



"Oh, I feel so dizzy."

## Primary goal: avoid falls and injuries

Whether on a roundabout or because you move your head upwards too quickly - dizziness usually has a clear cause and usually disappears after a short time. However, you may have noticed that many older people in particular complain of dizziness and balance problems.

Unfortunately, these symptoms are often underestimated - both by doctors and by the sufferers themselves. Dizziness can have serious consequences:

- It unsettles older people, scares them and increases the already higher risk of falls among seniors. In 20 % of cases, a fall-related injury even leads to those affected requiring nursing care.
- In addition, dizziness can also indicate a serious, potentially life-threatening disease can. It is therefore important not to trivialise it.

In this article, you will find out what can be behind dizziness and how you can best support your care clients who suffer from sudden attacks of dizziness.

### There is always a cause behind dizziness

Vertigo is an unpleasant distorted perception of the surroundings or movements. It occurs when the sense of balance and spatial orientation are disturbed. These functions are primarily controlled by the sensory organs - such as the eyes and inner ear - and the nervous system, i.e. the brain and spinal cord. Even the smallest disturbances in these areas can trigger dizziness and thus also the fear of losing control of one's own body.

There are various measures that can help you deal better with dizziness attacks. However, the first priority is always to clarify the exact cause of the dizziness. This is the only way to do something about it.





## Types of dizziness -

### Important information for carers

Dizziness is a common symptom in older people and should not be underestimated. It can significantly restrict mobility and independence and greatly increase the risk of falling. It is therefore important to correctly categorise dizziness and take appropriate measures to support those affected.

#### Rotational vertigo - sudden spinning

**sensation** Rotational vertigo usually occurs suddenly and like an attack. Those affected report an intense spinning movement of their surroundings, which can last from a few seconds to several hours.



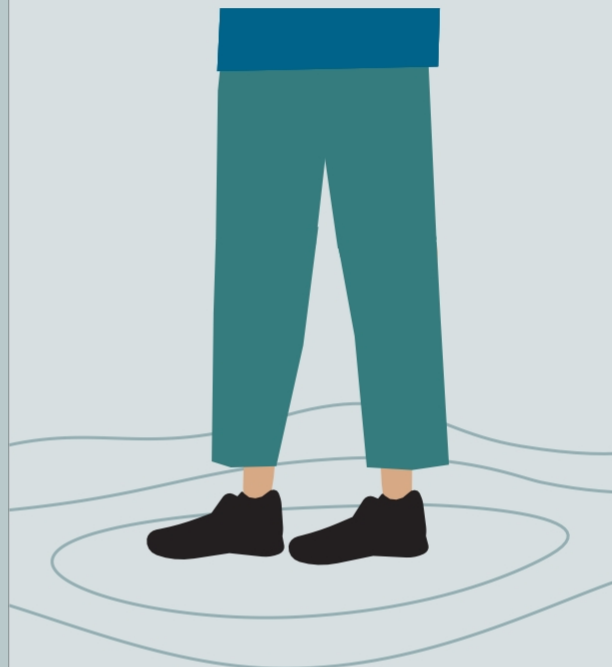
#### → Important care instructions

- Pay attention to possible accompanying symptoms such as nausea, vomiting or Balance disorders.
- Support those affected when sitting down or lying down to prevent falls.
- Stay calm and give clear, reassuring instructions.
- If the dizzy spells last longer or occur frequently, you should a medical clarification should be made.

One possible trigger is Meniere's disease, which is caused by an excessive build-up of fluid in the inner ear and can also affect hearing.

#### Swaying vertigo - feeling of a swaying floor

Those affected have the feeling that the ground beneath them is swaying or giving way, even though they are standing still or only moving slowly.



#### → Important care instructions

- Pay attention to unsteadiness when walking or standing and offer aids if necessary, such as crutches or rollators.
- Create a safe environment without tripping hazards.
- Take psychological causes seriously: vertigo often occurs during stressful periods, situations. Calm and empathetic care can help to reduce anxiety.
- Fall prevention is important, as those affected are unsteady on their feet.



### Benign positional vertigo - short, position-dependent vertigo

This common and comparatively harmless type of dizziness occurs mainly in older people. It is usually triggered by certain head movements (e.g. turning round in bed, sitting up quickly) and only lasts a few seconds.



#### Important care instructions

- ➔ Make sure that those affected are slowly a lying or sitting position.
- Help you to get up safely, especially in the morning or after long periods of rest.
- If the dizziness keeps, a special positioning therapy (e.g. according to Epley) can help.

### Cervical spine vertigo - dizziness due to tension

Cervical spine vertigo is caused by tension

in the neck and shoulder area, often caused by poor posture, herniated discs or accidents.

In addition to dizziness, feelings of numbness in the arms or hands, headaches and concentration problems.



#### ➔ Important care instructions

- Pay attention to whether those affected complain of neck tension or pain.
- Encourage gentle movement exercises to relieve tension.
- Support ergonomic positioning to avoid incorrect posture.

### Central vertigo - recognising neurological causes

This form of dizziness is particularly dangerous as it caused by diseases of the brain or central nervous system. The causes can be circulatory disorders, cerebral haemorrhages or neurodegenerative diseases.



#### Alarm signs that require immediate medical clarification:

- Sudden dizziness with symptoms paralysis, visual or speech disorders
- Unsteady gait with uncontrolled movements
- Loss of consciousness or confusion
- Severe headaches or neck pain

#### ➔ Important care instructions

- Always take central dizziness seriously - it could be a stroke.
- Stay with the victim to reassure them and alert the emergency services immediately.
- Pay attention to sudden deteriorations and document any abnormalities.



## Psychogenic dizziness - when anxiety and stress are the triggers

Mental stress such as stress, anxiety or depression can also cause dizziness. Those affected often complain of light-headedness, a swaying of the floor or the feeling of falling at any moment.

### → Important care instructions

- Take the symptoms seriously, even if there is no recognisable physical cause.
- Promote a calm environment and provide reassurance by responding sensitively to anxieties and fears.
- Motivate those affected to make gentle movements, as inactivity can aggravate the symptoms.



## Keep an eye on your care customers

Dizziness can be harmless, but it can also be a warning sign of serious illness. As a carer, you have a crucial role to play in supporting those affected, minimising risks and seeking medical help if necessary. It is therefore important that if you notice that your care client is dizzy, you inform a carer who will then initiate further measures. If you suspect centralised dizziness or a stroke, you should not wait long but call the emergency services immediately.

## The doctor will need the following information to determine the causes:

1. Does the patient experience swaying vertigo ("like on a ship"), spinning vertigo ("like on a merry-go-round") or dizziness vertigo ("like cotton wool in the head")?
2. Does the dizziness occur in attacks or is it a permanent symptom?
3. How long do the individual vertigo attacks last?
4. Can the dizziness be triggered by certain actions (e.g. head movements)?
5. Are there any other symptoms in addition to the dizziness (e.g. ringing in the ears, headaches or visual disturbances)?

By answering these 5 questions, an experienced doctor can very quickly recognise the underlying cause and initiate the necessary diagnostic and therapeutic measures.

