Cognitive-behavioural model of persistent vestibular symptoms: A systematic review

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There can be few physicians so dedicated to their art that they do not experience a slight decline in spirit when they learn that their patient’s complain is dizziness

Aims

- To summarise key findings from quantitative studies that have investigated psychological factors related to persistent vestibular symptoms
- Critically evaluate the methodology used and
- Formulate an empirically-based integrated psychosocial model of symptom persistent and interference to inform research and treatment
Results

Identification: (4097) records identified via Cinahl (930), Embase (835), Medline (444), Psychinfo (1536), and Web of Science (322) databases.

Identification: Articles identified through additional sources:
- Manual searches (screening reference lists of previous reviews and included studies from online search) (1)
- Forward citation search for included studies using Web of Science (0)
- Authors contacted (0)
- Search e-thesis online (1)

3,624 title/abstract screen was conducted by 2 authors

3,521 irrelevant abstracts excluded

103 full-text articles assessed independently by 2 authors

24 articles excluded with reasons:
- Did not meet inclusion criteria (18)
- Used psychosocial factor as outcome variable (3)
- Conference abstract or unobtainable (3)

81 studies had data extracted for narrative synthesis
Results
Highlights

• Consistent relationship between emotion distress and dizziness handicap
• Strong evidence for association between avoidance behaviour and handicap
• Strong evidence for negative beliefs, particularly fear of social embarrassment and physical danger
• Some evidence for an association between other cognitive-behavioural factors and dizziness handicap
• Areas that require more research: beliefs about emotions, perfectionism, all-or-nothing behaviour