

The Cawthorne-Cooksey Exercises



To help with balance.

For patients with dizziness, Ménière's Disease, vertigo and after some operations.

Information for

- ◆ Patients
- ◆ Carers
- ◆ Relatives

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The Principles of the Cawthorne – Cooksey Exercises

Introduction

The balance parts of the two ears compliment each other by sending equal impulses to the brain. These are essential for the maintenance of equilibrium of the head and body.

If either or both balance centres are damaged the equilibrium is upset. The result of this is vertigo or giddiness which may be accompanied by nausea and vomiting. Although this condition may be frightening it is not life-threatening in itself. Furthermore, it can be overcome by carrying out special exercises.

The purpose of these exercises is to build a tolerance mechanism in the brain which compensates for the unequal balance of the two ears. The exercises stimulate the development of this tolerance mechanism and the more diligently and regularly they are performed the sooner the vertigo will disappear.

The exercises have been particularly helpful for the dizziness that often follows concussion, and after operations on the labyrinth for Meniere's Disease or otosclerosis, but they can be equally well employed whenever there is a residual giddiness as the result of a particular loss of function of one labyrinth.

How to do Your Exercises

- Do these exercises for **at least five minutes three times a day.**
- Do them for as long as the vertigo lasts. This may be for one to three months.
- Try to find the head positions and movements that cause vertigo as far as this can be tolerated. This is because the more often the vertigo is induced quickly the faster the brain will learn to compensate.
- Keep taking any medication you may have been prescribed to treat the vertigo.
- Lead as normal a life as possible and an early return to work and sports is helpful.

For the best results the exercises need to be done at least 3 times a day, as instructed, and begun as early as possible.

The Exercises

Group A – IN BED

1. Eye movements – at first slow, then quick.
 - a) up and down;
 - b) from side to side;
 - c) focusing on finger moving from 3 feet to 1 foot away from the face.

2. Head movements – at first slow, then quick. Later with eyes closed.
 - a) bending forwards and backwards;
 - b) turning from side to side.

Group B – SITTING

- 1 & 2 as above

3. Shoulder shrugging and circling.

4. Bending forward and picking up objects from the ground.

Group C – STANDING

1. As Group A, 1 & 2 and Group B, 3.
2. Changing from sitting to standing position with eyes open and shut.
3. Throwing a small ball from hand to hand (above eye level).
4. Throwing ball from hand to hand (under knee).
5. Changing from sitting to standing and turning round in between.

Group D – MOVING ABOUT

1. Circle around person who will throw a large ball to you – and throw it back.
2. Walk across room with eyes open and then closed.
3. Walk up and down slope with eyes open and then closed.
4. Walk up and down steps with eyes open and then closed.
5. Any game involving stooping or stretching and aiming such as skittles, bowls or basket ball.
6. Rolling on floor/mat with eyes closed.

Post operative patients are usually able to:

- Commence exercises in bed on day 3 post-op.
- Complete group A exercises by days 4 – 7 post op.
- Complete group B and C exercises by day 9 post-op.
- Complete group D exercises by day 10 post-op.

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Please:

- Make sure your hands are clean.
Wash and dry them thoroughly and/or use the gel provided.
- Observe infection control notices around the hospital.

Please ask if you need this information in large print, Braille or an audio version.

Help is available for people who require this information in a language other than English.

Please contact the Patient Advice and Liaison Service (PALS) on 01934 647216.