

Editor's Speak

(Vertigo II)

In this second issue based on vertigo, we have carried forward the effort from the first one. Being a symptom that may have a diverse and occasionally a multifactorial etiology, we have attempted to include various aspects of vertigo, seen through the eyes of specialists from numerous fields, including neurology, psychiatry, physiotherapy, audiology, pharmacology and of course Otorhinolaryngology!

Despite dedicating two issues to this topic, there are still a few aspects of vertigo that need attention and will be covered in a subsequent issue.

A few tests such as the head impulse test, the clinical test for the sensory integration of balance, etc. have been overly simplified in an attempt to ignite an interest in these tests; in fact, they have been implemented at the author's institution, and only after realising the ease with which they can be carried out and interpreted, have they been proposed.

It is vital to understand that as for any test, whether computerized or otherwise, one must begin by gathering the normative data; this serves a dual purpose of not only familiarising the clinician with these equipments, but to also differentiate between normal and pathological, which may have subtle differences, even in severe cases.

Once the basic understanding of the physiology and philosophy of these tests is established, one can form their own protocols for testing and therapy. A difference in protocols does not always necessarily equate to some being correct and the others incorrect; it only means that there may be more than one way to look at a problem, and often diverse routes may lead to the same goal.

As our knowledge and interest in this field grows, so does the desire to discover more. A lot of work and research is being dedicated to vestibular pathologies, and its implications in aeronautics and space travel, and this may add a totally new dimension to understanding balance and balance disorders.



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