

ON THE LEVEL

A QUARTERLY NEWSLETTER OF THE VESTIBULAR DISORDERS ASSOCIATION



INFORMATION

SUPPORT

AWARENESS

ADVOCACY



The Power of a Compassionate Witness

By Kimberly Bell, DPT

Sometimes I feel angry when someone looks at me and assumes that I'm well.

That may seem weird, since I do so many activities on a daily basis to maintain my wellness and live a full, active life. On a conscious level, I absolutely want to project an image of wellness. It's better for my business to appear to be completely capable and dependable, even infallible. As a healthcare provider, I also have a certain responsibility to be a role model of self-care and wellness. So I'm embarrassed, but often I feel a wave of anger when someone looks at me and assumes that, since I am young and smiling, that I am pain free and have perfect balance.

When I feel that way I ask myself the question: How can I share my experience, strength and hope with others who are still suffering? I find that being of service to others helps me find meaning in my journey and relieves my feelings of anger.

CONTINUED ON PAGE 2

IN THIS ISSUE

Otic Capsule Dehiscence Syndrome	5
Champions of Vestibular Medicine	6
Concussion Connection	8
Hobbies That Can Help You Cope	10
Keeping Your New Year's Resolutions	12
VEDA Expands Member Services	15
Spin Sisters - Holiday Dinner Giveaway	16



TOP LEFT: KIM AT A LAUGHTER CONFERENCE; BOTTOM LEFT: KIM TEACHING YOGA
BOTTOM RIGHT: KIM USES DRUMMING AS A FORM OF THERAPY

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COMPASSIONATE WITNESS...CONTINUED FROM PAGE 1:

I have been battling with vestibular migraines since I was a kid. I remember my mom taking me to the hospital at Fort Meade when I was in elementary school on multiple occasions to get a Demerol shot to reduce the pain, stop the vomiting, and allow me to fall asleep. I distinctly remember the first migraine I ever had: I lay in my bed crying for hours and felt like a big, strong man was sitting next to me squeezing my skull as hard as he could. I couldn't even move or open my eyes.

Once I got older the migraines became more frequent and severe. The magic ER cocktail seemed to be narcotic pain medication, anti-nausea medication, a tranquilizer and an IV for hydration, plus saltine crackers and apple juice until I stopped vomiting and crying because I passed out from the drugs.

Before I learned how to heal myself I was at high risk of becoming a prescription drug addict, as many migraine sufferers are. I was taking Triptans orally and by injection 2-5 days a week, which is not recommended because it can cause cardiac side effects at high usage. I carried a purse full of prescription muscle relaxers, anti-inflammatories, opioid pain medications, strong non-narcotic pain killers, and anti-nausea suppositories. I spent thousands of dollars on medications and often had rebound headaches from taking so much. But still I forged ahead, putting my career and job performance before my health and well-being, popping pills, drinking coffee every morning, skipping meals during the day, drinking a glass of wine almost every night and staying up until midnight checking my work email from home.

Once I even drove home from my office with an extreme migraine, holding a trash bag on my lap and vomiting the whole way. It had not even occurred to me to call someone to ask for a ride since I was independent and enjoying so much professional competence and success at that time. I had to be strong, not to let anyone see my weaknesses.

In 2008, I had a particularly severe episode of "vertigo, vomiting, headache, blurry vision, off-balance hell" and was brought to the ER, where I was treated for a subdural hematoma, which is a stroke caused by a bleed in the brain. The ER doctors performed a spinal tap to look for blood in my cerebrospinal fluid. They didn't find any, so they decided that I must not have had a stroke. THANK GOD.

I was sent home with the "magic ER cocktail" of medications and told to "sleep it off." When I woke up, my headache was even worse and I could hardly stand or walk to the bathroom. I was hysterical and could not get off the couch because my head hurt so

badly and my dizziness was severe, so my mother had to fly in to help me.

When I went back to the ER the physician realized that I was having an adverse reaction to the spinal tap, which is fairly common, but I had been unaware of the possibility when I consented to the procedure.

