

VESTIBULAR REHABILITATION SIG

APTA & Academy of Neurologic Physical Therapy

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Message from the Chair

Anne K. Galgon, PT, PhD, NCS
Vestibular Rehab SIG Chair

This supplemental Vestibular Rehabilitation SIG (VR SIG) newsletter is featuring a CSM 2019 preview because our fall newsletter exclusively covered our International Conference for Vestibular Rehabilitation. Due to this we were unable to inform our members of the upcoming programming and Vestibular Rehabilitation SIG activities for CSM 2019 in Washington DC. Once again I am excited by the great programming and learning opportunities as well as the chance to see old friends and to meet new people who are interested in advancing the practice of Vestibular Rehabilitation. I would like to invite all interested physical therapists, SIG members, ANPT members, and non-members to come to CSM and find out more about what we are doing.

What should you do when you get to CSM?

The best way to find out what we are doing is to talk with one of the VR SIG leaders. We have a large group of individuals, beyond the elected leaders, that participate in monthly phone calls, committees, task forces and resource production. At the beginning of CSM, we meet to plan our strategic activities for the upcoming year. Any of the leaders would be happy to have an informal chat with you about what is going on and how to become engaged in the VR SIG.

VESTIBULAR REHABILITATION SIG OFFICERS

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FOR MORE INFORMATION GO TO:
[HTTP://WWW.NEUROPT.ORG/GO/SPECIAL-INTEREST-
 GROUPS/VESTIBULAR-REHABILITATION](http://www.neuropt.org/go/special-interest-groups/vestibular-rehabilitation)



Message from the Chair cont.

Where can you find us?

It is a very big conference, hopefully we will stand out by wearing our VR SIG Logo Button.

Here are some places we will be at:

Vestibular related programming through the conference: We are all here to learn, so you can usually find us sitting in the front of the sessions attentively. Even if we appear engaged and talking with each other before and after programming, feel free to come and introduce yourself.

Vestibular poster sessions in the exhibition hall: You might find us wandering through the poster sessions. Poster sessions are always a great place to share ideas and discuss best practices in vestibular rehab.

ANPT booth: In the exhibition hall we will have information about the VR SIG. There may not be a SIG member there at all times, but you can peruse our ICVR special edition newsletter and vestibular hypofunction CPG handouts and pick up a VR SIG Button.

Vertigo-go dinner, Thursday night: VR SIG friends get together at a local restaurant for a meal and fun activities. This is a smaller event, so if you want to come, you have talk someone on the leadership group and get invited.

VR SIG Table at the ANPT Meylin Melter, Friday night: Several people from the leadership meeting will be present to discuss the VR SIG activities.

VR SIG Business Meeting and Breakfast, Saturday morning 6:45 to 7:30 am: It's a little early, but in this meeting we present all the accomplishments and plans for the future. We acknowledge our volunteers and present awards. Most importantly, we have the VR SIG drawing with some excellent prizes including video goggles, a signed ICVR poster of all the speakers, and much more.

The VR SIG is a member run group. Our activities are dependent on member engagement and volunteers. Things happen because our members ask for them. Think about how you would like to see the VR SIG serve physical therapy practice. Let us know and participate. I hope to see you in DC in January.

CSM Programming

Contributed by: Lexi Miles, MPT

Wednesday: Pre-conference Course

Wednesday January 23, 8:00 am – 5:00 pm: An Introduction to Pediatric Vestibular Rehabilitation.

Speakers: Jennifer Christy PT, PhD and Rose Rine PT, PhD

This 1-day course will provide an overview of evidence-based practice for vestibular-related impairments in children. The speakers will review the anatomy, physiology, and development of the vestibular system, as well as the epidemiology of vestibular dysfunction in children. Attendees will learn about diagnostic and clinical testing of vestibular function, examination and evaluation of vestibular-related impairments, and intervention for vestibular-related impairments in children. In addition to case reviews and discussion, the course will include hands-on demonstration and training of evaluation and intervention.

Thursday

Thursday January 24, 8:00 am – 10:00 am. Clinical Practice Guideline: Management Following a Concussive Event.

