

Dizziness Vs Vertigo and Bow Hunter's Syndrome

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By Dr. Derek Conte

We frequently encounter patients who tell us they have “dizziness” or “vertigo”, or dizziness AND vertigo. Many people conflate the two terms, fogging our understanding. Of course, we have to go deeper than that and ask more questions: “Mr. Jones, what EXACTLY are you feeling when this dizziness comes on, and when? Are you feeling light-headed, like you are going to faint, when you stand up or turn your head? Or is the room rolling or spinning around you?”

Depending on the answer there will be an array of possible causes, some of them overlapping. Generally speaking, dizziness is caused by too little oxygen to the brain causing a feeling of “light-headedness”. If that light-headedness results in fainting, it is called “syncope”.

If the problem is truly a light-headed feeling the possible causes might be low blood pressure, slow heart rate, fast heart rate, heart arrhythmia, anxiety, intense stress, dehydration, or something innocuous like low blood sugar or standing up quickly after squatting for an extended period.

If the light-headedness comes after turning and holding the head in a certain position, the cause could be compression of an artery feeding the brain by an overgrown bone in the neck. One type of bony obstruction is Posterior Ponticus aka Arcuate Foramen, which is a calcification of the atlanto-occipital ligament of the first cervical vertebra connecting to the bottom of the skull, causing compression of the vertebral artery feeding the cerebellum and brainstem which control the balance and all but one of the cranial nerves, respectively.

Another type of arterial compression in the neck is called Bow Hunter's Syndrome where the vertebral artery is compressed while passing through a stenotic (narrowing) transverse foramen and made worse by turning the head or much worse by also tilting it backward. Either type of vertebral artery encroachment can also cause vertigo and diplopia (blurry vision). (See image below)

Vertigo is usually caused by an upset to the vestibular system of the inner ear and is called “peripheral vertigo”. Vertigo can also be caused by a problem within the central nervous system and is therefore called “central vertigo”, but this is rare.

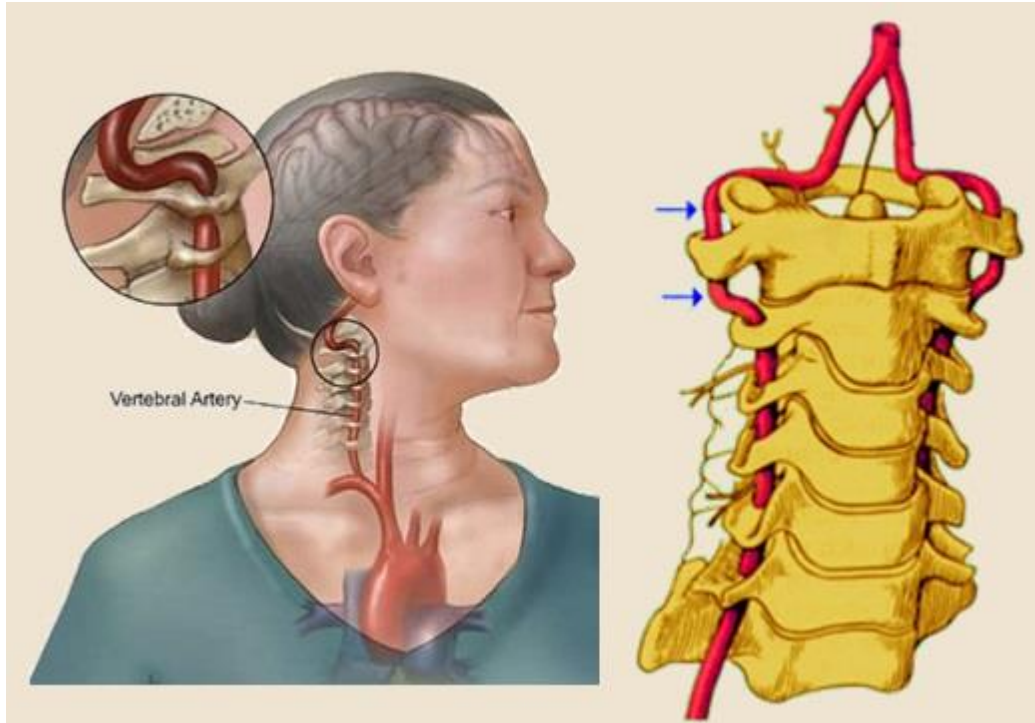
If the problem is peripheral vertigo, the tiny crystals (otoliths) of the inner ear may be stuck and unable to tumble, like the glass pieces in a kaleidoscope, when you change position. The delay in the tumbling of the crystals confuses the brain and makes us think we're still turning even if we are not. Vertigo can also be caused by a middle ear infection. The expanding gasses from bacteria stretch the middle ear chamber, causing pain and pressuring the vestibular structures of the inner ear.

Many people with vertigo also complain of a sense of “fullness in the head” due to sinus and Eustachian tube blockages. Eustachian tube blockages can be determined with a simple tuning fork test and helped

immensely by proper, specific chiropractic adjustments which almost always relieve the vertiginous symptoms.

Both dizziness and vertigo can cause nausea and vomiting if severe. Mild and infrequent cases of these are usually transient and nothing to worry about but, if the symptoms persist, a doctor should be seen for evaluation.

Bow Hunter's Syndrome



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