I have Rachel Krentzman, my yoga teacher and physical therapist, to thank for my eventual breakthrough. Rachel worked with me during individual yoga therapy sessions to teach me a variety of yoga poses and sequences to heal myself from anxiety, depression, migraines, neck pain, back pain, joint pain, and shoulder pain, and to improve my balance. She helped me develop a solid home practice for self-healing. Rachel then invited me to attend her 200-hour Purna Yoga teacher training to learn more about the theories of yoga therapeutics and deepen my understanding of how to take care of myself with yoga. Rachel witnessed me going from one neurologist to the next during our years of working together, with discouraging results, and recommended that I consult Dr. Kulreet Chaudhary, MD, who taught me this principle of Ayurvedic medicine:

**“IF YOU EAT THE FOODS
THAT ARE RIGHT FOR
YOU, YOU WON’T NEED
MEDICATION. IF YOU
DON’T EAT THE FOOD
THAT IS RIGHT FOR YOU,
MEDICATIONS WON’T
HELP YOU ANYWAY.”
-PRINCIPLE OF
AYURVEDIC MEDICINE**

“If you eat the foods that are right for you, you won’t need medication. If you don’t eat the food that is right for you, medications won’t help you anyway.”

Through working with Dr. Chaudhary, I realized that my high-pressure, high-salary job was literally killing me. I had to resign from my job and go on disability. I continued to suffer almost daily migraines, vertigo and dizziness with occasional panic attacks and bouts of depression symptoms. Gradually I transitioned to an Ayurvedic lifestyle and self-care program and,

over time, eliminated all prescription medications.

My self-care program now consists of a combination of principles, practices and techniques from Ayurveda, Chinese Medicine, Qi Gong, homeopathic medicine, Naturopathic medicine, Bach flower essences, essential oils, sound healing, yoga therapy, mindfulness, laughing meditation and community service.

Vestibular migraines are just one of the reasons I experience occasional episodes of dizziness and vertigo. Other health conditions I have include BPPV and vestibular hypofunction from chronic ear infections as a child.

But I still breathe and smile.

I have reduced my living expenses and I live in a studio that is less than 200 square feet so that I can work less, take better care of myself and enjoy my life more. When I notice I am suffering I slow down, observe my symptoms, and take compassionate action to nurture myself, even if that means “not showing up” somewhere that I said I would be.

Out of sheer desperation I have sought out the most skilled team of healthcare providers to address all the causes of my dizziness, and I continue to follow up with them and do my best to live by their recommendations. As a result, I have a highly skilled network of providers that I can refer my patients to when they have multiple causes of dizziness and vertigo.

I am very fortunate that my boyfriend, Simon, is a compassionate witness. I have explained to him the extent of my symptoms, which he listened to without flinching and then said, “I am here for you. Let me know what kind of support you need.” One of the other important tools that I have

CONTINUED ON PAGE 4

layered into my life to reduce my anxiety is laughter. When I laugh it helps me relax. Now that I have discovered the importance of laughter to reduce my symptoms of depression and anxiety and improve my immune function I bring my laugh with me wherever I go.

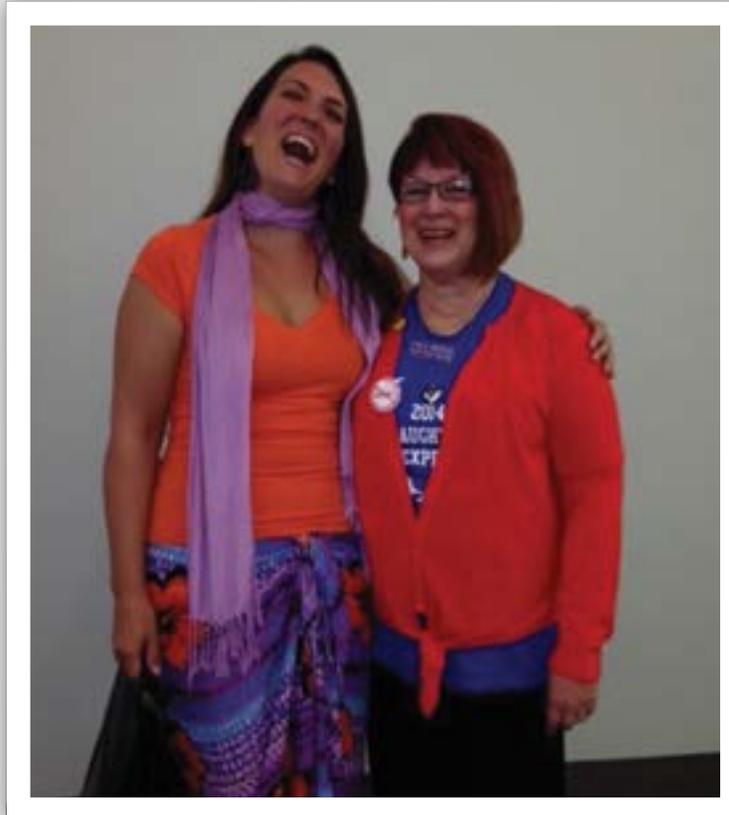
I have been practicing physical therapy since 2002. During my professional career I have had to continue to work while experiencing a migraine on many occasions. I have had to step out of staff meetings at my office to throw up in the outdoor stairwell trashcan so that no one would see me. During my annual performance reviews, many of my supervisors have reflected to me, "You are the best physical therapist I have ever hired but you also call out sick more than anyone I have ever met."

