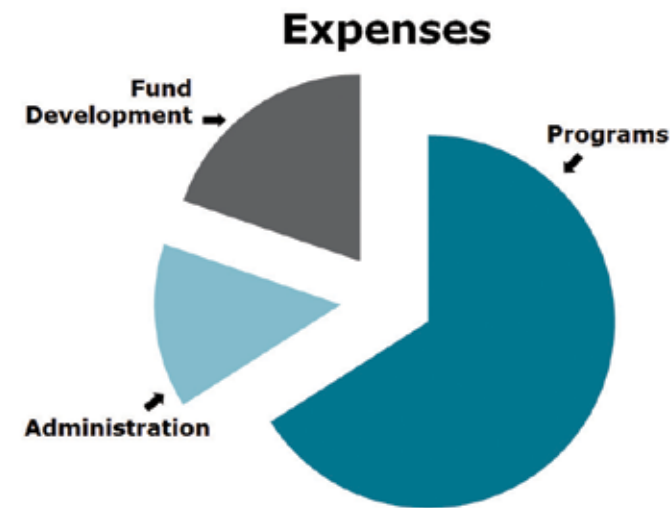
\*If you know a company that you think might be interested in sponsorship, let us know!

# 2015 Annual Report

## FINANCIAL REPORT



VEDA CONTINUES TO GROW BECAUSE OF YOU!

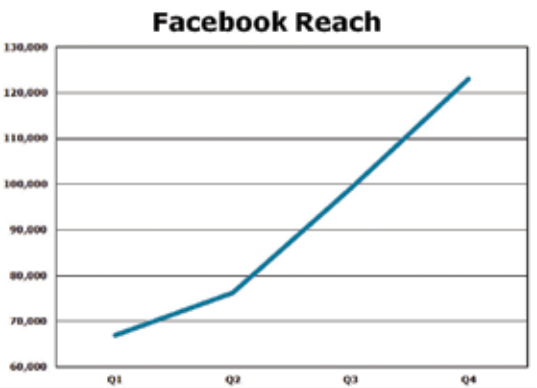
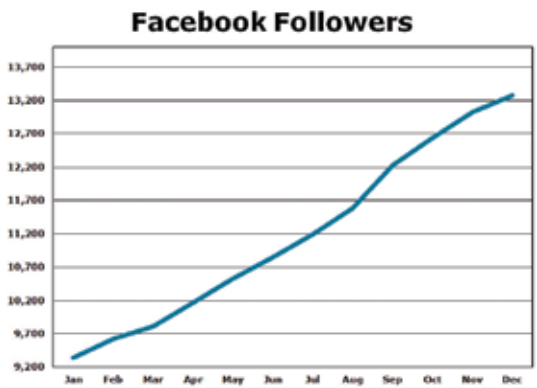


THE MAJORITY OF YOUR GIFTS GO DIRECTLY TO HELP PATIENTS

## OUTREACH



WITH YOUR HELP, WE'RE ABLE TO PROVIDE EDUCATIONAL RESOURCES & SPECIALTY REFERRALS TO NEW PATIENTS



OUR COMMUNITY IS GROWING!

# 2015 Milestones

## FAMILY SUPPORT NETWORK



## RESEARCH



# Thank You For Your Support!

## GUARDIANS

**\$5,000 - \$10,000**

Susan Papa  
Turn 2 Foundation,  
in honor of Bryce  
Salvador

## FRIENDS -

**\$1,000-\$4,999**

Anne E Leibowitz  
Fund  
Dr. Deanne Bonnar  
Stacey & Jason  
Buckner\*  
Michael Cardozo  
Elizabeth Commerford  
Christina Duncan  
Scott Duncan\*  
Mr. and Mrs. Leroy  
Fadem  
Dr. Dennis Fitzgerald  
Louise Geib  
Patricia Gerend  
Jennifer Gittins-Harfst  
Greater Horizons  
Claire Haddad\*  
Sue Hickey & Sheldon  
Klapper  
Merilee Holst  
Lester Knight

Dr. Jeffrey Kramer

Kurz Family Fdn.  
Etrily Laitphlang  
Legacy Health  
Isabel Leibowitz  
Lew Leibowitz  
Louis Leibowitz  
Charitable Trust  
Madison Community  
Fdn  
John Miller  
Kathleen O'Connell  
Porphyry Road Fdn  
Dr. Grayson Rodgers  
Alex Schmelzer  
Steven Smith  
Teespring, LLC, in  
honor of Marissa  
Christina  
Dr. P. Ashley Wackym

