Most older adults in sub-acute rehabilitation have vestibular (inner ear) dysfunction but do not move quickly enough to become dizzy

**Purpose:**
- One in five people fall in the first month at home after discharge from sub-acute rehabilitation
- Vestibular (inner ear) dysfunction affects balance and can lead to falls
- Older patients in rehab are often do not move quickly enough to provoke dizziness so physiotherapists aren’t prompted to screen for vestibular (inner ear) issues

**Methods:**
Routine clinical vestibular screening was undertaken in a sub-acute rehabilitation unit over a twelve-month period

**Results:**
- Sixty patients (80.0yrs ± 8.7yrs) were screened
- >70% reported little or no dizziness when moving
- Only one person had a normal clinical oculomotor / vestibular screen

**Clinical take-home message:**
- Vestibular dysfunction is common in older adults admitted to sub-acute rehabilitation
- is under-recognised and under-treated because few patients move quickly enough to become dizzy

Dr Ann Rahmann (PhD)¹,² and Professor Nancy Low Choy (PhD)²

¹ Brighton Rehabilitation Unit, Community and Oral Health, MNHHS
² School of Allied Health, McCauley at Banyo Campus, Australian Catholic University

Low-tech ‘M’ lenses + clinical skills can assess vestibular issues too