For the longest time I did not share with others what I was going through because, like many who suffer with dizziness, vertigo, anxiety and headaches, I didn't understand what was happening or how to manage it and I just kept pushing myself. I have since learned that the "perfectionist, type A, overachiever, high performer" is a typical personality type that often co-occurs with dizziness, headaches, anxiety and neck pain. In fact, when I attended the Advanced Vestibular course created by the Neurology Section of the APTA I realized that I was a classic vestibular presentation.

Through this experience of sharing my vulnerability with my boyfriend and now with you, I have realized that I can be strong and competent sometimes, but that it's OK to need to

ask others for help and support sometimes too. I am sharing this with you today, not because I want your sympathy or to be dramatic, but because I now I know that I am not alone. I share my truth to reassure all those who are suffering in silence, feeling alone, appearing to others from the outside like they are "fine" while feeling angry, anxious, depressed and misunderstood in the vestibular/anxiety hell inside their own head.

To my brothers and sisters who have been suffering for years and feel alone and misunderstood, I wish you all the best on your journey to recovery. My wish for you is that you have a comprehensive evaluation so that you can discover the root cause(s) of your symptoms and eliminate them or empower yourself to prevent and manage them. My wish is that you will live again!



KIM WITH TEENA MILLER AT THE ALL-AMERICAN LAUGHTER YOGA CONFERENCE

I want to speak through a megaphone to bring this urgent message to the world: Dizziness and vertigo can be reduced, if not completely eliminated, if you find the right provider and you empower yourself with knowledge. You can live a wonderful life, even with occasional episodes of dizziness and vertigo.

Once I started putting my own well-being ahead of what I thought other people expected of me and who I thought I was supposed to be, I was able to step into my authentic life and discover my life's purpose.

Otic Capsule Dehiscence Syndrome

By Dr. John King based on research conducted by Dr. P. Ashley Wackym

The proper diagnosis of vestibular disorders is generally not a simple process due to the complex interaction between the inner ears, eyes, somatosensory system, and many areas of the brain. It is for this reason that the diagnostic evaluation must take into consideration both reported symptoms and vestibular test findings. Although vestibular testing is sensitive to many vestibular disorders, it does not always provide a definitive diagnosis due to the complexity of the vestibular system. Injury or involvement of multiple areas can produce the same symptoms. Additionally, while vestibular testing is comprehensive, there are many components of the vestibular system that cannot yet be assessed properly.

A prime example of a vestibular disorder that has been challenging to diagnose is superior semicircular canal dehiscence syndrome (SSCDS), which by definition is a defect in the bony structure of the skull around the superior semicircular canal that can cause leakage of inner ear (perilymphatic) fluid and lead to significant symptoms. The topic of SSCDS can be sensitive among clinicians since some have traditionally relied on radiographic imaging to confirm the presence of SSCDS and not all patients with SSCDS present with clear findings on CT and/or MRI scans.

Dr. P. Ashley Wackym and colleagues took a close look at this situation in a recent study entitled "Otic capsule dehiscence syndrome: Superior semicircular canal dehiscence syndrome with no radiographically visible dehiscence" published by ENT Journal. In this study, 12 patients were identified as having SSCDS. Of these 12, six patients had clear evidence on radiographic exams of the presence of SSCDS and the results of the radiographic exams for the remaining six patients were normal (i.e., no evidence of SSCDS). Wackym et al. evaluated the symptoms and vestibular test results of both groups and found that they were almost identical, the difference being that the group with normal radiographic

test results presented with more severe migraine symptoms. All twelve patients underwent surgery for repair of their SSCDS symptoms – the patients with abnormal CT results underwent surgical plugging of their superior semicircular canal and the patients with normal CT results underwent a procedure in which their round window membrane was surgically reinforced.

