

WINTER 2026

LOSING BALANCE, FINDING PURPOSE

Michelle's journey
back to balance

PAGES 3-6



VEDA

A QUARTERLY MAGAZINE
OF THE VESTIBULAR
DISORDERS ASSOCIATION

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 healthcare. 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. © 2026 All rights reserved.

BOARD of DIRECTORS

President :: Amir Kheradmand, MD - Baltimore, MD

Vice President :: Lynn Johnson - Secane, PA

Treasurer :: Holly Fisher, Ed.D. - Coppell, TX

Secretary :: Patricia Gerend, MS - San Francisco, CA

Past President :: Habib Rizk, MD - Mt Pleasant, SC

Abbie Ross, PT, DPT, NCS - Pompano Beach, FL

Stefanie Adams - Boston, MA

Darcy Bonjour - Chanute, KS

Jessica Pagan - Farmingdale, NY

Christine Moyer - Ashburn, VA

Kristin Janky, PhD, AuD - Boys Town, NE

Christine Strange, AuD - Charleston, SC

Maria Machala, MS, NP - Denver, CO

Kristen Steenerson, MD - Palo Alto, CA

EXECUTIVE DIRECTOR

Cynthia Ryan, MBA - Portland, OR

MEDICAL & SCIENTIFIC ADVISORS

Chair :: Joel A. Goebel, MD, FACS - St. Louis, MO

Habib Rizk, MD - Mt Pleasant, SC

Richard Clendaniel, PT, PhD - Durham, NC

Janet Helminski, PT, PhD - Chicago, IL

Timothy Hullar, MD - Portland, OR

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

Eric Slattery, MD - Salt Lake City, UT

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

Kathleen Stross, PT, MS, DPT, CHC - Dallas, TX

Jeffrey Sharon, MD - Berkeley, CA

Amir Kheradmand, MD - Baltimore, MD

Divya Chari, MD - Boston, MA

CONTENTS

3-6

PATIENT SPOTLIGHT

Michelle's fight for her family and career amidst vestibular dysfunction

7

VESTIBULAR POEM

Featuring *Shrink* by Polly Ernest, a 2025 Poetry-4-Balance contest winner

8-9

UPCOMING CONFERENCE

You don't want to miss the vestibular event of the year, Life Rebalanced Live

10

WHY LOUIS GIVES

As a long time VeDA supporter, Louis shares his journey from despair to hope

11-13

TIPS FROM A VESTIE

Karen offers insight into how humor can play a role in coping with dizziness

14-15

NEW IN RESEARCH

Research summary evaluating the connection between immune response and Ménière's Disease

VEDA STAFF

CYNTHIA RYAN, Executive Director
PAUL F. MORRIS, Development Director
RYAN MARQUARDT, Website & Database Manager
ELIZABETH LADD, Communications Manager
ABRIL URIBE, Office Manager
CLAIRE HADDAD, Professional Membership Manager
CHANDRA HUBBARD, Patient & Family Resource Coordinator

LOSING BALANCE, FINDING PURPOSE

Michelle's Vestibular Journey

Before her world was upended by dizziness and uncertainty, Michelle Anthony led a bustling life. She was a mother of two energetic daughters—a one-year-old and a four-year-old—with a thriving career she loved and a passion for staying active, fit, and social. Life was full, busy, and bright with possibility.

Then suddenly, and without warning, everything changed.

A NEW AND TERRIBLE ILLNESS

The dizziness started with a severe sinus infection. She hoped that it would heal and take the spinning with it. But this infection seemed determined to haunt her.

Michelle's world would tilt and jolt as she sat motionless. It felt as if she were moving through water, and her vision would lag behind each movement.

"It was like I was walking on marshmallows," she said, "and my legs threatened to give way beneath me."

UNSOLVABLE SYMPTOMS

Michelle pressed on for answers, desperate for relief. Her ears felt plugged, her head ached with tingling



pressure, and fatigue sandbagged her once-vibrant spirit.

Repeated visits to her ENT offered only antibiotics, steroids, and mounting frustration as the dizziness continued day after day.

She found herself caught in an exhausting cycle of doctor visits—ENTs, neurologists, therapists, and primary care physicians—each puzzled by the mosaic of symptoms.

Exam after exam yielded few answers, only more anxiety and a sense of sinking isolation.

The one thing she knew was that it had grown into far more than "just a sinus infection."

