**Vertigo in old age**
Vertigo, along with headache, is one of the most common symptoms which patients complain of at the doctor's. Dizziness is common in old age: three out of ten people who are more than 72 years old suffer from dizziness (Tinetti, 2000).

**What is vertigo?**
Many people find dizziness hard to describe, because there is only one word for it in German. We also use the term vertigo for conditions such as blackouts, giddiness, light-headedness, delirium or the like. Vertigo is often accompanied by nausea, vomiting, disorders of equilibrium and a tendency to fall. Vertigo can come in waves or be a constant state, at rest or especially with head and body movements, as rotary vertigo, postural or systematic vertigo.

**Vertigo causes uncertainty**
Those who suffer from vertigo are often unable to master even simple everyday activities at all, or only with anxiety and uncertainty. As a consequence, social activities are limited, and the enjoyment of life is reduced. But above all the risk of injury after a fall is greatly increased. Therefore the symptoms of vertigo should be taken seriously.

**What causes vertigo?**
We need three sensory organs for orientating our body in a space, namely the eyes, the equilibrium organ in the inner ear and the sensors in muscles and joints for the sense of position. The eyes tell the brain what the space we are in looks like. The equilibrium organ senses rotary movements of the head and body and sends relevant information to the brain. And the sensors in muscles and joints keep the brain informed about the position the body is in at that time.

**Vertigo is a signal**
Vertigo always occurs when this information from the eyes, equilibrium organ and muscles/joints do not match, are incorrect or are incorrectly processed by the brain. Therefore vertigo is a signal, which can mask for example diseases of the ears or the eyes, but also cardiac arrhythmia, circulation disturbances in the brain, neurological damage and many other diseases.

**What causes vertigo in old age?**
Vertigo in old age is facilitated by the normal ageing process of the eyes, equilibrium organs and nerves. Another factor is reduced blood circulation in the brain, so that the optimum processing of information is restricted. Often the equalisation of blood pressure is slowed down (orthostasis), or there is cardiac arrhythmia. Problems in the cervical spine are also thought to cause vertigo, or at least to make it worse. Medicines and unfavourable combination of medicines often result in unwelcome vertigo.
Depression and anxiety can make vertigo worse
Depression and anxiety should not be underestimated as triggers of vertigo. It is particularly precarious when someone is afraid of falling because of vertigo symptoms because this anxiety also makes the vertigo worse. Often there is not just one isolated cause for the vertigo which is treatable, but a combination of several causes. This makes the treatment of vertigo in old age difficult.

What can help in vertigo?
If there is no one particular trigger, but many typical age-related changes which combine to cause vertigo, all diseases which could be one of the causes of vertigo must receive optimum treatment, such as cardiac insufficiency or cardiac arrhythmia, too high or too low blood pressure, circulation disorders, anaemia, ear diseases and diabetes.

Improve eyesight
Since the equilibrium in old age is greatly dependent on the vision, it is very important that the eyesight is optimised.

Avoid drop in blood pressure
If vertigo tends to occur when getting up or when standing, compression stockings can help enormously, especially if venous diseases or varicose veins are also present. Changes in behaviour, such as getting up slowly from a lying and seated position, help to avoid falls.

Check side effects of drugs
The GP should check drugs taken regularly, since for example drugs to lower blood pressure can trigger vertigo.

Treat anxiety and depression
In depression and anxiety, antidepressants and psychotherapeutic treatment help to improve the life situation.

Strengthen muscles and equilibrium
Exercise and sporting activity are important. This strengthens the musculature and trains the sense of equilibrium. Special training with the physiotherapist improves stability when walking and reduces the fear of falling.

Caution with walking aids
Walking aids, such as a wheeled walker or a stick, are only useful if they are tailored to suit individual needs. The aid should be chosen with care, as it otherwise does more harm than good and in fact even increases the risk of falling.