

A GUIDE TO REMOTE WORKING IN AUDIOLOGY SERVICES DURING COVID-19 AND BEYOND

Vestibular services

Vestibular testing: As vestibular function testing is unavailable services should aim support patients remotely in order to minimise the progression of patients to chronic dizziness with or without anxiety (i.e. persistent postural perceptual dizziness, PPPD). This can be done through:

- 1. Phone consultations:** These could be used to identify the vestibular pathology and potentially triage the patient into the most appropriate vestibular function testing slot (if different times of appointments exist) when clinics restart. A telephone consultation could also serve to reassure patients and potentially to prevent them progressing into PPPD/other chronic dizziness. The benefits of these phone appointments need to be weighed up against the time taken, and the fact that a repeat history (or catch up history) will likely need to be repeated when the patient is seen face-to-face.
- 2. Questionnaires by post:** A symptom-based questionnaire could be sent to the patient by post or email or completed online (if available). These questionnaires could be used to identify the level of symptoms and determine whether a phone appointment to offer reassurance would be of benefit. They may also be used to help identify BPPV. For example, a patient with a high score/ report of constant dizziness with anxiety may benefit from a call, compared to the patient who had mild intermittent symptoms. A questionnaire with the aim to determine pathology (and triage patients into appropriate testing slots could also be sent). These could be as simple as a set of questions to help identify BPPV, or more detailed to help identify other pathologies. This in turn could help triage into BPPV vs non BPPV testing clinics. The BAA direct referral balance document discusses triage and provide an example questionnaire (BAA, 2019; Roland et al., 2015).

Vestibular rehabilitation (VR): This lends itself more easily to the virtual consultation. The use of video/telephone could help support some patients through the VR or treatment for BPPV. **Caution should be taken to select patients carefully, however, to ensure that such home-based plans will not put the patient at risk of falls, anxiety, worsening of symptoms or cause neck injuries, and that home based PRM are not contraindicated. They should only be given if follow-up and close supervision/support is available.**

Holistic resources: It is known there is an increased prevalence of anxiety and depression in patients with dizziness compared to the normal population. This is especially true in those with episodic or chronic dizziness. This may be increased in these uncertain times, and especially in those for whom there is a health anxiety component to their symptoms. There are several free resources available to support patients (alongside their telemedicine appointments - see table below). Some patients may require onward referral for psychological support.

TABLE 1: a summary of remote vestibular resources.

Resource	Information	Where to find/link/reference
VRBQ DHI	Both evidence based questionnaire that could be sent to identify level of patient symptoms	Vestibular rehabilitation handicap questionnaire: http://resource.isvr.soton.ac.uk/audiology/vrbq.htm Dizziness handicap questionnaire http://www.rehab.msu.edu/files/docs/Dizziness_Handicap_Inventory.pdf
Abbreviated dizziness questionnaire	Questionnaire to help differentiate between central and peripheral causes of dizziness. To help identify potential pathology and allow triaging into appropriate testing slots.	Lindell et al., (2018) Noda et al., (2011) Roland et al., (2015)
Pod cast: telehealth in VR	Useful discussion on this subject	http://www.neuropt.org/special-interest-groups/vestibular-rehabilitation/podcasts (39) Telehealth in VR
Particle repositioning manoeuvres (PRM) performed by patient	There are several PRM used in clinics which have home variants that could, at the discretion of the clinician be self-administered. The traditional Epley and Semont (and their home variants) both have good evidence for their effectiveness. It is up to the clinician to evaluate whether home-treatment could be used for all patients with suspected BPPV or reserved for those whom BPPV has previously been diagnosed, and this is thought to have returned. A physical neck screen (in addition to verbal questions to rule out contraindications) could be performed over the phone to ensure suitably.	Note there are many videos on You tube showing poor technique so choose carefully. Videos and handouts are essential. Left home semont https://www.youtube.com/watch?v=z2KUrQoZ-sU right home semont https://www.youtube.com/watch?v=A72UjulJSzE Left home epley https://www.youtube.com/watch?v=Ih72suV2p20 right home epley https://www.youtube.com/watch?v=BY4UeRmTYmA Brandt-Daroff video (if Epley and Semont not possible) https://www.youtube.com/watch?v=voZxtTUdQ00
Free downloadable booklets	Balance retraining: enables a patient to devise their own basic VR program consisting of gaze stabilization and habituation exercises. Patient is walked through a 'motion sensitivity quotient- type' way of identifying a correct starting level of 6 basic exercises.	http://www.menieres.org.uk/files/pdfs/balance-retraining-2012.pdf

Resource	Information	Where to find/link/reference
Free downloadable booklets	Controlling your symptoms: suggestions to help reduce stress/anxiety related to dizziness: Controlled breathing, relaxation, thought control, stress management.	http://www.menieres.org.uk/files/pdfs/controlling-your-symptoms.pdf
Web based VR	Online version of the above designed specifically for the over 50s but suitable for all.	https://balanceretrainings.lifeguidewebsites.org
Holistic resources	Suggestions about techniques to use for everyone during these uncertain times	https://www.psychologytools.com/articles/free-guide-to-living-with-worry-and-anxiety-amidst-global-uncertainty/
	Grounding meditations can help the patient take the attention away from their dizziness and anxiety. Body scans can also be useful for grounding and to give the patients a feeling of safety	Tree meditation/grounding https://www.youtube.com/watch?v=vApUMcbFSiE Mountain meditation Peter Morgan http://www.freemindfulness.org/download
	Resources to help patients who struggle to sleep.	Mindfulness for Anxiety and Sleep - with Tara Brach https://www.udemy.com/share/101uuoAEMTdlhRTX0F/
	Mindfulness: two free resources by leading mindfulness teachers. These discuss how mindfulness may be useful, and giving links to free meditations	https://www.breathworks-mindfulness.org.uk/mindful-self-care-for-troubling-times https://mbct.co.uk/meditating-in-troubling-times/

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