HER LOWEST POINT

The stress and despair mounted. The constant dizziness made everyday life



impossible. Things like a trip to the mall or grocery store became impossible due to the overwhelming lights, shelving, and sounds.

Not only was she suffering relentless, debilitating symptoms, but the unknowable was driving her deeper into anxiety, stress, and—eventually—a depression that threatened to engulf her.

Michelle recalls, “At my lowest points, I even considered just ending my life because I couldn’t see myself continuing on this way.”

Despite it all, Michelle fought to hold onto the person she was before.

“I forced myself to go for a walk every

morning,” she says. “Some of those walks were brutal. I would cry often, just feeling this marshmallow sensation under my feet. As I’m walking, I’m praying, begging, and bargaining with God to ‘please just fix me.’”

FIGHTING FOR HER FAMILY

It was not just her body and spirit that suffered; Michelle’s illness stretched into every corner of her life. Motherhood, once a joyful cacophony of play, now carried new burdens.

“My daughters were so young at the onset of all this,” she shares. “They were too small to understand. I couldn’t communicate how sick I was, or why I needed them to be quiet.”

Through all her challenges, Michelle’s

“FEAR AND NECESSITY KEPT ME GOING”



MICHELLE WITH HER PARENTS, BROTHER, HUSBAND, AND TWO DAUGHTERS



family was supportive and understanding, even when her illness seemed like it wanted to pull them apart.

“My mom, dad, brother, and friends all did everything they could to support me, and I knew it was breaking their hearts to see me living with such a diminished quality of life,” recalls Michelle.

Things that her family once bonded over fell out of reach. She had to make deeply painful decisions, like staying home while her family attended a professional basketball game they had all been looking forward to.

“I just couldn’t go,” Michelle explains, recalling this moment of disappointment. “Moving my head back and forth as the players run up and down the court, the crowds, the stairs—it would have been too much.”

BALANCING A CAREER

Through all the dizziness, fatigue, and

suffering, Michelle had to constantly fight to keep up with her job without pushing beyond the limits of what her body could handle.

Being able to work from home was a saving grace. Still, she had to balance her health with her workload, all without revealing the true extent of her illness to her workplace.

She found ways to survive, relying on blue-light blocking glasses, apps to dim her screens, and strategizing every moment to make it through another day.

“If I’d had the option, I would have stopped working, but as a young family, we needed the steady income. Fear and necessity kept me going.”

FINALLY FINDING ANSWERS

Desperate for answers, Michelle turned to the internet. That’s when she found a Facebook group where other people were describing exactly what she was experiencing.

“For the first time, I felt like I wasn’t completely alone,” recalls Michelle.

Finally, this online community led her to a neuro-otologist who delivered the diagnosis: Vestibular Migraine and Persistent Postural Perceptual Dizziness (PPPD).

With a name for her suffering, Michelle could start to rebuild—slowly.



Vestibular rehabilitation therapy (VRT), medications, dietary changes, supplements, and a patchwork of lifestyle changes became her regimen.

Healing did not come overnight. But, as months passed, symptoms faded. The glimmer of hope grew stronger. She started breaking the dizzy-anxious-dizzy cycle. Michelle started to believe that she could get better.

“Getting my anxiety under control was a big step in my healing journey,” she explains. “I began to believe that life could actually be good again.”

Today, Michelle lives fully—traveling, laughing, swimming, jumping, even riding roller coasters again!



“VM and PPPD will always have to be managed. That’s just reality,” she says. “But the fear and anxiety of these symptoms no longer control me. They’re part of my story, but not in charge of the story.”

GIVING BACK

It wasn’t until later in her journey, when she was already on her path to healing, that Michelle found VeDA. She knew right away that she wanted to get involved.

She started attending VeDA’s Dizzy Moms Club online support group. “People from all over the world come together. We laugh, we cry, we process together,” explains Michelle.

Michelle also became a VeDA Ambassador, a volunteer role she takes very seriously. She helps others find VeDA, offering the lifeline of knowledge and support she once so desperately needed.

“My journey would have been so different if I’d known about VeDA sooner... the resources, the community, the hope I wished I’d had.”

She knows that her volunteer work with VeDA could change the course of someone’s vestibular journey, saving them years of suffering alone without answers or treatment.

“If I can touch one person, that’s enough,” Michelle says.