Speakers: Bara Alsaheen PT, PhD; Airelle Giordano PT, PhD, OCS, SCS; Timothy Hanke PT, PhD; Kathy Kumagai Shimamura DPT, NCS, OCS, FAAOMPT; Rob Landel PT, DPT; Karen McCulloch PT, PhD, MS, NCS; and Catherine Quatman-Yates PT, DPT, PhD

Representatives from the APTA sections for Academy of Neurologic PT, Orthopaedics Section, pediatrics, and sports physical therapy have developed a clinical practice guideline (CPG) for the management of patients aged 8 or older following a concussive event. This session will share the recommendations summarized in the CPG that address patient complaints, including impairments in cervical, vestibular, ocular, balance, dual-task performance, and exertional functions encountered following diagnosis of concussion and acute management. Recommendations for a gradual return to activity after 24-48 hours of rest, if activity does not exacerbate symptoms is advocated. The scope of this CPG is broad, including concussions that occur based on any mechanism, with a focus on return to activity that goes beyond recommendations for return to sport. The process of evidence review will be shared as well as recommendations related to PT screening, examination, differential diagnosis, intervention, and referral. Research recommendations that emerged from this project will be summarized to clarify gaps in our current level of knowledge in each area that is presented.

Thursday, January 24, 11:00 am – 1:00 pm. Pearls of Post-concussion Syndrome.

Speakers: Carrie Hoppes PT, DPT, NCS, OCS; Karen Lambert PT, DPT, NCS; and Anne Mucha PT, DPT, NCS

A small percentage of individuals with concussion will continue to report a variety of persistent symptoms and may be diagnosed with postconcussion syndrome (PCS). Postconcussion syndrome is considered a medically unexplained syndrome. Research has shown that individuals with medically unexplained syndromes rely heavily on their personal expectations and beliefs about their diagnosis and prognosis. In a current era where patients are inundated with negative images and news stories related to concussion, it is possible that negative perception plays a role in persistent symptoms. This session will continue discussion from the CSM 2018 education session, "Pitfalls of Postconcussion Syndrome." The speakers will address clinical pearls for treatment and interaction strategies to guide patients with a diagnosis of postconcussion syndrome to a successful return to activity, work, school, sport, or play. Special emphasis will be placed on diagnosing and treating sensory selection and weighting deficits in individuals with postconcussion syndrome.

CSM Programming cont.

Thursday cont.

Thursday January 24, 3:00 – 5:00 pm: Telehealth in Vestibular Rehabilitation: Are you Ready? Or are you spinning?

Speakers: Linda D'Silva, PhD; Sarah Gallagher PT, DPT, NCS; Alan Lee PT, DPT, PhD, GCS; Sara Oxborough PT; and Karen Skop PT, DPT, MS

Telehealth is on the frontier of our changing health care system. In 2017, Federal PT Section initiatives granted access to telehealth for nearly 700,000 veterans, and the broader health care sector continues to seek out ways to improve access to care. Telehealth has the potential to improve access by connecting patients with the appropriate specialist, eliminating transportation barriers, and reaching those with mobility limitations. Vestibular rehabilitation is an ideal population for the implementation of telerehabilitation (telerehab). Complaints of vertigo and dizziness are prevalent, ranging from 20% to 56% of the United States population, yet access to specialized vestibular rehab is limited and commuting may be unmanageable when dizzy. Telerehab with the vestibular population allows for providing the right care at the right time. The speakers will use case studies to demonstrate how vestibular rehabilitation can be delivered through telerehab. This session will include information on regulations, technology needs, compliance, and reimbursement issues in order to guide stakeholders in potential ways to implement telehealth in any setting with any patient population. Attendees will learn about the current state of evidence on telerehab, including health care cost savings, outcomes, and patient satisfaction.

Friday

Friday January 25, 11:00 am – 1:00 pm: Advances and Future Direction: International Vestibular Rehabilitation Conference.

Speakers: Janet Helminski PT, PhD; Carrie Hoppes PT, DPT, NCS, OCS; and Michael Schubert PT, PhD

Internationally recognized leaders in vestibular rehabilitation presented their cutting-edge research at the 1st International Vestibular Rehabilitation Conference sponsored by the Academy of Neurologic PT, APTA. This session will focus on summarizing the key advances in and future directions of vestibular rehabilitation presented at the conference. The speakers will discuss evidence-based differential diagnosis of central from peripheral vestibular disorders, applying a new understanding of the biomechanics of benign paroxysmal positional vertigo (BPPV) to interpret atypical nystagmus patterns observed during positional testing, using principles of motor learning to optimize the performance of the vestibular ocular reflex in individuals with vestibular dysfunction, and implementing the ideal particle repositioning maneuver based on new biomechanics of BPPV. Attendees will learn about exciting new technologies that may improve care for persons with balance and vestibular disorders. Cases will be used to highlight the differential diagnosis process and therapeutic interventions.