The remarkable finding from this study is that ultimately, all twelve patients demonstrated significant resolution of their symptoms postoperatively. This is noteworthy because it provides evidence that one can have a defect of the otic capsule around the vestibular end organs and yet still have a normal CT and/or MRI scan, possibly because the defect is elsewhere in the inner ear and thus cannot be visualized well by CT, e.g., the modiolus, round window or oval window. It is for this reason that Dr. Wackym and his esteemed colleagues suggest that the term "superior canal dehiscence syndrome" should be replaced with a more appropriate term, "otic capsule dehiscence syndrome."

"The important point is that there are now known to be multiple locations in the inner ear that can cause the symptoms of SSCDS – not just the superior semicircular canal," said Dr. Wackym.

This short summary of the work by Dr. Wackym and colleagues does not do the original article justice as the authors have taken the effort to dissect the various symptoms and vestibular tests that typically manifest with this population of patients. As a clinician, I believe that this paper is a huge step towards demonstrating that patients can have normal CT and/or MRI scans and still have a third-window syndrome present. Further, the fact that good surgical outcomes were reported for this patient population is promising for those who suffer from these symptoms.

To facilitate access to the study findings Dr. Wackym's article has been published with open access (free). You can view a PDF copy of the article at vestibular.org/OCDS.



Champions of Vestibular Medicine

VEDA IS PROUD TO ANNOUNCE OUR
2015 CHAMPION OF VESTIBULAR MEDICINE AWARD RECIPIENTS.

Champions of Vestibular Medicine are medical professionals who have had significant impact on increasing awareness of vestibular disorders in the clinical and/or research settings. Thanks to their leadership we're seeing new diagnostic tools and treatment protocols that help reduce diagnosis times and increase treatment effectiveness.

SUSAN WHITNEY, DPT, PHD, NCS, ATC, FAPTA



Susan Whitney is a Professor in Physical Therapy and Otolaryngology at the University of Pittsburgh. Through her research she works to develop new tools to treat persons living with vestibular conditions through the use of virtual reality, a vibrotactile device, and devices that help record exercise compliance. Dr. Whitney is well known in her field for teaching and mentoring physical therapists interested in specializing in the field of vestibular rehabilitation therapy (VRT).

STEVEN RAUCH, MD



Steven Rauch is the Medical Director at Massachusetts Eye and Ear Balance and Vestibular Center. In addition to administrative and teaching responsibilities, Dr. Rauch divides his time between clinical care and studying disorders that affect hearing and balance, such as Meniere's disease. "What drives me is the great opportunities I have...not only to answer clinical questions that ultimately benefit our patients, but to be able to work with a team of outstanding researchers and great resources that facilitate that process," says Dr. Rauch.

“They say that I look fine...”



Have you ever felt like your vestibular symptoms were dismissed by others because on the outside you appear “normal”?

VEDA understands. Our **Community of Support** is here to validate your experience and help you find tools that can help you get an accurate diagnosis, effective treatment, and emotional support.

If your membership is up for renewal soon, keep an eye out for our spring membership campaign note card, and please return the enclosed form.

WE TRULY APPRECIATE YOUR SUPPORT!

ANNE HOGAN, PHD



Anne Hogan is an Assistant Professor of Audiology at Pacific University and a founding member of the leadership team at PU’s Ear Clinic, which offers a holistic approach to the diagnosis, treatment and management of vestibular patients through an interdisciplinary team approach. Dr. Hogan researches the effects of blast exposure on the vestibular system and is working on designing “at home” options for vestibular rehabilitation using game system consoles.

KATHRYN SCHNEIDER, BHSCPT, PHD



Kathryn Schneider is a Clinical Specialist in Musculoskeletal Physiotherapy and an Assistant Professor/Clinician Scientist at the University of Calgary in Canada. She has trained many physiotherapists to improve their care of patients with vestibular, concussion and whiplash disorders, and has been working with vestibular patients for close to 20 years. Her research explores the relationship between the cervical spine and the vestibular system with a focus on concussion.

THE CONCUSSION CONNECTION

VEDA is excited to announce that we will be partnering with former professional athletes, Bryce Salvador – retired Captain of NHL’s NJ Devils – and Jeff Parke – retired US/international soccer player – to raise awareness about the connection between concussions and vestibular disorders.