HONORING THE IMPACT OF BALANCE BENEFACTORS

MR. RANDALL MISHOE

MR. DAVID WADDILOVE

MS. NANCY A BRONSON

MR. JAMES A SCHACHTERLE

MS. HARRIET WOODS

MRS. LAUREN ANN BACCETTI-ECK

MRS. MICHELE K MCCARTHY

MS. FRANCINA DEL VALLE-BROWUER

MR. CARL HOOPER

MRS. STEPHANIE LOONEY

DR. MARY MILLER

MRS. NANCY LEE SWEARENGEN

MRS. & MR. VIOLET & JOHN DAGDIGIAN

MRS. JANET TREMBLY

MR. ROSS BABCOCK

MR. DENNIS ELONKA

MS. ELIZABETH GORDON RILEY

DR. CAROLE K GERST

MS. MARIAN RABINOWITZ

MR. RUPERT BRANDT

MR. JAMES FULLERTON

You can help people who are in crisis because of dizziness, vertigo, and imbalance get an *accurate diagnosis* and *effective treatment* and save them from their spinning nightmare.

Visit vestibular.org/OTLdonate to make a difference today. Your gift matters!

SHRINK

By Polly Ernest

Shrink
I think I need a shrink
Because my life has shrunk
And it is squeezing the air out of me

Or do I need a shrink
Because life got too big
Unruly
Expansive
Unstoppable
Wild as dreams
And that I have shrunk?

Broad shoulders sloping
I am left clinging to my cliff edge

Sands of time below
And pouring past me
Waves of self doubt
Undercutting my usual certainty

I think
I need
A shrink

You can read the rest of the 2025 Poetry-4-Balance winning poems at [VESTIBULAR.ORG/P4B](https://vestibular.org/p4b).



VEDA'S VIRTUAL CONFERENCE

March 2-6, 2026

ABOUT LIFE REBALANCED LIVE

VeDA's virtual conference, Life Rebalanced Live, brings together leading vestibular experts and patient voices for a meaningful, engaging online experience. Designed to be accessible from anywhere, the conference offers education, connection, and community—**all from the comfort of your home.**

Each day of the conference features two-hour live sessions, including:

- Presentations by premier vestibular healthcare professionals
- Patient panels sharing lived experiences related to the day's topic

Beyond the live session, participants can take part in all-day community-building opportunities, creating space to connect with others, share stories, and feel less alone on the vestibular journey.

Recordings and transcripts are also available for those who can't attend live or who want to rewatch later. Lifetime access to all presentations and transcripts can be purchased and viewed at your own pace.

Register for free at [VESTIBULAR.ORG/LRL](https://vestibular.org/lrl)

It helped me become so much better informed and set me on a more reliable path to managing my symptoms.

DAY 1

Mar 2, 2026 Hope in Innovation: Emerging Therapies for Chronic Dizziness

DAY 2

Mar 3, 2026 You Are Not Your Diagnosis: Living Well with Chronic Vestibular Conditions

DAY 3

Mar 4, 2026 The Trauma of Dizziness and Vertigo: Addressing Fear, Avoidance, and Emotional Injury

DAY 4

Mar 5, 2026 VRT: Neuroplasticity & Exercises that Connect it to Everyday Life

DAY 5

Mar 6, 2026 When Conditions Overlap: PPPD, Vestibular Migraine, and Other Comorbidities