CSM Programming cont.

Friday cont.

Friday January 25, 11:00 am – 1:00 pm: Clinical Management of Vertigo With Concurrent Acute Traumatic Brain Injury.

Speakers: Stephen Banks PT, DPT, OCS; Brianna Fitzpatrick PT, DPT; Kerry Lammers PT, DPT; and Amanda Soto PT, DPT, GCS, NCS

This session will present an evidence-based approach to vestibular rehabilitation for individuals with traumatic brain injury (TBI). Vertigo is a common symptom that occurs in up to 80% of people after TBI. Benign paroxysmal positional vertigo (BPPV) is frequently encountered in the acute care setting, but patients presenting with TBI in the hospital setting often are not screened for vestibular sequelae. PT examination and evaluation at bedside can be instrumental in defining the etiology and guiding quick and effective treatment.

Recent evidence indicates that patients with TBI and concurrent BPPV have similar resolution and recurrence rates as non-traumatic BPPV cases, and can be treated for single canal involvement with 1-2 canalith repositioning maneuvers. However, patients with TBI may require additional overall treatment time secondary to a higher incidence of multi-canal involvement and vague symptom report, and they may require altered positioning for effective assessment and treatment. The speakers will discuss dizziness and BPPV post TBI and identify components of vestibular assessment appropriate for the acute care setting. Attendees will learn to apply clinical reasoning to identify red flags and select appropriate means of vestibular rehabilitation management to guide the plan of care and discharge plan for patients with TBI.

Friday January 25, 3:00-5:00 pm: PPPD: early detection and integrative rehabilitation therapy improves outcomes.

Speakers: Tara Denham PT, MA; Jennifer Fay PT, DPT, NCS; Eva Mihovich PhD; and Artmis Youssefnia

Persistent postural-perceptual dizziness (PPPD) is a new term for a common chronic dysfunction of the vestibular system and brain that produces unsteadiness, unremitting dizziness, and/or nonspinning vertigo comprising 15% - 20% of cases in vestibular clinics. PPPD arises from central maladaptation from a number of causes, including a peripheral vestibular disorder, with symptoms lasting for 3 months or more. As a means of compensation, many patients with PPPD develop an overreliance on environmental visual cues leading to visual dependency and visual vertigo. Patients often develop secondary functional gait disorder, anxiety, avoidance behavior, and severe disability. Years of chronic symptoms lead to ongoing disability and further ingrained illness beliefs. Early recognition and treatment of key signs and risk factors for developing PPPD can be instrumental in preventing onset and improving patients' function and quality of life. Plans of care that include patient education, vestibular rehabilitation, cognitive and behavioral therapies, and medications substantially reduce morbidity and offer the potential for sustained remission. The speakers will highlight specific psychosocial risk factors for PPPD and potential methods for identifying and screening individuals. The multidisciplinary panel also will present case studies of individuals with PPPD.

CSM Programming cont.

Friday cont.

Friday January 25, 3:00 pm – 5:00 pm: Geriatric Concussion: What Do We Know? What Do We Need To Know?

Speakers: Karen McCulloch PT, PhD, MS, NCS; and Mary Beth Osborne PT, DPT, NCS

The focus of concussion in the popular press has been primarily on sports related concussion, including linking the history of traumatic brain injury (TBI) to possible degenerative neurologic conditions such as dementia and Parkinson disease. However, the incidence of TBI during older age is increasing, most commonly as a result of falls. Mild TBI or concussion accounts for the majority of brain injuries across the lifespan, but geriatric concussion is not well studied. This session will review the available evidence regarding mild TBI in those 65 and older related to risk factors, common presentations, factors that influence outcomes, and best practices in examination and intervention. A clinical specialist will share case examples to illustrate application of the evidence to patients with a range of presenting complaints and functional levels. Small group discussion will allow attendees to consider application of the session information to their practice settings. Knowledge gaps for management of geriatric concussion will be identified.

Saturday

Saturday January 26, 6:45 am – 7:30 am. Vestibular SIG Business Meeting at the Clinician Breakfast.