## PATRONS -

**\$500-\$999**

Andrew Aletersohn  
Jorita Black, in honor  
of F. Owen Black  
Jennifer Briscoe  
Barbara Cantacuzino  
Joyce Chadderdon  
Dr. Gaye Cronin  
Matthew Donachie

Karla Droste

Paul Fichera  
Rev. Sue Fisher  
Seeger  
Stephen Fisher  
Jeffrey Fuchs  
Janit Greenwood  
Patricia Hackmiller  
Thomas Hall  
Rose Herrera  
Alice Hirsh  
Ellis Kern  
Nancy Kimball  
Mary Mattson-  
Kenworthy  
David Moss\*  
Anne Rorimer  
Glenn Schweitzer  
Vicki Seppell  
Mina Stachowiak  
Kathleen Stross  
Tao of Herbs  
Lawrence Toole\*  
Nancy Waliszek-  
Messinger  
Karen Wallin  
Sheelah Woodhouse

## ADVOCATES

**\$250 - \$499**

Larry Bowman  
Dale Brockman  
Alice Brumbaugh  
Delbert Bryant  
Lora Buck  
Toni Campoamor  
Sanjay Dave  
Sherrie Derr  
Equilibrium Balance  
Performance Center  
Marsha Frazier  
Sally Frostic  
Rebecca Gale  
Barry Goldman  
Veronica Howard  
George Ide  
Amy Jaffe  
Dr. Gary Kaihara  
Allan Keene  
Angelene Kenton  
Mary King  
Victoria LeFevre  
Donna LeGrow\*  
Kathleen Makenas  
Julie Marshall  
Gennaro Marsico  
Cliva Mee  
Dr. Robert Molinari  
Marsha Moore



>750  
MEMBER FORUM  
POSTS



>1,500  
VOLUNTEER  
HOURS



NEW WEB  
PAGE ABOUT  
DIETARY TIPS

## CONCUSSION



## BALANCE & AGING



"VEDA HELPED ME GET THROUGH ONE OF THE WORST PERIODS OF MY LIFE. I WAS SCARED, DESPERATE, AND I FELT ALONE. READING STORIES ABOUT HOW OTHER PEOPLE COPE HAS PUT ME ON THE ROAD TO FULL RECOVERY. I WILL ALWAYS HAVE MENIERE'S, BUT WITH PEOPLE LIKE THE WONDERFUL FOLKS AT VEDA, I FEEL LIKE I CAN MAKE IT." - PATIENT

**YOU MADE THIS POSSIBLE!**

CONTINUED ON PAGE 14



Doug Nielsen  
Iris Osman  
Barbara Phillips  
Kristen Romano  
Linda Roth  
Paul Schweitzer  
Edwin Siegel  
Dr. Thomas Sollas, Jr.  
Amol Tembe  
Gerda Wassermann  
Lawrence Williamson  
Lynne Zank

ASSOCIATES  
\$100 - \$249

Diana Allowitz  
Amazon Smile  
Foundation  
Wayne Archambo  
Kalyn Asher  
Scott Audette\*  
Ian Ball  
Lizbeth Barnea  
Pat Barry  
Samantha Bartling  
Tom Basista  
Michael Bayroff  
Kevin Belli\*  
B. Richard Benioff  
Dr. Francis Bergin  
Stuart Berman  
Sheila Bernard  
Michael Billmire  
Therese Bivona  
Frank Bonnell  
Cheri Bosserman  
Liza Botkin  
Kelly Bramwell  
Paul Brandenburg\*  
DeDe Brant  
Bravelets, in honor of  
Kelly Helsel  
Patricia Breglio  
Sheila Brennan  
William Brewer  
Blaine Briggs  
Judy Brown-DuPaul  
Francine Burnham

Alan Butchman  
Silvia Canessa  
Care Connections,LLC  
Margaret Casagrande  
Dr. Virginia Casper  
Nancy Chadderdon  
Marsha Charles  
Kathy Chauvin  
Thomas Chester  
James Chiesa  
Jeanette Clark  
Nina Cohen  
Patricia Cohen  
Bruce Coleman

