WHAT IS BILATERAL VESTIBULAR HYPOFUNCTION

Bilateral Vestibular Hypofunction (BVH) is a vestibular condition affecting both vestibular systems. This often happens secondary to an ototoxic medication, meningitis, sequential vestibular neuritis, progressive disorders, autoimmune disorders, congenital disorders & more. BVH is very rare and causes mostly imbalance, difficulty walking In the dark, gaze instability, and stange 'sensations' in her head.

DIAGNOSTIC CRITERIA

A caloric test (final portion of the VNG) will determine If you have decreased function on either or both of your vestibular systems. If both, are decreased in function then bilateral vestibular dysfunction is present.

CAUSES

- Ototoxic medications (toxic to the ears)
- Congenital dysfunctions
- Traumatic brain injury
- Infections
- Bilateral Meniere's Disease
- Bilateral Vestibular Neuritis

RISK FACTORS

- Genetic predisposition
- Hearing loss & impairment
- Predisposition to Meniere's Disease

WHAT TO DO:

- Physical Therapy: to help you regain some gaze stability (it will likely be imperfect), increase your strength, balance, and ability to walk in the dark.
- Exercise: Strength training will help keep your body strong and bones dense. This prevents falls, and If you do trip, you will be less likely to have a severe accident.

SYMPTOMS

- Imbalance
- Difficulty walking in the dark
- Gaze instability/oscillopsia
- Disorientation
- Falling/stumbling

HOW TO EXPLAIN BVH TO OTHERS

Bilateral Vestibular Hypofunction is a frustrating and invisible disorder in your inner ears. BVH causes a disfunction in both vestibular systems and/or their nerves and sends a constant decreased signal from the ear to your brain. It is mostly idiopathic, but It can arise from other previous vestibular disorders or treatments. This leads to significant imbalance and oscillopsia (unstable gaze). Treating BVH consists of strengthening and vestibular rehabilitation. Additionally, supportive family and loved ones will increase the recovery and