Acoustic Neuroma

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Fact Sheet

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VESTIBULAR REHABILITATION
SPECIAL INTEREST GROUP

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ACADEMY OF NEUROLOGIC PHYSICAL THERAPY

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What is an acoustic neuroma?

Acoustic neuromas can also be called cerebellopontine angle tumors, as well as vestibular or acoustic schwannomas. The vestibular (balance) nerve runs from the inner ear to the brain. An acoustic neuroma is a benign tumor that slowly grows on this nerve. Most of the time, the tumor occurs in only one ear. Because this tumor can also press on the cochlear (hearing) nerve, you might not be able to hear as well and you may have tinnitus (a ringing or buzzing noise). People with acoustic neuromas can also have problems with dizziness, vision, and balance. If the tumor is large, it may cause weakness and/or numbness of the face.

How can physical therapy help if I have not had surgery?

Physical therapy will not make the tumor go away or decrease its size. A physical therapist will teach you exercises to help decrease dizziness and imbalance, and will teach you about strategies to prevent falls. If you plan on having surgery, the therapist will teach you what to expect as well as exercises that you can do after surgery that can speed up your recovery.

If I have had surgery or radiation for the acoustic neuroma, what can I expect?

Since the most common method of treating an acoustic neuroma is to remove it with surgery, the inner ear and its nerves are damaged during the surgery. For this reason, for first few days after the surgery, you will have a constant feeling of dizziness, such as feeling like you or the room is moving or spinning (vertigo). Head movement may worsen the symptoms for a short time. When you look at things, you may have a hard time focusing on them because they may “jump” or “bounce” around. Because you cannot focus it may be hard to read or watch T.V. When you get out of bed, you may feel off balance. At this time, you have the greatest risk of falling, so when you stand or walk keep your feet wide apart.

Within a few days, you will begin to feel better. In some patients, the dizziness symptoms change from a constant feeling of spinning to a vague sense of dizziness. These symptoms may happen with quick head

movements or during specific situations such as when bending or walking down the aisle of a supermarket. Your doctor should recommend physical therapy to help decrease your problems.

After surgery, how can physical therapy help me?

Research has shown that the earlier you start moving around the faster your recovery will be. Even though movement is encouraged, it is important to understand that you need to gradually increase your activity level. The brain is healing and cannot respond normally so you do not want to overdo it. You will know you have been too active too soon if your dizziness increases.

Your physical therapist will ask questions about your symptoms and day-to-day activities, and will also do tests to determine the type of problems you are having. Physical therapy can help reduce the dizziness, the "jumping" or "bouncing" vision, and/or balance difficulties so that you can return to the activities and responsibilities you could do before. This is accomplished by exercising for a short period of time several times each day. Some exercises require head movement while you look at objects and others challenge your balance while standing or walking. If you have weakness in your face muscles, you may be taught exercises to help strengthen these muscles. Finally, physical therapy will require a commitment on your part to regularly do the exercises.

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