Location: Walter E. Washington Convention Center

Room: 152A

Come for breakfast and hear about what the SIG has been up to for the past year and what we plan to accomplish next year. This is a great opportunity to learn how you can get involved in the SIG. All who attend will receive tickets to be entered into a drawing for a number of fabulous prizes including vestibular text books, 3D labyrinth models, video frenzel goggles and more. We hope to see you there!

Saturday January 26, 8:00 am – 10:00 am. Just Screen It! Developmental Disability, Vestibular Deficit, or Both? Part 1.

Speakers: Jennifer Christy PT, PhD and Rose Rine PT, PhD

This is part 1 of 2 sessions providing a review of vestibular deficits and related impairments, signs, and symptoms in children, particularly with regard to developmental disabilities. In part 1, the speakers will review vestibular system anatomy and physiology and discuss the epidemiology of vestibular diagnoses and the developmental pathologies known to affect vestibular function in children. A comprehensive review of the evidence of the incidence and presentation of specific vestibular diagnoses in the pediatric population will be presented. The presenters will compare signs and symptoms of peripheral and central vestibular dysfunction to assist clinicians with differential diagnosis in pediatric patients. Attendees will learn how to perform evidence-based clinical tests to screen for vestibular-related impairments.

CSM Programming cont.

Saturday cont.

Saturday January 26, 8:00 am – 10:00 am. Bracketology of Concussion: Ready for Tip-Off.

Speakers: Bara Alsalaheen PT, PhD; Jason Hugentobler PT, DPT, SCS; Bobby Jean Lee PT, DPT, SCS; and Anne Mucha PT, DPT, NCS

As concussion incidence and recognition continues to rise, so too does the need to identify those deficits that can be treated with physical therapy. Physical therapists must have a thorough understanding of the roles of the different members of a multidisciplinary team, as well as the many different brackets of concussion that may require intervention. Evidence suggests that each of these brackets appear to have some benefit in the realm of concussion rehabilitation. One of the challenges facing today's clinician is the available resources they have depending on the practice setting, as well as where they should start with their patients who have multiple brackets impacted. This session features multiple therapists known for their expertise in concussion management, discussing various evidence-based viewpoints. This session opens with a selection of abstract platforms presented by their authors or contributors. It is followed by a relevant case presentation, then each presenter discusses the evidence supporting treatment of particular brackets within the context of multimodal physical therapy. It closes with a question-and-answer period for the panel of presenters.

Saturday January 26, 11:00 am – 1:00 pm. Just Screen It! Developmental Disability, Vestibular Deficit, or Both? Part 2.

Speakers: Megan Beam PT, DPT, PCS, Jennifer Christy PT, PhD; Gretchen Mueller DPT; and Rose Rine PT, PhD

This is part 2 of 2 sessions providing a review of vestibular deficits and related impairments, signs, and symptoms in children, particularly with regard to developmental disabilities. In part 2, the speakers will discuss evidence-based practice for identification of and intervention for children with central and peripheral vestibular deficits. A case study/case series format will be used to compare and contrast the signs and symptoms warranting vestibular screening and testing. The presenters will explore clinical and diagnostic tests, interpretation of results, and intervention strategies.

Saturday January 26, 11:00 am – 1:00 pm. Is the Proof in the Pudding? Psychometrics in Concussion Rehab?

Speakers: Rebecca Bliss, PT, DPT; Karen Skop PT, DPT, MS; and Diane Wrisley PT, PhD

Concussion as a rehabilitative injury is becoming more mainstream, with nearly 75% of head traumas being classified as mild, according to the Centers for Disease Control and Prevention. The International Consensus on Concussion in Sport, published in 2017, clearly recognizes the multidisciplinary rehabilitation team as key influencers in return to sport and return to play worldwide. While research continues to emerge in this realm, many clinicians are treating and managing the sequelae of concussion based on subjective reporting of symptoms. In this session, the speakers will examine the literature for each of the rehabilitative concussion trajectories and present the evidence supporting key examination and treatment tools. Attendees will learn about current concepts in concussion management, clinical goals of identification of symptom drivers, and individualized, effective intervention. The presenters will examine the clinical trajectories and outcome tools for cervicogenic, vestibular, autonomic, oculomotor, and posttraumatic migraine, as well as anxiety/mood and sleep disorders. The speakers will present case-based examples with clinical reasoning for each profile given the current supporting evidence, and discuss the evidence and efficacy of many tools clinics are using for management.

