Mal de Debarquement Syndrome an atypical vertigo: A case report
Introduction

- Mal de Debarquement syndrome (MdDS) is an atypical vertigo (not positional) related to the continued sensation of movement after a subject may have finished boating, surfing or taking a sea voyage.

- MdDS’s underlying pathogenesis is poorly understood and therefore, treatment options are limited.
Objective

- Mal de Debarquement Syndrome is a poorly understood form of vertigo with limited therapeutic options.

- Ideally finding low-risk conservative care that is effective, such as chiropractic care, would be an important consideration.
Case Presentation

- For 4-years, prior to being seen at this office, the patient had chronic atypical vertigo with 2-3 flareups per year with durations lasting 3-4 months.

- A brain MRI was unremarkable though a cervical MRI revealed spondolytic and discogenic degenerative changes.

- She reported that prior to 4-years she traveled on approximately 20-cruise ship vacations.
Interventions

The patient was treated for eight-visits over a 6-week period of time. Sacro occipital technique (SOT) and cranial/temporomandibular joint (TMJ) care was rendered with adjustments to the cervical/thoracic spine.

She also received cranial/dental co-treatment with a lower occlusal splint and seen at this office once-a-week for three-weeks in a row, with her splint being equilibrated by a dentist specializing in TMJ care, immediately following cranial treatment at this office.
Outcome

- After the eighth office visit she experienced complete relief of symptoms.
- At one year following her 8th-office-visit her condition has continued to remain stable.
Conclusion

- While with case reports we need to exercise caution with generalizing their findings, it is of note that the patient’s symptoms had been stable for 4-years and only found consistent relief following the conservative chiropractic care that was rendered at this office.

- Conservative care for complex patient presentations are always an optimal option and based on the finding in this case further study into chiropractic collaborative care of MdDS might be warranted.
California Cranial Institute
Thomas Bloink, DC
431 Monterey Ave # 1
Los Gatos, CA 95030
(408) 395-8006

Sacro Occipital Technique Organization – USA
SOTO-USA
Charles Blum, DC