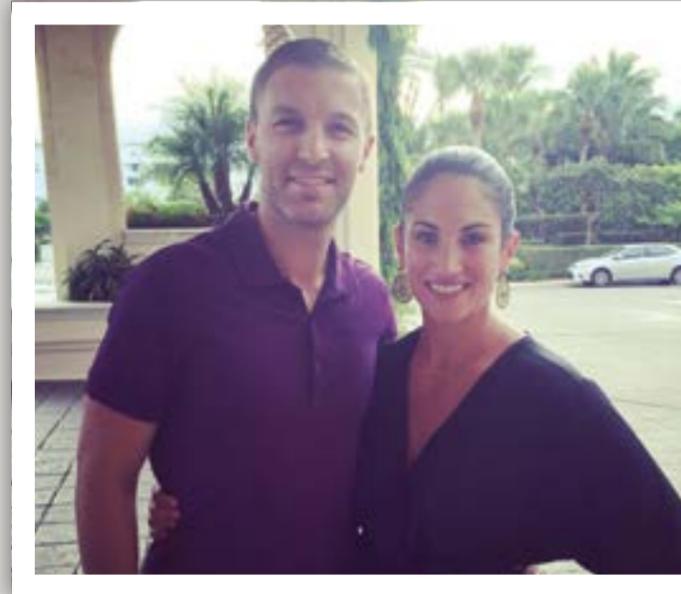
Bryce experienced a series of concussions, not unusual for a professional hockey player. He suffered on and off with tinnitus, imbalance, nausea, and a host of other symptoms, which he pushed through so he could continue playing.

One day a minor hit to the head left Bryce flat on the ice, without any sense of how he got there. After that he started having more severe problems with his spacial orientation. “When I tried to step onto the ice, I had no concept of where I was in relation to anything else,” says Bryce. Therapy helped, but eventually he plateaued.

Finally, Bryce found Dr. James Kelly, who explained that it wasn’t just a problem with his head, but that his eyes and vestibular system were involved as well. “Basically, the computer chip controlling my spatial awareness, vision, and balance was damaged,” explains Bryce in a wonderful article he wrote for The Players Tribune.

Bryce started vestibular rehabilitation therapy, which he attacked with the drive of a professional athlete engaged in training. Slowly the rehab worked, rewiring his brain, and eventually he was able to return to play.

Today Bryce is passionate about educating youth on concussion prevention. Stay tuned for more information about a new campaign we’ll be working on together!



Jeff Parke has had migraines his whole life, but when five to seven serious concussions during his 11-year major league soccer career left him with vertigo and severe nausea he knew there had to be something else going on.

His doctors put him on all sorts of diets, but nothing helped. When he blew his nose his ears felt full and his eyes shook. Finally, through self-research, Jeff learned about perilymph fistula, which fit his symptoms.

After Jeff received surgery to correct his fistula his symptoms improved somewhat, but soon after they returned in full force.

Jeff tried 12 weeks of vestibular rehabilitation therapy, which helped at first, but not enough to make a significant difference. “My world is moving all the time,” Jeff explained to Cynthia Ryan, VEDA’s executive director.

Eventually Jeff found Johns Hopkins University, where they diagnosed him as having vestibular atelectasis, a rare condition characterized by the collapse of the endolymph-containing portions of the labyrinth for which there is currently no cure, though experimental therapies are being conducted.

Jeff is still dizzy all the time, but he can function. “I don’t know where I am in space,” says Jeff. “I can’t balance with my eyes closed or in the dark, which is very frustrating.”

It wasn’t enough that Bryce and Jeff were told they had a concussion. It was when they realized that their vestibular system was damaged that the pieces began to fit together and they could get help from qualified vestibular specialists. By sharing their stories, Bryce & Jeff hope to help youth and professional athletes through prevention and treatment of vestibular concussion.

Hobbies That Help You Cope

By Sherron Laurrell, vestibular patient

I have been dealing with chronic vestibular dizziness for almost three years. During that time I've gotten lost a few times in the "what ifs." A what-if to me is one of those totally unproductive worry periods when I imagine all the awful stuff that is going to befall me because of the dizziness. There were times during the first year of my illness that I wondered if next year would come. And if it did, would it be as bad as this? I was devoting a huge amount of emotional energy and physical time to worrying. Then one day, with the help of a wonderful therapist, I thought about trying a new approach. Maybe I could occupy some of my time with one of my long lost-hobbies, and in doing so push off the worry. For me, it has helped.

