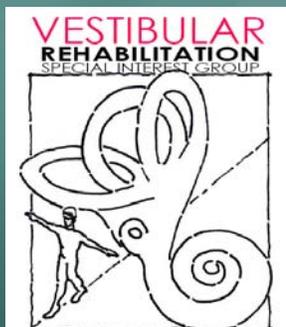


FACT SHEET



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Anxiety and Dizziness

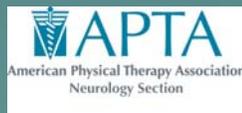
The Relationship between Anxiety and Dizziness

Patients who complain of dizziness (including vertigo) may also exhibit symptoms of psychiatric disorders, most notably anxiety. Despite complaints of dizziness or vertigo, these patients may or may not present with an identifiable vestibular pathology.¹ Rather than the symptoms of anxiety and dizziness being attributable to either a psychiatric or a vestibular disorder, it is more likely that both disorders are present to some degree and are interrelated.² For some patients, dizziness resulting from a vestibular disorder can lead to or exacerbate an anxiety disorder. Furthermore, an existing anxiety disorder can affect how a patient perceives the sensation of dizziness from a vestibular disorder. Finally, vestibular and anxiety disorders could both stem from a common underlying pathology.

The combination of dizziness and anxiety can lead to maladaptive behaviors in many patients. Patients may begin to avoid symptom-provoking positions, activities, or environments altogether, leading to decreased participation in functional activities, physical deconditioning, and social withdrawal.

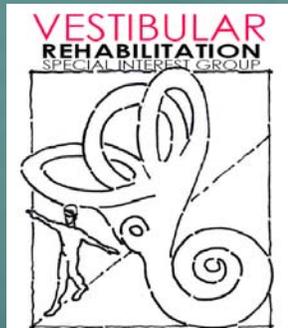
Patient Management and the Role of Physical Therapy

Managing a patient with both a vestibular and anxiety disorder is often complex and frequently requires a team of health care professionals. Vestibular rehabilitation therapy under the guidance of a properly trained physical therapist can help patients adapt to and compensate for altered vestibular function.³ However, many of the exercises associated with vestibular rehabilitation cause dizziness initially. While these symptoms are expected to improve over time, reproducing them can be very distressing for patients with an underlying anxiety disorder. In many cases, patients also benefit from working with their physician to find an appropriate medication to reduce anxiety and with a cognitive-behavioral therapist for anxiety management strategies.^{4,5}



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