Dr. Vincent Desiderio  
Joseph DeVerna  
Cyndy Dowling  
Michael Durante  
Dr. Mona Dworsack-  
Dodge  
Andrew Edmonds Jr.  
Jean Eldred  
Heloise Erdman  
Ellen Errigo  
Carrie Farmer  
Holly Fisher  
Jo Fisher  
Norma Flynn

Carolyn Glasier  
Clare Glassell  
Helen Glunz  
Wendy Godfrey  
Dr. Joel Goebel  
Robert Golden  
Eduardo Gonzalez  
Dottie Gordon  
Eric Gordon  
Jeff Gordon  
Barbara Gow  
Doris Graf  
Jeffrey Gray  
Dianne Gregg  
Cathy Grochowski  
Eric Gruseke  
Karen Guilfoyle  
Kristi Haigh  
Dr. Courtney Hall  
Alice Hampton  
Meg Haney  
Mary Harper-McAvoy  
Joyce Havens  
John Headley  
Amanda Heaton  
Polly Heninger  
LaRae Hicks  
Margaret Higgins  
Reuben Hill Jr.  
Jennifer Hiller  
Carl Holgate  
Hope Network Neuro-  
Rehab  
Vicki Hotte  
Dr. Walter Hunt  
Kip Hunter  
Randy Hustvedt  
Beth Ibarra  
Linda Johnson  
Joyce Jones  
Richard Jorgenson  
Tess Kastning  
Susan Kellett  
Donna Kiley  
Anne Kirchheimer  
Ellen Kirchheimer  
Deborah Koch  
Ellen Korpi  
Lawrence Kreicher

Beth Kroetsch  
Ilyne & Richard Kuper  
Dr. Gerald Labriola  
Lois LaTorra  
Gary LaTour  
Sherron Laurell  
Diane Lee  
Tammara Leighton  
Patricia Lenke  
Patrick Leoni  
Linda Lerner  
Victoria Lerner  
Jeanne Lese  
M. Louise Liberati  
Kay Long  
Eileen Lumb  
Walter Lyon  
Margaret Madewell  
Arlene Magdall  
Leslie Maitland  
Mike Malloy  
Margo Mann  
Kenneth Marks  
Clara Martinez  
Louis Mauro  
Jeffrey McCarthy  
Colleen McCourtney  
Cathleen McGarity  
Hugh McLean  
Bernadette McNamara  
Keavy McNaughton-  
James  
Wendi McNeilly  
Ian McWilliams  
Nicholas Messerich  
Deborah Miller\*  
Stephen Miller  
Connie Monroe  
Suzanna Montañó  
George Mazingo  
Deborah Munno  
Marcella Munson  
Ron Murphy  
Natasha Narvaez  
Keith Nelson  
Robert Nentwig  
Susan Nielsen  
Joanna Nilsen  
Joan Noguera

Stephen Nowell  
Susan O'Connell  
Aingeal O'Mahony-  
Guyn  
Janice Olson  
Paul Olson  
Lynda Oros  
Alice Owen  
Dr. Bhernee Paragas  
Margaret Paul  
Susan Paul  
Anthony Peacock  
Fredric Pement  
Kathy Perigloisi-Miller  
Dr. Robert Peterka  
Janet Phillips  
Tammy Phillips  
Barbara Pike  
Gary Pitts\*  
Irwin Polls  
Thad Fitzhenry  
Albert Powell Jr.  
Kristine Pruyn  
Muriel Quinn  
Sheila Rabinowitz  
Julie Radicevic  
Laurie Rainey  
Laura Renker  
Luis Rey  
Pamela Rideout  
Victoria Roberts  
Gary Rogers  
Charles Rooks  
Mordecai Rosenfeld  
Jocelyn Ross  
Terri Rothstein  
Molly-Jane Rubinger  
Sarah Rutherford  
Gloria Sagarsee  
Janine Saito  
Robert Santamaria  
John Sapienza  
Peter Scaperotta  
Elizabeth Scheuerman  
Marjory Schollhamer  
Dr. Donna Schroeder  
Patricia Schultz  
Josette Schuur  
Paul Schwartz