I had always enjoyed knitting and crocheting. I could do that sitting down (because I was less dizzy when I was sitting) and I found that visually focusing on the yarn and crochet hook actually calmed my dizziness when it was bad. So I started making scarves. After a few weeks, I decided I needed to do more. That's when I met a wonderful team of women on Facebook who crochet "Mats for Cats." We make and send soft, colorful crocheted mats to no-kill shelters all over



CHIEF MAT INSPECTOR SPENCER LAURRELL CHECKING HIS MOM'S WORK BEFORE SHIPMENT TO A SHELTER IN MICHIGAN

the United States and Canada for the kitty cats awaiting their forever homes. We have received amazing letters back from the shelters telling us how much our mats have meant to their shelter cats who are alone and scared and now have something soft and warm to snuggle up with. If you would like, check us out on Facebook at "Montana Bert's Mats for Cats."

My personal success with using a hobby to help me cope with my dizziness got me thinking. I wondered if other vestibular patients have turned to hobbies to help them cope.

In early October, we posted a question on the VEDA Facebook page: "What hobbies have you adopted since developing a vestibular disorder that help you cope?" We heard from many people who have pursued a wide variety of hobbies to help them deal with their issues. Some people said that the thought of even trying a hobby was too much for them to contemplate at this point. It is my hope that by sharing these ideas, everyone will find something that might help them through the tunnel to their renewed lives living with a vestibular disorder.

The hobbies mentioned most often included: adult coloring books, gardening, journaling and writing (a personal favorite of mine!), knitting & crocheting, bible study, bird watching, card



ONE OF THE KITTIES AT THE SALEM CO. HUMANE SOCIETY SNUGGLED IN A HANDMADE MAT FROM SHERRON LAURRELL AND MONTANA BERT'S MATS FOR CATS

making, audio books, candy making and quilting. One person shared that she had become involved in training therapy dogs. Those who answered talked about how having a hobby had helped them focus on something fun and fulfilling for some period of time that diverted them from their illness.

Another of the interesting hobbies that several people talked about was their submersion into the arts. I was drawn to the story of Susan Cere-Wilson. Susan has Meniere's disease. She developed a severe infection that ruptured her eardrum when she was 16 years old and had to have a surgical procedure to reconstruct it (tympanoplasty). She deals with chronic vertigo that requires that she remain stationary to control the severity of the attacks, so she knew she had to find something she could do as therapy. Two years ago she took up painting. Her work is really beautiful! She is unable to work outside the home because of the unpredictability of her health, so she took her hobby and opened up her own Etsy.com business: CereArtStudio.



AN EXAMPLE OF SUSAN'S WORK ENTITLED "LOST TREASURES"



SUSAN CERE-WILSON HAS DIRECTED HER POWERFUL TALENTS AND ENERGIES INTO CREATING BEAUTIFUL PIECES OF ART

Congratulations Susan! Your example of how to work creatively around a vestibular disorder is inspiring to me!

For those of you who have hobbies you pursue that help you cope, keep it up and please share your story on the VEDA Facebook page or on the VEDA website under "Patient Spotlight." Your success will help someone else find their way. And for those of you who are still dealing with the terror of "what is wrong with me" and "what is next," we know and deeply appreciate your pain. We hope the hobbies in this article give you some ideas to pursue.

**"NEXT TO LOVE, BALANCE IS THE MOST IMPORTANT THING."
- JOHN WOODEN."**

May you find yours!

Sherron Laurrell is a vestibular patient who volunteers with VEDA to share stories with the hopes of helping others who wake up each morning wondering what the day will bring. She can be reached at laurrell@comcast.net.



ANOTHER EXAMPLE OF SUSAN CERE-WILSON'S INSPIRATIONAL ART ENTITLED "GOING COASTAL"

How To Keep Your New Year's Resolutions

By Jordan Tucker, PT, DPT

That time of year has come again, the holidays are over and we start thinking about improving ourselves for the New Year ahead of us. But, what if you have a vestibular disorder? Your body probably feels out of your control sometimes and managing a vestibular disorder can be exhausting and frustrating! You want to make some resolutions, but how are you ever going to accomplish that and manage your vestibular disorder at the same time? Well, it can be done! Several surveys have found that people tend to aim for the same resolutions, so here are some of the common New Year's Resolutions and some tips for how to keep your resolutions when you have a vestibular disorder.

