Lifestyle Management for Individuals with Vestibular Disorders

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Lifestyle Management for Individuals with Vestibular Disorders

Michelle Pock, Becki Cohill, OTD, OTR/L, and Susan MacDermott, OTD, OTR/L

BACKGROUND

An estimated 35.4% of US adults over the age of 40 experience vestibular impairments (Agrawal, Ward, & Minor, 2013). Individuals with vestibular disorders have concerns that impact lifestyle including limiting activities of daily living, limiting participation in social events, difficulty driving, and difficulty working (Cohen, 2014). Occupational therapists are able to help individuals with vestibular disorders by task analyzing symptom provoking activities, assessing the impact of symptoms on occupations, providing adaptations, and providing ways to modify environments (Gronski, Neville, Kannenberg, & Cohen, 2017). While occupational therapists are qualified to provide services to sustain and improve the occupational performance of individuals with vestibular disorders, occupational therapy is not well represented in this area particularly in addressing lifestyle components for vestibular disorders.

PURPOSE

Outcome objectives:
1. Identify common lifestyle factors that impact vestibular symptoms and can support management of symptoms of people with vestibular disorders
2. Develop and propose a program that addresses and promotes lifestyle modification
3. Assess opportunities and barriers for current OT role in vestibular settings.
4. Advocate for OT role in prevention and management of lifestyle concerns for vestibular populations.

METHODS

Individuals with vestibular disorders and practitioners working with these individuals were interviewed at RISE Physical Therapy and an otoneurology practice. Patient appointments were observed using field notes. Individuals from an online vestibular support group were also surveyed. Responses were recorded and analyzed for themes. The findings were used to develop and propose an occupation-based lifestyle modification program for individuals with vestibular disorders.

PROGRAM DEVELOPMENT

Program goals:
• Bring awareness to activity patterns
• Analyze activity patterns and personal risk factors
• Change habits and routines
• Development of a customizable, personal plan

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<tr>
<th>THEME</th>
<th>EXAMPLES OF RESPONSES</th>
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| Restriction of Daily Activities | • “I no longer feel safe driving on the freeway. I can no longer go places”
• “Fluorescent lighting is a trigger for my symptoms. I can’t stay long in places like the grocery store or Target” |
| Restriction of Social Interaction | • “Socializing is very difficult because I can’t hear the conversation. Struggling to hear and respond is exhausting”
• “Worst.. not being able to hear the sweet voices of my grandchildren or socialize… and hear sermon at church” |
| Difficulty Navigating and Accessing Healthcare | • “Everything has changed. I have had difficulty getting a diagnosis and treatment for many years now”
• “I haven’t been able to see a doctor to address my dizziness yet.” |
| Difficulty Identifying and Understanding Triggers | • “I have no idea what exacerbates my symptoms”
• “Haven’t sorted that out my triggers as it’s been recent” |
| Increased Stress | • “I have less energy, less mental focus, anxiety which had never been an issue”
• “I had a Meniere’s attack. I believe it was triggered from the stress of my brother dying” |

CONCLUSION

Vestibular disorders have considerable impact on the affected person’s health and well-being (Agrawal, Ward, & Minor, 2013). The findings from this capstone project support previous research on the impact vestibular disorders have on daily life and the need for an increased role for occupational therapy in providing lifestyle-based intervention for the population. Occupational therapy can provide a unique contribution to the interdisciplinary healthcare team working with individuals with vestibular disorders.

REFERENCES


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