Donald Seitz  
Jane Selby  
Margo Simmons  
Marni Simon-Blake  
Rebekah Sims  
Louis Sloss Jr.  
Andrew Small  
Dean Smith  
Renee Snyder  
Cheryl Soldaat  
Linda Sorg  
Jesse Sowell  
Steven Spears  
Rev. Andrew Stanko  
Tony Staser  
Karen Steinberg  
Mary Stephenson  
Carlos Stern  
Margaret Stika-Walsh  
Helen Stoll  
Lawrence Stone  
Ruth Stone  
Strive Physical  
Therapy  
Barbara Strongin  
Manish Sumant  
Dr. Jean Swangren  
Julie Takeda  
Margaret Tetreault  
The Pittsburgh Fdn  
Rusty Thomasson  
Cheryl Till  
Ascensina  
Tookmanian  
Susan Trilling  
Dr. Jordan Tucker  
Susan Tucker  
Ronny Udelson  
Dr. Stuart Urbach  
Leslie Vail  
Kevin Varette  
Carla Velders  
Vertigo Brewing  
Silvia Vidal  
Vicki Vinson  
Shirley Votaw  
Susan Walker  
Dr. Priscilla Wallack  
Mildred Walter

Dr. Jack Wazen  
Fred Wesley  
Jeannee Wethe  
Wendy Wetherall  
Jeff White  
Burma Williams  
Douglas Williams  
Janet Winne  
Bruce Wixson  
Lottie Wolff  
David Woodhouse  
Patricia Wright  
Marie Yang  
John Yanota  
Susan Yeaw  
Maureen Young  
Linda Zonana  
Barbara Zywicke

SUSTAINING  
CIRCLE  
MEMBERS  
Rev. Cynthia Abrams  
Coral Armstrong  
Brenda Berger  
Gioia Bonomi  
Adel Brown  
Margaret Cameron  
Robert Carroll  
Donna Conboy  
Clifford Coss  
Chet Cox  
Dennis Cregan  
Patricio Garza  
Dr. Sheldon Goodman  
Jill Gordon Craig  
Susan Gough  
Judy Graessle  
Thomas Harman  
Sally Hovey  
Douglas Huffman  
Marielena Kamienski  
Beatrice Kidwell  
Cynthia Killam  
Arthur Nicolet  
Terri Peter  
Shelly Pryor  
Edie Redmann



Margaret Corjay  
Marion Coughlin  
Elizabeth Craig  
Bernd Crasemann  
Robert Curtis  
Elizabeth David  
Dori Ann Davis\*  
Dr. Dana L. Day  
Michele Degan  
Dr. Tânia Delgado  
James DeMaio  
Mark DeMaio  
Judy Dempsey  
Joan DeNigris

Gloria Fox  
Col. Lester Frazier  
Larry French  
Kenda Fuller  
Mark Gallagher  
Margaret Garman  
Beatrice Geib  
Garth Gelster  
Bernard Gerbarg  
Johanne Gibson  
James Gilbert  
Dr. Kathleen Gill-Body  
James Gill Jr.  
Diana Giuseppone

Rebecca Rubin  
Cynthia Ryan  
Gemma Saccasan  
Lynn Severance  
Randolph Szabla  
Janis Thompson

CORPORATE  
PARTNER  
Otonomy, Inc.

BALANCE  
AWARENESS  
WEEK  
SPONSORS

balanceback  
Micromedical  
Technologies, Inc.  
Otometrics  
LifeStyle Physical  
Therapy  
Fitterfirst  
Otonomy, Inc.  
POA Pharma North  
America  
Boys Town National  
Research Center  
BKS Iyengar Yoga  
Assoc  
Scan Health Plan

IN-KIND  
DONORS  
Canadian Academy  
of Audiology  
North American  
Seminars

MATCHING  
GIFTS  
Honeywell Int’l  
Charity  
AARP  
Microsoft  
Nike, Inc.  
GE Foundation

Pioneer Investments  
Grainger Matching  
Charitable Gifts  
Program  
Merck Foundation  
Silicon Valley  
Community Fdn  
Phillips 66  
bhp Billiton  
Verizon Fdn  
The Capital Group  
Companies Charitable  
Foundation

BALANCE  
SOCIETY  
Robert Ulmer  
Kathleen Deming  
Kathleen O’Connell  
Marjorie Schnapp

