

Overview of the International Classification of Vestibular Disorders



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KEYWORDS

• Vestibular • Vertigo • Symptoms • Classification • Bárány Society

KEY POINTS

- Classifications and definitions are essential to facilitate communication between clinicians and researchers and promote diagnostic criteria and research in mechanisms epidemiology and treatment.
- To build the International Classification of Vestibular Disorders (ICVD), the Bárány Society organized a systematic internal process and processes for encouraging consensus with other scientific societies.
- The ICVD is organized in 4 layers: (1) symptoms and signs, (2) syndromes, (3) disorders and diseases, and (4) mechanisms.
- Definitions for vestibular symptoms and vestibular migraine have been published. Those for benign paroxysmal positional vertigo, Menière disease, and behavioral aspects should follow in 2015.

INTRODUCTION

Symptom and disease definitions are a fundamental prerequisite for professional communication in clinical, research, and public health settings. The need for structured criteria for epidemiologic, diagnostic and therapeutic research is more obvious for disciplines that rely heavily on syndromic diagnosis, such as psychiatry and headache, where there are currently no histopathologic, radiographic, physiologic, or other confirmatory diagnostic tests available. However, diagnostic standards and

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classifications are also crucial in areas of medicine, such as epilepsy and rheumatology, where, although confirmatory tests do exist, there is substantial overlap in clinical features or biomarkers across syndromes. Vestibular disorders are similar to the latter examples. Scientific and therapeutic progress, as well as public awareness of psychiatric and headache disorders, vastly increased after the introduction of the first modern version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III) by the American Psychiatric Association in 1980¹ and the first International Classification of Headache Disorders by the International Headache Society in 1988.²

Although numerous advances in basic and clinical vestibular research have been made, progress in the field likely has been hampered by the lack of explicit and uniform criteria for the description of symptoms, syndromes, and clinical disorders. Other than the definition of Menière disease by the Japanese Society for Equilibrium Research and the American Academy of Otolaryngology—Head and Neck Surgery³ as well as the Classification of Peripheral Vestibular Disorders by the Spanish Society of Otorhinolaryngology,⁴ there have not been systematic efforts to create widely accepted classification criteria before the initiative by the Bárány Society to build the International Classification of Vestibular Disorders (ICVD).⁵

There are probably several reasons why the classification and unification of definitions for vestibular disorders has lagged other illnesses. Classifications are usually created by scientific societies of subspecialists within a medical specialty or under the lead of 1 medical specialty. Vestibular disorders cross medical specialist boundaries and, despite being very prevalent,⁶ are the province of small subspecialties within otolaryngology and neurology. Additionally, for neurologists and otolaryngologists to be able to cover competently the spectrum of differential diagnoses of vestibular disorders, they need to acquire elaborate knowledge about the inner ear, vestibular, postural, and oculomotor pathways in the brain, and related systems that control autonomic and threat responses, which goes beyond the standard curricula during residency training of any specialty. It was, therefore, necessary that an international scientific society with an interdisciplinary membership of clinicians and basic scientists with expertise in vestibular disorders, like the Bárány Society,⁷ assume responsibility for developing the ICVD.

GOALS AND SCOPE FOR THE INTERNATIONAL CLASSIFICATION OF VESTIBULAR DISORDERS INITIATIVE

The goal of the ICVD initiative is to develop a comprehensive classification scheme and definitions of individual vestibular diseases disorders that is acceptable worldwide. To achieve the goal of wide acceptance, the Bárány Society is actively seeking the input of members from other associations dealing with vestibular disorders, such as the Société Internationale d'Otoneurologie and the Comisión de Otoneurología de la Sociedad Española de Otorrinolaringología in Europe, the American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS) in the United States, the Japanese Equilibrium Society, and the Korean Balance Society, as well as individual scientists and clinicians from the international vestibular community. Beyond cooperation with individuals and associations within the vestibular community, the Bárány Society is also seeking cooperation and consensus with scientific associations from related disciplines, if there are important aspects of diseases that touch more than 1 society. One example is vestibular migraine, where the Bárány Society cooperated with the International Headache Society to publish a consensus document on diagnostic criteria.⁸

The term “vestibular disorders” refers to disturbances arising from the vestibular system, but the definition of the vestibular system itself can be understood broadly

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