

Assessment plan : sample3

This report is to have an informed conversation with your doctor. Do not self medicate, specially the medicines with **Prescription only** tag. It is for your own safety.

User: A 65 year old woman from Delhi is having vertigo for few days. She never had such episodes before. She is taking stemetil with temporary benefit only. She has hypertension which is controlled with tenormin 25 at bedtime.

Dr Tori: 1. Do you feel the vertigo more when you move your head or change positions? 2. Do you experience nausea or vomiting along with the vertigo? 3. Have you noticed any hearing loss or ringing in your ears? 4. Did you have any recent illness or infection before the vertigo started? 5. Have you experienced any weakness, difficulty speaking, or vision problems with the vertigo?

User: Yes, when I get up from sleeping position, nope, nope, no, no

Dr Tori: When you experience vertigo, does it last for a few seconds or minutes? Or does it persist for longer durations?

User: Few minutes usually but sometimes for a bit longer period also

Dr Tori: Do you have a sensation of fullness in your ears?

User: No

Dr Tori: Have you had any recent head injuries or trauma?

User: Nope

Dr Tori: Do you experience any other symptoms such as headaches or sensitivity to light?

User: No

Dr Tori: Do you have any other medical conditions besides hypertension? Are you currently taking any other medications besides Tenormin and Stemetil? Do you have any known drug allergies?

User: No, no other medication.. no known drug allergy

Dr Tori: How much can you afford for your treatment? Are you comfortable with doing some exercises at home if they are recommended?

User: Money Should not be a problem , yes I can do that..

Assessment It seems like you might be experiencing vestibular neuritis, which is an inflammation of the vestibular nerve in your inner ear. This can cause vertigo, which

is a sensation of spinning or dizziness. The good news is that this condition is often treatable. We can use medications to help manage your symptoms and also recommend some exercises that you can do at home to help improve your balance and reduce the vertigo.

✔ approach:

- **Immediate Phase (First 1-2 weeks):**

- **Pharmacological Treatment:**

- **Methylprednisolone Prescription Only**: Start with 100 mg daily for 3 days, then taper down by 20 mg every 3 days until finished
- **Meclizine Prescription Only**: 25 mg orally, 1-4 times daily as needed for vertigo

- **Vestibular Rehabilitation Exercises:**

- **Brandt-Daroff Exercises**: Perform 5 repetitions, 3 times a day. Sit on the edge of your bed, turn your head 45 degrees to the left, and lie down quickly on your right side. Hold this position for 30 seconds or until the vertigo stops. Sit up and repeat on the opposite side.

- **Follow-up Phase (After 2 weeks):**

- **Reassessment:**

- **ENT Specialist Consultation**: Schedule a follow-up appointment to reassess symptoms and adjust treatment if necessary

- **Continued Vestibular Rehabilitation:**

- **Brandt-Daroff Exercises**: Continue exercises if symptoms persist, gradually reduce frequency as symptoms improve

- **Long-term Management (After 1 month):**

- **Lifestyle Modifications:**

- **Hydration**: Keep a 1-liter water bottle with you and aim to finish it in 8 hours
- **Sleep Hygiene**: Maintain a regular sleep schedule, aiming for 7-8 hours of sleep per night
- **Stress Management**: Practice relaxation techniques such as deep breathing or meditation for 10 minutes daily

✔ expectation:


- **Chance of Cure**: High likelihood of significant symptom improvement within 1-2 weeks
- **Timeframe**: Initial improvement expected within the first week, with continued progress over the next month
- **Sustainability**: Long-term remission is possible with adherence to vestibular rehabilitation exercises and lifestyle modifications

✔ rationality:

- **Root Cause Targeting**: Vestibular neuritis is often caused by inflammation of the vestibular nerve. Methylprednisolone helps reduce inflammation, while meclizine

manages symptoms. Vestibular rehabilitation exercises help retrain the brain to compensate for the imbalance.

- **Best Chance of Cure:** This regimen addresses both the immediate symptoms and the underlying cause, providing a comprehensive approach to treatment. The combination of medication and exercises is supported by current medical literature and has a high likelihood of success.

 Print opinion