BALANCE  
AWARENESS  
WEEK  
FUNDRAISERS  
Kelsey Quam  
Anne Kirchheimer  
Jill Gordon Craig  
Janit Greenwood  
Melissa Bosserman  
Lori Perkins  
Tony Staser  
Joyce Knutson  
Gary Breitbord  
Stacey Buckner  
Monica Dietrich  
Tony Staser  
Kristen Janky  
Doug Nielsen  
Sharon Haldeman  
Jessica Simpson  
Kelly Helsel  
Etrily Laitphlang  
Cynthia Ryan  
Glenn Schweitzer  
Dizziness and Balance  
Support Group of  
Western New York

Fionn MacCool  
P. Ashley Wackym  
Sandra Roberts  
Sharyn McWilliams  
Louise Geib  
Tony Staser  
Mary Ziegler  
Dennis Fitzgerald  
Jennifer Baumgartner  
Sheelah Woodhouse  
Katie Mahoney  
George Ide  
Claire Haddad  
David Morrill  
Rose Herrera  
Frances Connolly  
Bonni Kinne & the  
Grand Valley State  
University Dept of  
Physical Therapy

HOSPITAL &  
CLINIC MEMBERS  
LifeStyle Physical  
Therapy  
Neuromotion  
Physiotherapy Clinic  
STARS Sports Therapy  
& Rehab Svcs  
New York Eye & Ear  
Infirmary  
Pacific Physical Therapy  
Saint Elizabeth Sports  
and Physical Therapy  
Saint Francis Rehab and  
Sports Medicine  
Utah Valley Regional  
Medical Center  
360 Balance and  
Hearing  
Active Life and Sports  
Physical Therapy  
Alexian Rehabilitation  
Hospital  
Aspirus Wausau  
Outpatient Therapies  
Atlantic Rehabilitation  
CBI Health Group

Calgary Chinook  
Center for Muscle &  
Joint Therapy, Inc.  
Mary Free Bed Rehab  
Hospital  
NCH Healthcare System  
North Cypress Medical  
Center  
Northeast Rehabilitation  
Hospital  
Provena St. Joseph  
Sports Injury & Rehab  
Center  
Saint Barnabas Medical  
Center  
Salem Hospital Regional  
Rehabilitation Center  
The Balance Center at  
Westchester Medical  
Center  
WWS Physical Therapy,  
Inc.  
Kadlec Medical Center  
Outpatient Therapy  
Performax Physical  
Therapy  
University of Minnesota  
Med Center, Rehab  
Services  
Balance & Neurological  
Physical Therapy  
Idaho Elks Hearing &  
Balance Center  
Swedish  
BalanceMD  
Barr & Associates  
Physical Therapy  
Cooperative  
Performance and  
Rehabilitation  
Ear and Skull Base  
Center  
Fyzical Therapy and  
Balance Centers of  
Chicago  
FYZICAL Therapy and  
Balance Centers of  
Hazleton  
Gordon College Center

for Balance, Mobility  
and Wellness  
Hazelwood  
Physiotherapy Clinic  
Marion General  
Outpatient Physical  
Therapy  
Phelps Memorial  
Hospital - Physical  
Medicine  
Rehab Connection  
Saint Charles Health  
System  
Sharp HealthCare  
University of Michigan  
Vestibular Testing  
Center

University of Wisconsin  
Hospital and Clinics  
Wellness of Park Ave  
Aurora BayCare  
Cameron Hospital  
Rehab Services  
Complete Balance  
Solutions  
Duke University Medical  
Center  
Saint Luke’s  
Rehabilitation Institute  
Willow Grove Physical  
Therapy  
San Ramon Regional  
Medical Center



A COMPLETE LIST OF 2015 DONORS  
CAN BE FOUND ON OUR WEBSITE AT  
VESTIBULAR.ORG/ANNUAL-REPORT



\*Includes a matching gift.



# SAVE THE DATE!

## BALANCE AWARENESS WEEK

### SEPTEMBER 12-20, 2016



#### PAID ADVERTISEMENT



**spc-flakes®** are specially processed cereals that are made with a unique and patented production method. SPC is an abbreviation of "Specially Processed Cereals". spc-flakes may be used for the dietary management of vestibular disorders and meniere's disease amongst other conditions.

**Call 855-416-6826 to order.**

Mention "VEDA" to receive a 15% discount.



Visit [www.poapharmana.com](http://www.poapharmana.com) to learn more.

Contraindications: Not to be used by gluten intolerant individuals or those sensitive or allergic to oats.

VEDA does not recommend nor endorse any product or service.