Vestibular SIG Open Leadership Positions

Contributed by: Kurt van der Schalie

The months leading up to the Combined Sections Meeting are busy for the Nominating Committee as we work to prepare a slate of candidates for the SIG leadership election in the spring. There are three positions to be filled this year. Those elected to leadership positions for the SIG normally serve for three-year terms. This year is unique, however, as one who is elected to the Chair-Elect position will serve a one-year term, to be immediately followed by a three-year term as the SIG Chair. The Vestibular Rehabilitation Special Interest Group is made up of an enthusiastic and dedicated group of volunteers.

I am also in my final year with the Nominating Committee. My participation introduced me to the spirited people and important work that make the Vestibular SIG such a crucial resource. The efforts of this group continue to make a big impact on the physical therapy community and the patients we treat. If you are interested in contributing to this team, in addition to organizing and supporting their efforts, please consider running for one of the positions described below and contact the Nomination Committee!

Nomination forms are due by February 28, 2019. Please contact the nominating committee with your questions and for access to the forms.

The committee:

Kurt van der Schalie - kurt.vanderschalie@yahoo.com

Linda D'Silva - ldsilva@kumc.edu

Ryan Schrock - schrockdoc@yahoo.com

Chair Elect

The Chair-elect will serve one year prior to assuming the office as Chair of the SIG. Most of the official duties during this year are devoted to becoming familiar with the operations of the SIG and the duties of the Chair position. The Chair-elect will also assist the Chair in preparing for meetings, CSM, and the Board of Directors retreat. After one year, at the completion of the current Chair's term, the new Chair begins a three-year term. The Chair provides supervision of assignments and performance of the SIG officers and will appoint committees and delegate tasks as necessary. They will provide oversight of regular communication to SIG members and leadership, including the website, newsletters and SIG officer conference calls. The Chair will attend all meetings of the SIG, regular SIG chair conference calls, and the leadership meeting at CSM. They will submit a committee report to the ANPT President prior to the Board of Directors fall retreat and a yearly budget to the Treasurer in the fall.

Vice Chair

The Vice Chair will assist the Chair in all SIG activities, and will assume the duties of the Chair if they are absent or incapacitated. They will provide assistance in the preparation and submission of a yearly SIG plan to the Board of Directors. The Vice Chair also attends the meeting with the Academy Vice President at CSM. In the vestibular SIG, the Vice Chair has traditionally had a focus on meeting the educational needs of our members. Particularly in relation to CSM, the Vice Chair works to organize programming in vestibular rehabilitation. Lexi Miles, who is in her final year in this position, has done amazing work to ensure we have great speakers and a good assortment of topics presented each year.

Vestibular SIG Open Leadership Positions cont.

Contributed by: Kurt van der Schalie

Nominating Committee

The Nominating Committee consists of three members, with one new member elected each year. Each member will serve as the committee chair in their final year. The Committee is responsible for preparing a slate of candidates for open SIG officer positions each year, and helps to build ballots and conduct annual elections. The Committee chair will attend the SIG meeting with the Academy Vice President at CSM.

VR SIG Business Meeting Drawing Donators

Thank you to the following individuals and organizations for their gracious donation of items for our business meeting raffle:

APTA Learning Center: \$100 gift certificate

Textbooks: A Clinician's Guide to Balance and Dizziness (Chuck Plishka), Vestibular Rehabilitation (Susan Herdman), Balance Function Assessment and Management (Neil Shepard, Gary Jacobson and Plural Publishing)

FA Davis: Neuronotes

Physiotools: Vestibular and Balance Exercise DVD

VEDA (Vestibular Disorders Association): Membership

Journal of Vestibular Research: Subscription

Micromedical: VisualEyes Monocular goggles and computer

Vestibular First: Vestibular apparatus ball maze and 3D vestibular model

Vestibular Today: Plastic labyrinth model

CALL FOR NEWSLETTER CONTRIBUTORS!!!!

Have you presented a poster at CSM?

OR

Do you wish you had more information about that poster you saw at CSM?

Consider contributing to the newsletter!!

Submit your poster presentation for a chance to be featured in the next newsletter. If you are interested in submitting your poster please contact Jasmine Edwards, PT, DPT, NCS at jjacksondpt@gmail.com or Debbie Struikma, PT, NCS at dstruikma77@aol.com.