

# Acoustic Neuroma

## (Vestibular Schwannoma)

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### Patient Fact Sheet

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### *What is an acoustic neuroma?*

Acoustic neuromas can also be vestibular schwannomas. An acoustic neuroma is a benign, slow-growing tumor on the vestibular (balance) nerve that runs from the inner ear to the brain. Most of the time, the tumor occurs in only one ear. Because this tumor can also compress the cochlear (hearing) nerve, you may have hearing loss, as well as tinnitus (a ringing or buzzing noise) in one ear. People with acoustic neuromas may also have dizziness, visual disturbances, and imbalance. If the tumor is large enough, it may also cause weakness and/or numbness of the face. Medical treatment options include monitoring the tumor with scans every 6-12 months (watchful waiting), surgery to remove the tumor, or stereotactic radiosurgery (radiation therapy) to stop the tumor from growing.

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

Physical therapy can help if you have dizziness or imbalance caused by the acoustic neuroma. The PT will start you on a home exercise program after performing an evaluation. Your PT will also educate you about strategies to prevent falls, especially in the dark or when you move your head. If you plan on having surgery or radiation, the therapist will teach you what to expect after the procedure (Pre-hab) as well as give you exercises that you can start at home before restarting PT.

### *If I have had surgery to remove the acoustic neuroma, what can I expect?*

When the acoustic neuroma is removed through surgery, the inner nerve is also removed or damaged. For this reason, for first few days after the surgery, you will likely have a constant feeling of dizziness and/or vertigo (feeling like you or the room is moving or spinning). Head movement usually worsens the symptoms. When you look at things, you may have a hard time focusing because they may “jump” or “bounce” around. Because of this, you may have difficulty reading or watching T.V. You will also have trouble walking and be at risk for falling. It is important to keep your feet wide and feel the floor when you first get out of bed

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Within a few days, you will usually begin to feel better. Your dizziness will change from a constant feeling of spinning to a vague sense of dizziness. These symptoms worsen with quick head movements or during specific situations such as when bending over or walking down the aisle of a supermarket. Physical therapy will be recommended to help you return to your normal activities without symptoms or loss of balance

### ***After surgery, how can physical therapy help me?***

Physical therapy will help you recover. Research has also shown that the earlier you start PT, the better the outcome. Outpatient PT should be started within 2 -3 weeks of the surgery as long as there have been no complications. It is important to understand that you need to **gradually** increase your head movements and activity level since your brain is healing. In therapy, your PT will ask questions about your symptoms and day-to-day activities. They will also do tests to determine the level you need to start your home exercises, which will need to be performed a few times daily. Gaze stabilization exercises will help you see more clearly when you are moving. The PT will also teach you exercises that will help you use all your balance systems including your vision, inner ear on the good side, and the information you get from your feet. Other exercises will require head movements while you walk, or balance activities such as tossing a ball or balloon. You will always be given a walking program at your level of ability to improve your endurance at least 20 minutes a day. To achieve the best possible results, physical therapy will require a commitment on your part to perform the home exercises as prescribed.

### ***References:***

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