



The Royal
Melbourne Hospital

Royal Park Campus

Two SACS models of Management of Vestibular clients at RMH:

- ◆ Falls and Balance Clinic
- ◆ Vestibular Rehabilitation Service

Anne McGann

Clinical Gr 4 Physiotherapist

Coordinator RMH Falls & Balance Clinic

RMH Royal Park Campus



*"Passion for Caring -
Achieving the Extraordinary"*

Background

- ★ NARI Report (Murray et al 2004)
 - ★ 34% clients attending Falls & Balance Clinic reported dizziness as a symptom
 - ★ 28% were diagnosed with vestibular dysfunction
 - ★ Dix-Hallpike most common vestibular screening tool
 - ★ Recommendation: A standardised approach to the assessment and management of dizziness and vestibular dysfunction may further improve outcomes for these clients.
- ★ Currently undertaking audit of dizziness presentations with a focus on BPPV

Vestibular Referrals

- ★ GPs
- ★ Neurologists
- ★ ENTs
- ★ Falls services
- ★ Emergency Departments
- ★ Physiotherapists

Vestibular referral Pathway

Referral with dizziness and/or vestibular diagnosis

DAU Triage

Falls & Balance Clinic

- ★ Multiple active co-morbidities including falls history
- ★ Need for medical assessment

Vestibular Rehabilitation Service

- ★ Dizziness/vestibular presentation
- ★ +/- diagnosis
- ★ Request for vestibular rehabilitation

Falls & Balance Clinic

- ★ Multidisciplinary Team

- ★ 2 Geriatricians, 1 Registrar

- ★ 3 physios (2 advanced Vestibular Training)

- ★ 1 RN

- ★ 1 OT

- ★ 1 Clin Psych

- ★ 1 Podiatrist

Falls & Balance Clinic

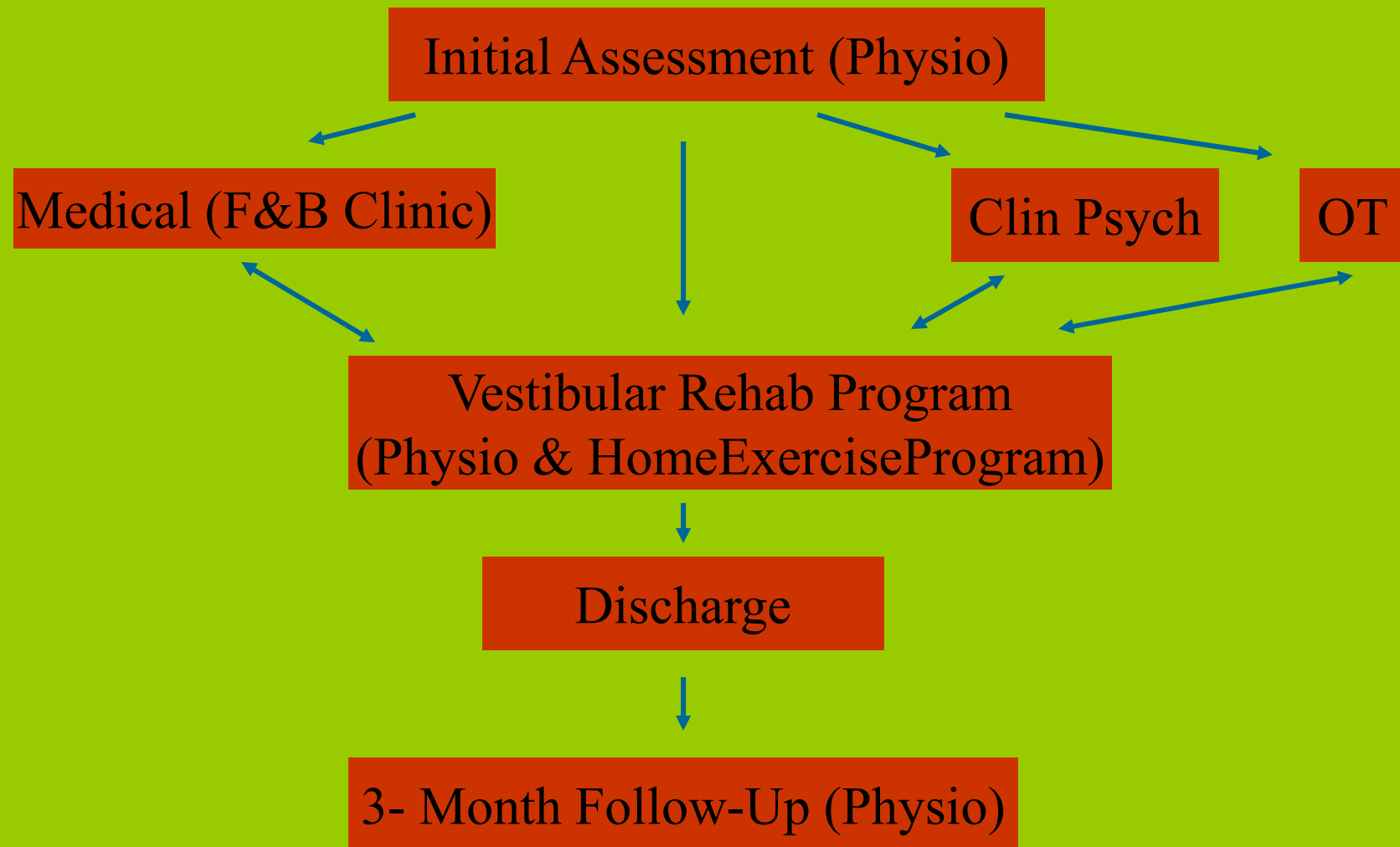


Vestibular Rehabilitation Service

- ★ Multidisciplinary team
 - ★ 2 Physios (2 Advanced Vestibular training)
0.4EFT
 - ★ 1 Clinical Psych 0.025EFT
 - ★ 1 OT 0.1EFT

- ★ Medical via Falls & Balance Clinic

Vestibular Rehabilitation Service



.....3rd Model.....

BPPV
Confirmed Diagnosis



RMH RPC Community Therapy Service
Neuro or Aged Care

Outcomes

RMH Falls & Balance Clinic

- ★ Currently collecting data on frequency of vestibular (BPPV) presentations to Clinic
- ★ Improved diagnostic skills within clinic
- ★ Identified pathways for referral for EBP management of vestibular clients (RVEEH, VRS, CTS, F&B Clinic)

Outcomes

RMH Vestibular Rehabilitation Service

- ★ 48 % unilateral peripheral vestibular dysfunction
- ★ 57% present with co-existing anxiety
- ★ 52% ≥ 1 fall
- ★ 48% chronic symptoms ≥ 3 years
- ★ Attend median 8 physio sessions
- ★ Statistically and clinically significant improvements:
 - ★ Self perceived handicap (DHI)
 - ★ Static and dynamic balance
- ★ Gains maintained at 3 month review

Challenges

- ★ knowledge base and diagnostic skill level of vestibular conditions in the broader health professional community – *improving*
 - ★ Chronicity of presenting conditions
 - ★ Quality of referrals
 - ★ Referral pathway options
- ★ Waitlists for available referral pathways

Future Directions

- ★ Continue to promote awareness and skill level amongst health professionals in broader health professional community: GPs, physios, primary contact practitioners, therapy services
- ★ Continue to adapt/refine DAU triage process
- ★ Expand referral pathway options
- ★ Evaluate models of management and outcomes

Feedback?