"I have had unilateral meniere's disease for 10 years. I skeptically started on this product in July, 2015. My disease is at the stage that my attacks are less frequent but the pulsating tinnitus is very uncomfortable, loud and the duration may be up to 6-10 hours. I need to take benzodiazepine to cope.

I can honestly say that ingesting 1/4 Cup of spc-flakes three times each day has nearly alleviated the loud pulsating "gong". My head feels better and I have no vertigo regardless of the direction in which I turn my head. This was after 2 weeks of using spc-flakes! I can only imagine how I will feel after a month. Best news is this is a medical food without any side effects." Carol M.



# YES! I WANT TO HELP PEOPLE SUFFERING FROM VESTIBULAR DISORDERS.

**VEDA is entirely supported by donations and membership dues.  
Your support helps VEDA provide information on vestibular disorders to thousands of people every year. Thank you!**

You can make a donation to support VEDA's life-changing work online at [vestibular.org/otl](http://vestibular.org/otl) or send your payment to 5018 NE 15th Ave, Portland, OR 97211 with the enclosed self-addressed envelope.

## **Donation:**

- ☐ \$25 ☐ \$50 ☐ \$100 ☐ \$150 ☐ \$200 ☐ \$250  
☐ Other \$\_\_\_\_\_ (e.g. \$10/mo.)  
☐ **I would like to join the Sustaining Program and contribute this amount every month**  
☐ Please make my donation anonymous

## **Method of Payment:**

- ☐ Check (payable to VEDA in US Dollars)  
☐ Visa ☐ MasterCard ☐ American Express

## **Options:**

- ☐ Please send me information about including VEDA in my Will or Estate Planning.  
☐ My company will match my donation.  
Company Name: \_\_\_\_\_

NAME \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

EXP. DATE \_\_\_\_\_ CSV CODE \_\_\_\_\_

Thank you for supporting the Vestibular Disorders Association! With your help we can reduce the time it takes to accurately diagnose vestibular disorders and improve treatment outcomes, helping patients live happy, productive lives.

## SKIP THE MOVIE LINE AND GET YOUR TICKET TO JOIN VEDA'S SUSTAINING CIRCLE



WHEN RENEWING YOUR MEMBERSHIP,  
MAKE YOUR GIFT A SUSTAINING GIFT.  
\$10 DOLLARS A MONTH GAINS YOU  
ONGOING ACCESS TO A COMMUNITY THAT  
UNDERSTANDS YOU, IS THERE FOR YOU,  
AND IS ABLE TO SHARE PERSONAL  
EXPERIENCES AND SUCCESSES IN  
MANAGING YOUR SYMPTOMS!



## DOES HEARING LOSS LEAD TO DEPRESSION?

**Objective:** To study the backgrounds of patients with audiovestibular disease regarding what influences their psychological state.

**Methods:** Cornell Rating Index and Self-Rated Depression scales were used.

**Results:** Neurosis and depression were diagnosed in 62.7% and 82.4% of bilateral Meniere's, 32.7% and 48.9% of unilateral Meniere's, 15.7% and 38.6% of sudden deafness/vertigo, 12.7% and 31.3% of vestibular neuritis patients.

**Conclusion:** Mental disorder increased in accordance with solo vertigo, vertigo/hearing loss, repeated symptoms, and bilateral lesions. Treatment strategies should be carefully constructed for patients with persistent nystagmus, long disease duration, and hearing loss in the secondary affected ear to avoid psychological disorders.

**Source:** Auris Nasus Larynx. 2016 Feb 24. pii: S0385-8146(16)30043-8. doi: 10.1016/j.anl.2016.02.006.

## DO INTAKE QUESTIONNAIRES IMPROVE DIAGNOSIS?

**Objective:** To develop a statistical model for predicting vestibular diagnosis prior to clinical evaluation from an intake questionnaire.

**Methods:** Retrospective review of 414 vestibular patient intake questionnaires.

**Results:** Of the 414 questionnaires analyzed, 381 (92%) had clinician information necessary to define a final diagnosis.

**Conclusion:** A pre-encounter history questionnaire can provide useful diagnostic information for common vestibular disorders.

**Source:** JAMA Otolaryngol Head Neck Surg. 2016 Feb 25. doi: 10.1001/jamaoto.2015.3663.

## RESEARCH UPDATE