Many of us want to exercise more and eat less or at least eat healthier. However, the thought of managing the aisles of a grocery store, cooking for yourself or going into a loud, busy, bright and crowded gym is just too much to think about. Here are some ideas to make that resolution a reality:

GET IN BETTER SHAPE/LOSE WEIGHT

- First, make sure to clear with your MD your plans for a new exercise routine and if there are any exercises or activities you need to avoid or be cautious of.
- If you are interested in going to a gym, think about going at off times when the gym is not as busy. While there, you can try to find less lit locations and even think about wearing ear plugs or ear phones with quiet music if noises bother you. Avoid working out where you can see a lot of other activity going on and you likely will not want to be watching the TV while you are on the cardio machines.
- Gyms, parks, recreation departments and senior centers offer a variety of exercise classes. Find one that will suit your needs and one that won't case your symptoms to flare up. Gentle classes such as yoga or tai chi offer many benefits but can be gentler on your



vestibular system. Never feel pressured to do what you neighbor is doing in a group class, go at your own pace and do only what you feel comfortable doing!

- If a gym is too overwhelming for you or out of your budget, there is nothing wrong with working out at home. There are many great videos you can find online that allow for great exercise with little to no equipment. Working out at home allows you to go at your own pace in an environment you can control. As always, only do what you can and feel comfortable doing.
- Recruit a friend to exercise with you. Everyone benefits from some outside motivation!
- Finally, if you just don't know where to start or what to do, think about making an appointment with a vestibular rehabilitation specialist to work on developing an exercise routine that will help you match your goals. See VEDA's provider directory for specialists in your area.

EAT HEALTHIER

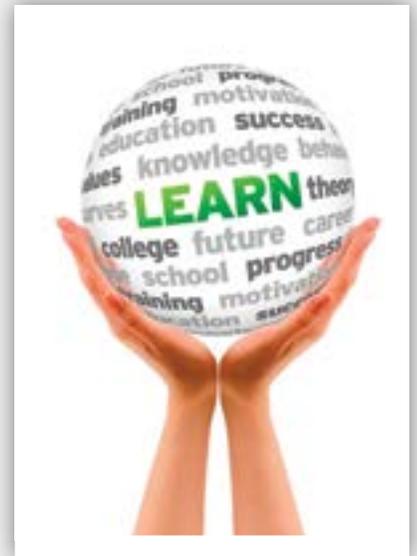


- Make healthy meals ahead of time when you are feeling well so even on your dizzy days you can eat healthy. Remember to pace yourself and not do it all in one day!
- Have healthy snacks in your home so if you are hungry or need something in your stomach to take medications, it is something healthy.
- If you find a low-salt diet is helping your symptoms, check out VEDA's resource page on diet and vestibular disorders. Watch out for prepared foods as they often contain a lot of salt.
- If certain foods trigger your symptoms, check out the internet or social media for new and fun recipes to help you avoid those foods but to keep your food interesting!
- If it is available in your area, consider a grocery delivery service. This will help you to manage your symptoms by avoiding grocery stores and allow you to plan out your meals and avoid the temptations of that junk food aisle!

LEARN SOMETHING NEW

There are many great ways to learn something new without having to go back into a formal classroom or feel pressured to keep up if your disorder is not letting you.

- Many top universities offer online courses that are free! These courses are called MOOCs (massive open online courses). You can learn about almost any subject, from photography to computer programming, and although some have due dates you can work at your own pace and even replay lectures if you don't understand something.
- Look into classes at your local parks and recreation department or at local schools. You can find classes that are unlikely to trigger your symptoms. For example, you may not want to take that pottery class with the spinning wheel, but what about a class about meditation?



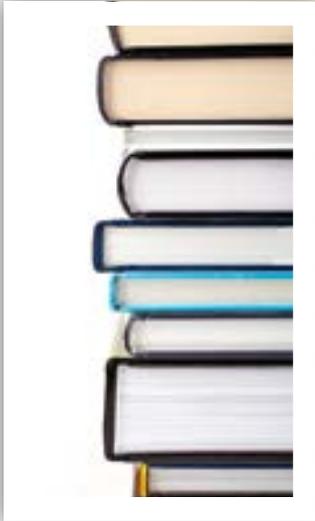
TRAVEL TIPS

For an extensive list of tips on traveling with a vestibular disorder, including strategies to help with pressure changes, motion patterns, and sensitivity to light and sound, check out VEDA's publication "Travel and Vestibular Disorders" (at vestibular.org under "Educational Resources - Other").



CONTINUED ON PAGE 14

MANY WAYS TO READ BOOKS



- If reading triggers your symptoms, think about audiobooks. You can find them easily at libraries and there are now many apps for your phone which allow you to purchase them or even borrow them from your local library. You can also look for large print books or read on an e-reader (e-ink screens may be better), which allows you to enlarge the font.

