



# VESTIBULAR

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## DISORDERS ASSOCIATION

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## Is Anxiety Normal?

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Everyone worries now and then. Worry is a normal part of our everyday lives, and even more so for patients with chronic illness and the people who love and care for them.

If you have a loved one who suffers from a vestibular disorder, you may see signs that they have developed different behavior patterns than you are used to. Vestibular patients are prone to anxiety in reaction to the chronic, uncontrollable nature of their symptoms. Mental health counseling can be useful to vestibular patients and their loved ones in coping with the normal, everyday stress that accompanies living with a chronic invisible illness.

However, sometimes anxious behaviors become excessive. As a person who cares for their well-being, you may be wondering if your loved one's behavior is normal, or is there cause for concern.

Family members may also become susceptible to anxiety disorders due to the constant stress and worry over caring for a vestibular patient, especially if that patient frequently exhibits signs of distress.

If your loved one has a vestibular disorder, you will likely have a general concern for their overall health. You may also worry that their falls could cause injury. People with vestibular disorders sometimes become unable to drive. If your loved one has become potentially dangerous but refuses to quit driving, you may find yourself chewing your nails and pulling out your hair. Many vestibular patients are no longer willing to participate in social activities. This is normal and understandable, but at what point might it indicate a deeper mental health issue?

How can you tell if you or your loved one might be doing more than the normal level of worrying?

The good news is that even excessive worrying is treatable through counseling, and sometimes counseling with medication.

Let's look at some possible symptoms that may indicate a need to be evaluated by a physician or mental health professional.

**Generalized Anxiety Disorder** is a mental health problem with the following symptoms that cause significant distress

or adversely affect social, occupational or other areas of functioning:

- Excessive anxiety and worry more days than not that has lasted at least 6 months
- A person finds it hard to control the worry
- Three or more of the following symptoms are present:
  - a) Restlessness or feeling edgy
  - b) Feeling fatigued easily
  - c) Having problems concentrating, or feeling your mind goes blank
  - d) Feeling irritable
  - e) Noticing muscle tension
  - f) Having problems falling or staying asleep, or unsatisfying sleep<sup>1</sup>

Having a vestibular disorder and perhaps an associated hearing disorder will cause some natural distress, but if you notice that you or your loved one are experiencing many of these symptoms, it may be helpful to seek professional counseling.

For people who are newly diagnosed, adjusting and adapting to illness and impairment takes time, and counseling can help.

Caregivers also need someone to listen to their concerns and frustrations, even when they don't meet the diagnostic criteria of a clinical anxiety disorder. They also need supportive relationships, which can be found in a trusted counselor and/or a support group for caregivers.

Other anxiety disorders that often affect people with vestibular disorders are **panic attacks**. Panic attacks impair

quality of life and may make people afraid to join in social activities. They can be treated and great improvements for both the caregiver and patient can be found. Here are some symptoms to look for.

According to the mental health profession, "A panic attack is an abrupt surge of intense fear or intense discomfort that reaches a peak within minutes and during which time four or more the following symptoms appear:"<sup>2</sup>

- Heart palpitations or accelerated heart rate
- Sweating
- Trembling or shaking
- Shortness of breath or feeling like you are smothering
- Feeling like you are choking
- Chest pain or discomfort
- Nausea or abdominal distress
- Feeling dizzy, unsteady or lightheaded as though one might faint (for some people with vestibular disorders, some of these symptoms may always be present)
- Feeling chilled or overheated
- Feeling numbness or tingling
- De-realization - feeling as though things are unreal; or de-personalization - feeling as though you are detached from yourself
- Feeling afraid you are going crazy or losing control
- An intense fear of dying<sup>3</sup>

If a panic attack occurs, and there is constant concern about the possibility of the next one, you could be diagnosed with **Panic Disorder**. Panic attacks and Panic Disorder can be treated, and a better quality of life can be attained for both the patient and caregiver.

Sometimes people who have vestibular problems fear going into social situations where there are a lot of people talking because hearing impairments and overstimulation cause stress and overwhelm them. Different lighting, stairs, obstacles, patterns in carpeting, shadows, and just fear of navigating new environments can cause vestibular patients to fear leaving home, especially if they have to go somewhere alone. This is normal for many vestibular patients based on their real physical symptoms.

There is a mental health condition known as **Agoraphobia**, which means a fear of public transportation or public places. With vestibular patients, there is a rational and real reason to fear falling, and/or being embarrassed or hurt. But with encouragement, and sometimes some vestibular rehabilitation therapy (VRT), patients can strengthen muscles and learn techniques to help them feel more confident when they must navigate unfamiliar environments.

For patients who exhibit an excessive tendency towards isolation, it may be helpful speak to a counselor who is familiar with vestibular disorders while also seeing a physical therapist who specializes in vestibular rehabilitation therapy (VRT) as part of the patient's overall treatment plan. A person with a vestibular disorder should not have to live a life of isolation, and often when they develop coping strategies, both for their anxiety and the physical manifestations of their illness, they become more confident in their abilities to explore the world once more.

For vestibular patients who would not benefit from VRT, a caregiver might enlist the help of healthcare professionals to encourage the patient to begin using mobility assistance, such as trekking poles, a cane, a walker, or in extreme cases a wheelchair, so they can enjoy more social interaction.

## SUMMARY

Vestibular disorders have real, physical symptoms that often cause patients to behave anxiously, which can be worrisome for their loved ones, especially when that behavior is different than the patient's "pre-vestibular disorder" behavior. Sometimes it is useful to determine if worrying has become excessive to the point that it can be defined by a clinically diagnosable mental health condition so the patient can be encouraged to seek help. It is important to remember that labeling the patient's condition is not intended as a judgement. Whether or not a vestibular patient or their loved one receives a mental health diagnosis, they can still benefit from professional counseling to help them cope with the intense and understandable changes these conditions impose on their lives.

## References:

1. American Psychiatric Association (2013). The Diagnostic and Statistical Manual of Mental Health Disorders, 5<sup>th</sup> Edition. Washington, D.C., A.P.A., 222.
2. Ibid., 208.
3. Ibid., 208.

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