WHY I GIVE

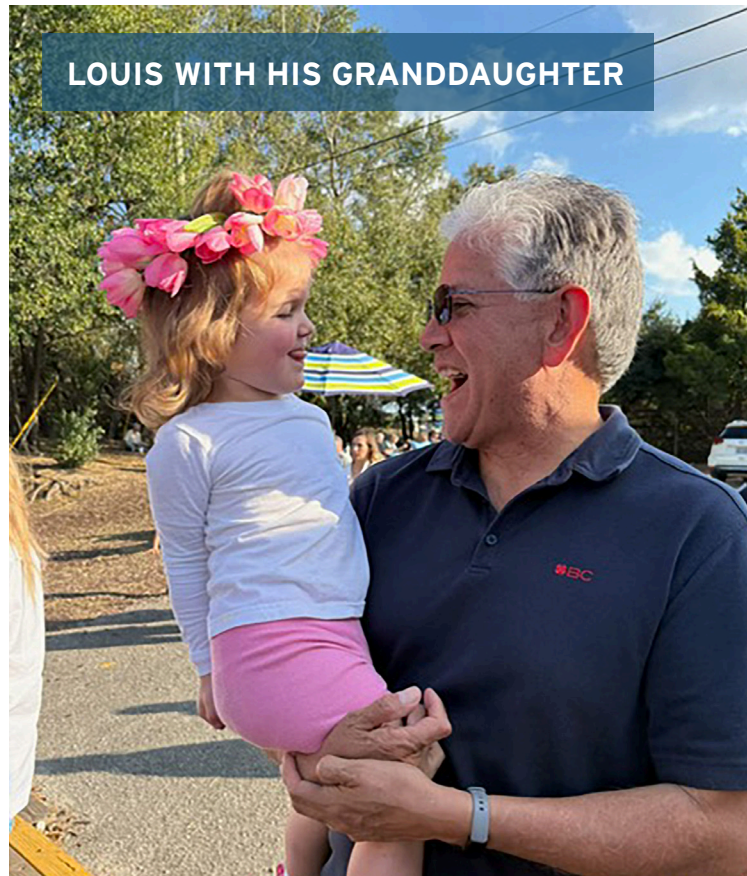
LOUIS'S JOURNEY FROM DESPAIR TO HOPE

Louis Ramirez donates to VeDA because he knows how powerful a lifeline can be. When his life was upended by sudden dizziness, vision problems, brain fog, and imbalance in 2021, answers were hard to find—and hope felt distant.

After months of worsening symptoms and limited support, a desperate question to Siri led Louis to the Vestibular Disorders Association. When he called, someone listened. With VeDA's guidance, specialists finally identified unilateral vestibular hypofunction, followed later by vertical heterophoria



LOUIS WITH HIS GRANDDAUGHTER



and, years later, vestibular migraine. Treatment and lifestyle changes helped Louis regain about 85% of his “normal.”

Louis's commitment to giving is shaped by both gratitude and experience. As a former nonprofit executive, he saw firsthand how a single donation could change lives. When VeDA became his lifeline during his darkest days, he knew he wanted to be that same source of hope for others.

“VeDA helped me find answers when I felt lost,” Louis says. “My gifts are a way to make sure no one has to face this alone.”

For Louis, giving to VeDA is both thanks—and a promise to be hope for someone still searching for answers.

HUMOR AND VESTIBULAR DYSFUNCTION

IT'S OKAY TO LAUGH

By Karen R. Mizrach

“Living with a chronic illness is no joke—except when it is. Between endless doctor appointments, unsolicited medical advice, and the daily grind of managing symptoms, humor has become a lifeline for many people in the chronic illness and disability community.”

- Brendan MacDonald

At the beginning of my vestibular journey, I didn't laugh or find anything amusing for a long time. Life seemed intense and scary. I cried a lot and felt hopeless. When our bodies and minds are facing life-changing challenges, all our energy is focused on survival from day to day. It is serious business. Yet, rediscovering the funny bits in life happened, and it felt good. It turns out laughing and giggling are not just silliness. They are healing and fundamental parts of a good life.

MENTAL HEALTH

“Activating your parasympathetic nervous system through laughter can be a boon for your whole body.”

- Dr. Tworek, The Cleveland Clinic



Have you ever watched a funny show or heard a good joke and felt your whole mood lighten? Laughing and feeling silly gives the brain a mental rest and helps connect with people. Humor is a powerful distraction, changing your focus away from the serious and difficult. When you can laugh with other people, that adds positivity to conversations and reduces the constant sense of doom. Your brain relaxes, and stress reduces and you, all of a sudden, become connected to other people on a fun, light level.

It's ok to laugh and be silly. Your vestibular symptoms are still there, but you can access another part of yourself. Finding this lighter mood, the connection with others, and rediscovering a fun part of life is extremely important.



THE HEALING PROPERTIES OF LAUGHING

“At its most basic level, laughter affects our physical body. It exercises our diaphragm, enabling us to take in more oxygenated air and stimulating our lungs. Moments of raucous laughter also relieve tension in our muscles. This leads to several benefits.”

- M. Goodnight

Research shows that laughing causes physical, beneficial changes in the body. Laughter reduces cortisol levels (stress hormones), and increases “feel good” hormones (endorphins). Heart rate and blood pressure are lowered, as is the sensation of pain by the release of natural opiates from the pituitary gland. When you laugh the brain receives a boost of oxygen, which improves mental performance. A belly laugh works the tummy muscles. And laughing or giggling (even singing and humming) stimulates the vagus nerve, which helps the body calm and relax.

COPING TOOL

“Chronic illness humor isn’t just about cracking jokes—it’s a powerful coping mechanism that helps turn frustration into laughter and isolation into connection.”