- Sometimes the brain and eyes can get confused by trying to take in too much information at a time while reading. Try blocking out the lines you aren't reading with a small piece of paper. This allows your eyes to just focus on what you are trying to read.
- Read only in small amounts of time and take a break if your symptoms increase. Do something else for a bit and then return once you start feeling better.

GIVE BACK TO THE COMMUNITY

You don't need to be involved in major volunteer events to give back to your community. There are many ways you can help those around you without triggering your symptoms.

- Many charitable organizations need individuals to volunteer from their home or help complete office tasks where you may be able to better control the setting/environment and pace.
- Next time you are at the grocery store or ordering online groceries, buy a few extra things to donate to your local food pantry.
- Call your local homeless shelter and see if there are any supplies they might need that you can clean out of your closet. Often animal shelters can use old towels, blankets and

sheets as well. Get a friend or family member to help you gather the items if needed.

- Look into becoming a VEDA Ambassador or helping on one of the many VEDA committees



(vestibular.org/volunteer).

- Consider starting a local support group for those with vestibular disorders (vestibular.org/support_groups).

Making and keeping your resolutions may seem daunting at first, but chose one or two to start with don't overdo it to set yourself up for success! Once you have those few resolutions you are going to commit to, keep a journal of all the wonderful things you are doing to work towards your goals so that at the end of the year you can look back and be proud of all that you have accomplished!

REFERENCES

1. <http://www.nielsen.com/us/en/insights/news/2015/2015s-top-new-years-resolution-fitness.html>
2. <http://www.newsday.com/news/nation/top-10-new-year-s-resolutions-for-2015-and-how-to-keep-them-1.9753461>

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 or send your payment to 5018 NE 15th Ave, Portland, OR 97211 with the enclosed self-addressed envelope.

Donation:

\$250 \$200 \$150 \$100 \$50 \$25

Other \$ _____

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.

VEDA Expands Our Member Services Help Line



No one is more important to VEDA than our members. That's why we've expanded our staff so we can respond to member inquiries more quickly and reach out to members to make sure they are aware of the services

VEDA provides.

VEDA would like to introduce you to our new Membership and Development Relationship Coordinator, Matthew Hushbeck.

Matthew hails most recently from the Susan G. Komen Foundation. Matthew left a career in sales to pursue more meaningful work in non-profit development. He is currently pursuing a Masters Degree in Public Administration and Non-Profit

Management.

"I want to help people," says Matthew. "I enjoy talking with patients and hearing their stories. I never realized how disabling vestibular disorders can be, but I can relate to many of the challenges vestibular patients face. When I was 16 years old I was diagnosed with a nerve disorder that left me in constant pain. I met with more than a dozen specialists during my diagnostic journey, and was often told that my pain was all in my head. When I was finally diagnosed I was told there was no cure, that I would have to learn to manage the pain. I am fortunate that my condition has stabilized, but every day I wonder if my nerves will be set off and the pain with return."

You can speak to Matthew by calling our office at 503.294.9085, or toll-free at 800.837.8428. Starting January 4th we will have office hours from 9am - 5pm Monday through Friday. You can also email him at matthew.hushbeck@vestibular.org.

The Spin Sisters - Holiday Helpers -



Folks living with chronic vertigo and dizziness can be overwhelmed by social events like Thanksgiving dinner.

The vestibular system goes into overdrive when dealing with travel, loud noises, and socializing. When a person's vestibular system isn't working well, stress, headaches, nausea, sensory overload, anxiety and disorientation are common.

Due to these terrible side effects, many folks are not able to participate in large parties and social events. Holiday preparation becomes a huge burden. Also, many folks with chronic vestibular conditions are not able to handle normal work life, which results in their having limited funds.

The Spin Sisters' second annual Thanksgiving Turkey Dinner Giveaway raised \$500 and allowed them to send six turkey dinners to members of the vestibular community in need.

The Spin Sisters would like to thank their donors: Jessica, Thomas, Rebecca, Jose & Michelle, Julie & Crew, Liz and Santa Claus.

"It was heartwarming to see Jessica, one of last year's recipients, be in a position to give back this year," says Spin Sister and VEDA Ambassador, Marissa Christina.

Projects like this are an inspiration, and show us that there are many creative ways we can help each other when we come together as a community.


VESTIBULAR
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YOUR "LIKE" MAKES A DIFFERENCE!

You can help raise awareness about vestibular disorders among your social networks by "liking" and "sharing" VEDA's Facebook posts.

Check us out at
www.facebook.com/vestibulardisorders.

