

Characterizing and treating dizziness after mild head trauma.

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Abstract

OBJECTIVE:

The objectives of this study were to characterize patterns of dizziness seen after mild head trauma and to examine the diagnosis and treatment of this disorder.

STUDY DESIGN:

Prospective patient registry.

SETTING:

Tertiary referral center.

PATIENTS:

Fifty-eight cases of active duty and retired military personnel who sustained mild head trauma and had resultant dizziness.

INTERVENTIONS:

Vestibular evaluation, characterization by group, and treatment.

MAIN OUTCOME MEASURES:

Outcome measures include characterization of diagnosis types, patient distribution by diagnosis type, and patient outcome.

RESULTS:

Individuals suffering from dizziness after mild head injury were divided into three diagnostic groups. Forty-one percent of the individuals suffered from posttraumatic vestibular migraines, 28% of the individuals had posttraumatic positional vertigo, and 19% of the individuals were classified as posttraumatic spatial disorientation. The remaining 12% of the patients could not be characterized. The positional group had objective physical examination findings, which cleared with treatment in all cases. The migraine group of patients and the disorientation group of patients had distinct abnormalities of the vestibulo-ocular reflex (VOR) and the vestibulo-spinal reflex (VSR). Eighty-four percent of the migraine group demonstrated an improvement of these test results as compared with 27% of the disorientation

group. Mean time to return to work was less than 1 week for the positional group, 3.8 weeks for the migraine group, and greater than 3 months for the disorientation group.

CONCLUSIONS:

Using our patient registry of individuals suffering from dizziness after mild head trauma, we were able to characterize the majority of these cases into one of three more specific diagnostic groups. We present diagnostic criteria, suggested treatment guidelines, and our prognostic data.