

DIZZINESS: WHY YOU FEEL DIZZY AND WHAT WILL HELP YOU FEEL BETTER

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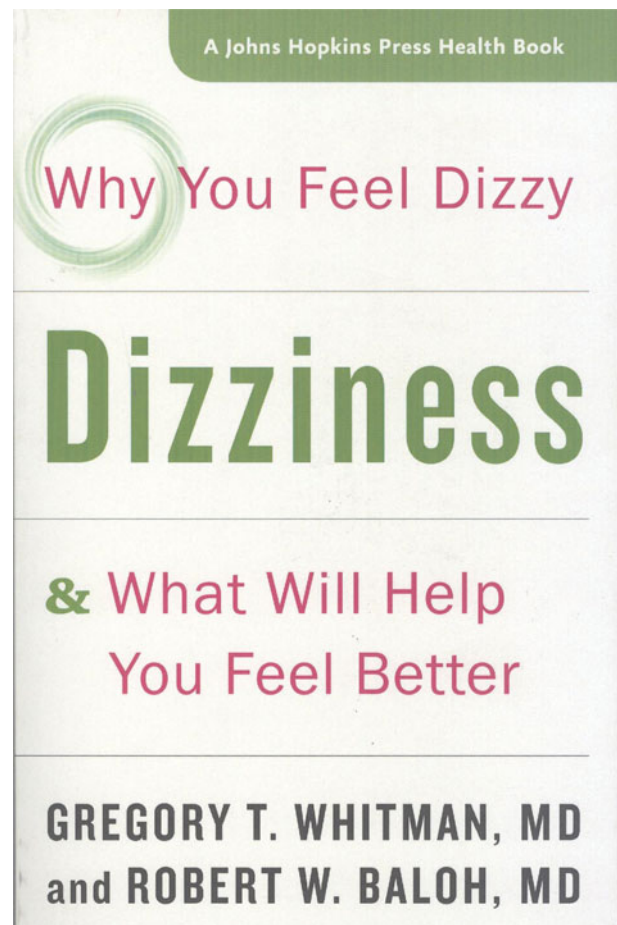
Now, at first glance, this looks like the kind of book one only sees in shops in airport departure lounges. I mean those self-improvement guides, how to get ahead in business and the like, written by successful billionaire tycoons, who surely will never achieve real prominence?

This book deserves far more than that first glance. My attention was caught by the witty preface, which opens by reminding us that we cannot even agree on the title of the specialty involved, 'neurotology'. It follows with a very perceptive review of the art of pattern recognition and 'red flags'.

The introduction offers a brief but fascinating description of the evolution of our balance regulatory systems and of the complex physiology involved. It quickly struck me that this is an ambitious text, if aimed at the lay public, requiring a reading age greater than the statisticians suggest is the UK norm.

Cleverly, the book is divided into four sections, and it is worth quoting the titles verbatim. We have Part I 'Dizzy Spells that Occur with a Change in Position'. That is easy enough, otoconia or a fall in blood pressure, I do recall. Part II is 'Dizzy Spells that Occur in Attacks but with No Apparent Trigger', suggesting Ménière's disease of course, but with excellent coverage of migraine too. Part III is 'A Single Episode of Dizziness that Lasts for Days then Gradually Improves'. This ranges from vestibular neuronitis (which I must learn to call 'neuritis', I admit) to acute cerebral ischaemia. Part IV is the one we may well despair of, especially at the end of a busy clinic, 'Constant Dizziness That Lasts 24 Hours a Day for Months and Even Years'. It is so easy to dismiss this as anxiety and functional, but here we also get discussion of Mal de Debarquement syndrome (rarely addressed) and the unsteadiness of what I might call 'advanced maturity'.

For each condition, there are paragraphs on diagnosis and tests, but also, particularly cleverly, on 'What Can I Do to Help My Doctor Make the Diagnosis?' and 'What Can I Do on My Own to Treat ...?'. They were so well written that I could envisage a book revised for practitioners containing text on 'What Can My Patient Do to Help Me ...?'.



I do wonder still about the target audience. To quote, 'A common mimic of primary anxiety disorders is dysfunction of the autonomic nervous system, often manifested as the Postural Orthostatic Tachycardia Syndrome (POTS)'. This struck me as challenging to a lay reader. There is an excellent glossary explaining every technical term, I admit, but constant reference to the back pages does not make for easy reading.

This would be a brilliant read for medical students and primary care physicians. The simplified, common-sense approach, I found, made it compulsive reading, in a subject where that is the exception. I hope this book does well, and it is excellent value indeed. It would need a few changes in wording to prove a superb review of vertigo management, from medical school to part-time clinical work, post retirement.

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