- Brendan MacDonald

I remember going to the doctor on a particularly bad day. Staff had to come out to my car and put me in a wheelchair



so I could get inside the office. When the doctor came in to see me, I burst into tears and couldn’t pull myself together. It was an awful day. But when I thought about it later, I actually laughed. I pictured myself in the situation, and for some reason, the whole thing struck me as pathetic and then funny. When I told a friend about it, we both laughed. I noticed the next time I went to the doctor, I wasn’t as worried or stressed. I even joked with the doctor about “the last time”. The doctor visibly relaxed as she saw that I was able to be light about what had happened.

Seeing your condition through a funny lens reduces the sense of suffering. It can help you get through moments that feel defeating and tragic. Humor helps you manage the unfunny.

WHERE TO START

What used to make you laugh? What did you do for fun? Think about humor in your life before vestibular issues and revisit those situations. Maybe a TV show was a favorite release or talking with certain people could always make you laugh. Pick one thing and make it a regular activity. Of course, it’s possible you won’t find the same things funny anymore. So search around for something new.

Social media can be a wonderful resource for humor. There are websites that have daily jokes. There are laughing yoga classes. There are comedian reels on Instagram. One of my favorites is Josh Johnson. Or, maybe your friends on Facebook are posting silly photos. Even online support groups can offer a laugh and release from seriousness. As other patients offer anecdotes about crazy trips to doctors, weird dizzy feelings, and reactions from family, the group often has a good laugh. These are connections that allow you to see humor in certain experiences, and a release from loneliness.

If you enjoy journaling, try to write about silly thoughts or funny experiences, or even poke fun at yourself a bit. It’s ok to let go like this. You will feel the release and some of your old self creep in.

“A healthy sense of humor might seem like a soothing balm or a light diversion during tough times, but it is much more powerful than something that simply lulls us or calms us down.

- Madelaine Goodnight

Laughing about life is not denying tough times. It’s actually showing strength and resilience in dealing with life’s challenges. You can’t choose your health conditions, but like all life’s situations, you can choose your response. Obviously, you won’t be laughing all day. Sometimes there is nothing funny, or it’s time to be serious and in problem-solving mode. But make time to smile, to laugh, to find the silly side. Your nervous system will thank you, and you will begin to feel the difference.



RESEARCH SUMMARY

Allergy and autoinflammation drive persistent systemic inflammatory response in Meniere's Disease: A longitudinal study

Reviewed by
Jose Antonio Lopez Escamez, PhD

UNDERSTANDING THE STUDY

This research looked at why Ménière's Disease (MD)—a condition that causes dizzy spells (vertigo), hearing loss, and ear pressure—affects people so differently. Doctors have long suspected that the immune system plays a role, but “inflammation” can mean different things.

The study asked:

- Do some patients show signs of allergic inflammation?
- Are there other autoimmune diseases (when the immune system attacks the body)?
- Or autoinflammatory (when the body's first-line defenses go into overdrive)?
- And can we tell these groups apart using blood tests?

HOW THE STUDY WAS DONE

The researchers followed 72 people with Ménière's Disease for two years. Several times during that period, they

measured cytokines—proteins that signal inflammation—in each person's blood. They looked for patterns and tracked whether those patterns stayed the same or changed over time.

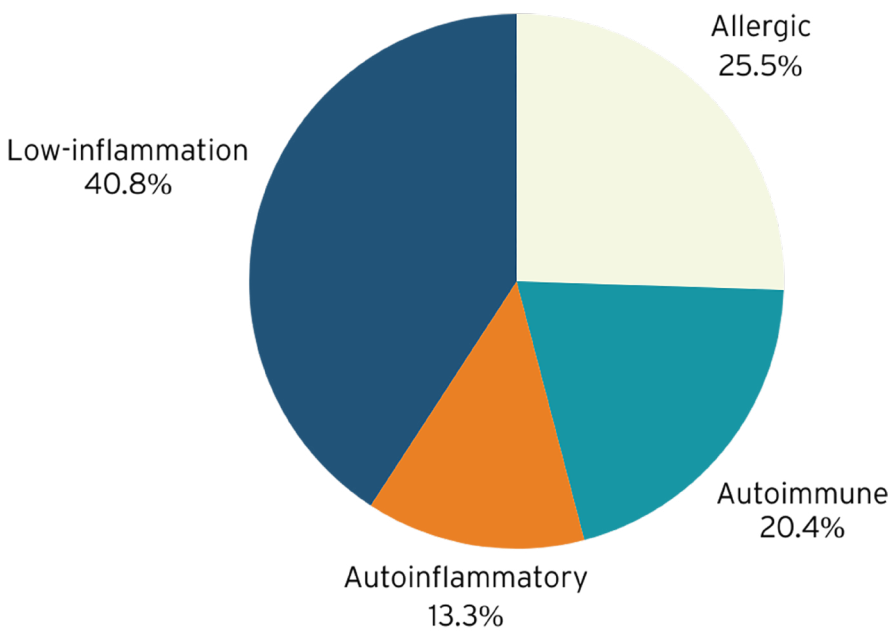
They also took some patients' blood plasma into the lab and exposed it to immune cells to see how it affected them. This helped the scientists understand which type of immune response each patient's blood triggered.

