

Do you have one or More of these Indications?

Dizziness

Spinning spells

Loss of Balance

Unsteadiness

Recurrent falls

Difficulty in focussing

during head movement

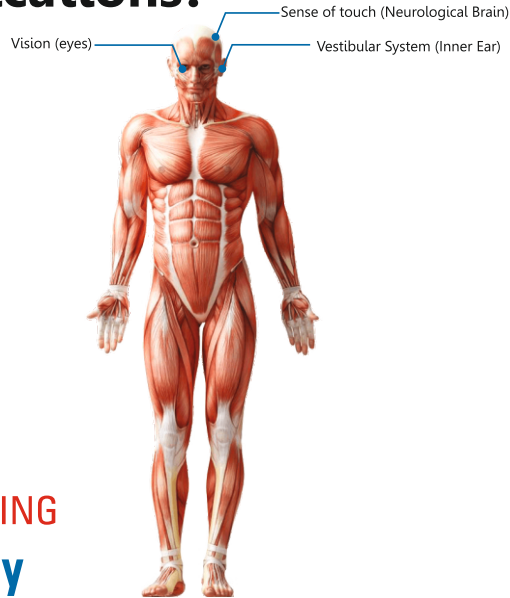
Headache with imbalance

It could be

Balance Disorder

GET COMPLETE VERTIGO PROFILING

Ask Your Specialist Today



65% of Elderly Experience

Dizziness and Disbalance

FALLING IS NOT PART OF AGING

TOO MANY FALLS

Falls are the leading cause of accidental death and injury in people aged 65 years & above. One in four older adults falls, often daily And only 1/2 talk to their doctor about it.



VIRTUAL REALITY BASED VESTIBULAR REHABILITATION

Customized rehabilitation Vestibular exercises are vital to improve the compensation of the brain in recovering from disturbances in the balance system. It has been scientifically proven that the earlier vestibular rehabilitation is started the better is the final outcome for the patient.



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THE Hearing & Vertigo CLINIC



**TREAT
BALANCE
DISORDERS
SERIOUSLY**

**Ask Your
Specialist
Today**

VIDEO NYSTAMO GRAPHY



The Hearing and Vertigo Clinic is fully equipped with breakthrough diagnostic equipment and a trained team to investigate the neurotological functioning and coordination of the body's balance system, which is sustained by the signals sent by the eyes, inner ears and proprioceptive system to the brain. Our advanced neurotological team is capable of identifying any disturbance in the well-balanced running of these three systems and diagnosing the underlying causes of vertigo or dizziness. We conduct the following clinical tests for evaluation of balance and Video Nystagmography (VNG) It is the most advanced technology for observation, measurement and analysis of eye movement during various oculomotor and vestibular tests. It is a state-of-the-art system - the most non-invasive, accurate, reliable, and affordable way of evaluating the vestibular and oculomotor systems.



SUBJECTIVE VISUAL VERTICAL (SVV)

For detection of abnormal subjective tilt Subjective Visual Vertical (SVV) is an investigation to evaluate the otolith system which is responsible for perception of verticality.



STATIC AND DYNAMIC SVV ARE IMPORTANT TO:



- Assess otolithic disorders
 - Assess chronic dizziness
 - Differentiate peripheral from central vestibular disorders
 - Decide side of peripheral vestibular insult during the acute stage
 - Diagnose compensated vestibular disorders
 - Assess effect of rehabilitation in vertigo patients
- Craniocorpography (CCG) Craniocorpography is done to evaluate the vestibulospinal reflex, which is responsible for maintenance of balance during gait testing.

Evaluation is done by recording:

Romberg test Sharpened Romberg test Tandem walking Unterburger's test:

in this test the following parameters are evaluated with pictorial reports given to the patient:- Displacement- Sway- Angle of deviation- Body axis spin.

DYNAMIC VISUAL ACUITY (DVA)

Computerized Dynamic Visual Acuity test evaluates the ability of the patient to focus on moving images and to stabilize images on the retina during head movement. The C-DVA test helps to diagnose vestibulotoxicity and VOR dysfunction.

