Bilateral Vestibular Hypofunction

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Patient Fact Sheet

Bilateral vestibular hypofunction (BVH) is a condition where there is partial or complete loss of function of both inner ears. The inner ear (vestibular) system controls vision when the head is moving as well as balance. This system tells your body where you are in space.

Loss of inner ear function can cause imbalance especially in the dark, on uneven surfaces, and when you are looking around. If the reflex from the inner ears to the eyes is not working, objects in your environment will "jump" or "bounce" when you are moving.

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What causes BVH?

- Medications that damage the inner ear nerve or hair cells (eg gentamicin, chemotherapy drugs)
- Sequential damage (loss of one Inner ear function at a time) that occurs at two different times in your life
- Autoimmune disease with gradual deterioration of both inner ear systems
- Meniere's disease that effects both right and left inner ears
- Acoustic neuromas (benign tumor on the inner ear nerve)
- Meningitis (swelling of the protective membrane of your brain or spinal cord)

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What is the treatment of BVH?

Vestibular physical therapists will see you weekly for typically 5-7 weeks. You will be taught gaze stability exercises to perform a total of 12-20 minutes per day to help you see clearly when you are moving; as well as balance and walking exercises to do 20 minutes a day. Daily walking program will also be recommended.

Safety Recommendations:

- Pay more attention to your surroundings, feel your feet on the ground, and widen your base of support
- Remove throw rugs, add night-lights, and use flashlights at night to reduce risk of falls
- Install sturdy handrails to stairs and bathrooms to decrease the risk of falls
- Do not swim alone and always use a life jacket when boating. You
 may not be able to tell which way is up when you are under water.
- Your physical therapist may teach you how to use a cane or hiking poles outdoors on uneven surfaces to decrease your risk for falls

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