WHAT THEY FOUND

Four clear groups emerged:

1. Allergic type (about 25%) - These patients had high IgE, the antibody linked with allergies. Their blood made immune cells behave like those involved in allergic reactions.
2. Autoimmune type (about 20%) - These patients had higher TNF-alpha levels, a chemical often elevated in autoimmune diseases.
3. Autoinflammatory type (about 13%) - These patients had higher IL-1 β , a sign of activation of the NLRP3 inflammasome, part of the body's “danger alarm” system.
4. Low-inflammation type (about 40%) - These people had very low levels of inflammatory markers and they could be part of the patients with genetic mutation.

Most people stayed in the same group throughout the study, suggesting that



these immune patterns are relatively stable over time. Some overlap existed—for example, some patients with an allergic-type phenotype also showed autoinflammatory activity, suggesting

that inflammation can be mixed.

WHY IT MATTERS

Ménière's Disease is probably not a single illness but a group of related disorders with different immune causes. That might explain why one treatment works for some people and not others. If future studies confirm these findings, doctors could someday use blood tests to personalize treatment:

- Allergy-type patients might benefit from allergy-related medicines.
- Autoinflammatory patients might respond better to drugs that target the inflammasome or the IL-1 β

pathway.

- Autoimmune-type patients might need therapies that quiet specific immune attacks.
- Those with low inflammation might need completely different, non-immune approaches.

WHAT IT MEANS FOR PATIENTS

The study doesn't test treatments, but it offers hope. By identifying clear immune “signatures,” doctors could move toward tailored care instead of one-size-fits-all treatment. About 60% of participants showed some form of inflammation, while 40% did not, reminding us that not every case of Ménière's Disease is driven by inflammation.

TAKEAWAY

This research shows that the immune system plays an important—but varied—role in Ménière's Disease. Recognizing whether a person's disease is allergic, autoimmune, autoinflammatory, or non-inflammatory could someday guide more effective, individualized treatments.

Source: Lidia Frejo, Francisca E. Cara, Marisa Flook, Paula Robles-Bolivar, Alba Escalera-Balsera, Maria Alharilla Montilla-Ibañez, Emilio Dominguez-Duran, Marta Martinez-Martinez, Patricia Perez-Carpena, Jose Antonio Lopez-Escamez, Allergy and autoinflammation drive persistent systemic inflammatory response in Meniere Disease: A longitudinal study, Clinical Immunology, Volume 271, 2025, 110413, ISSN 1521-6616, <https://doi.org/10.1016/j.clim.2024.110413>.



5018 NE 15TH AVE, PORTLAND, OR 97211, USA
800.837.8428 | INFO@VESTIBULAR.ORG | VESTIBULAR.ORG

CHANGE SERVICE REQUESTED

NONPROFIT ORG
U.S. POSTAGE
PAID
PONTIAC, IL
PERMIT NO. 592

GIVE A SCHOLARSHIP... CHANGE A LIFE!

VeDA's virtual conference is coming up, bringing together top experts to share vital information about managing dizziness and imbalance. But for many people struggling with severe symptoms, attending a five-day event is impossible—brain fog, fatigue, and disorientation make it overwhelming.

That's why we're inviting you to sponsor a scholarship that will provide transcripts and recordings to a person who needs them.

With your \$65 donation, you can ensure one person will get the knowledge and support they need to understand their condition and start getting better.

Plus, your donation will support all of VeDA's important work!

You can change a life today by sending a special gift at **VESTIBULAR.ORG/GIVE** or using the envelope between pages 8-9.



**SCAN THE QR CODE ABOVE TO
MAKE A DONATION**

To learn more about this life-changing conference, see pages 8-9 or visit **VESTIBULAR.ORG/LRL**