

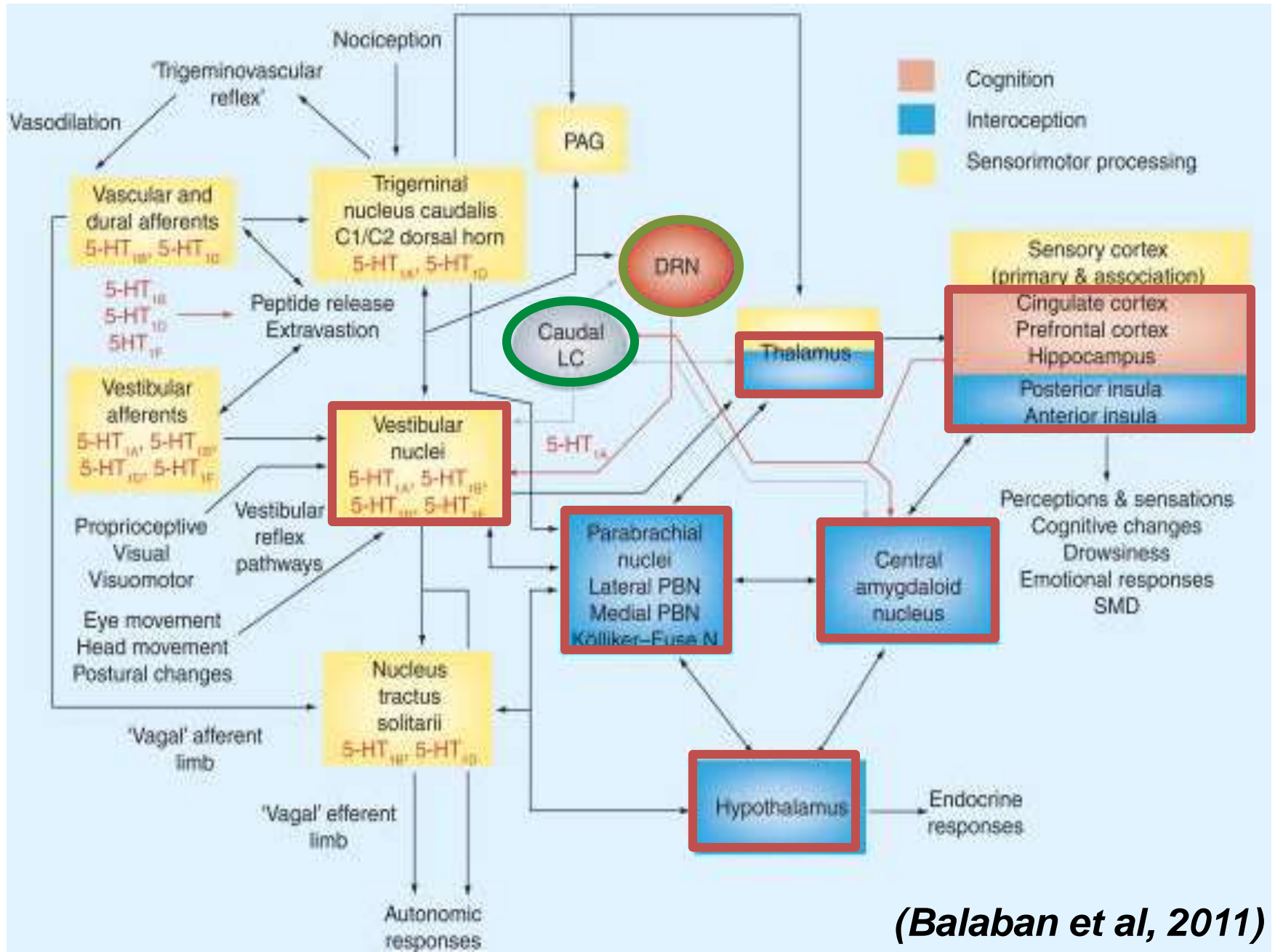
# **Clinically relevant Anatomical & Physiological Aspect of Balance Maintenance : Psychiatric aspect**

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# Dizziness & Psychiatric disorders

- Cross-sectional analysis of the 2008 National Health Interview Survey (NHIS) - individuals with vestibular vertigo relative to the rest of the US adults
- 3 fold increased odds of depression, anxiety & panic disorder
- 8 fold increased odds of 'serious difficulty concentrating or remembering' *(Bigelow et al, 2015)*
- Best predictor of depression & anxiety was patient's level of distress associated with symptoms of dizziness or vertigo *(Hong et al., 2013)*
- Peripheral vestibular dysfunction has been linked to depersonalisation /derealisation symptoms *(Lopez et al 2012)*

# Neuroanatomical circuits: balance maintenance



# Insula

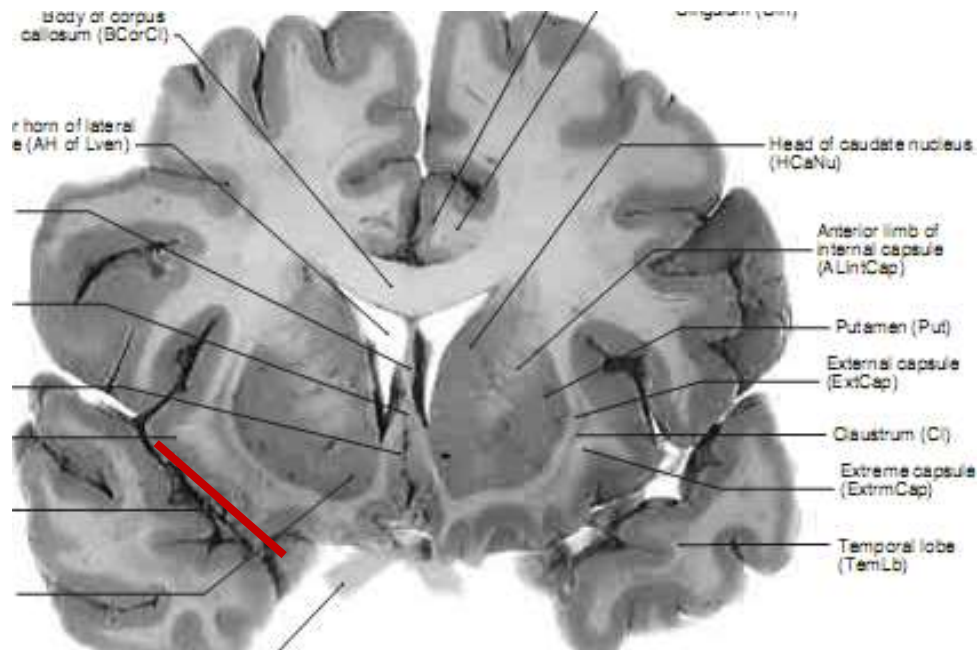
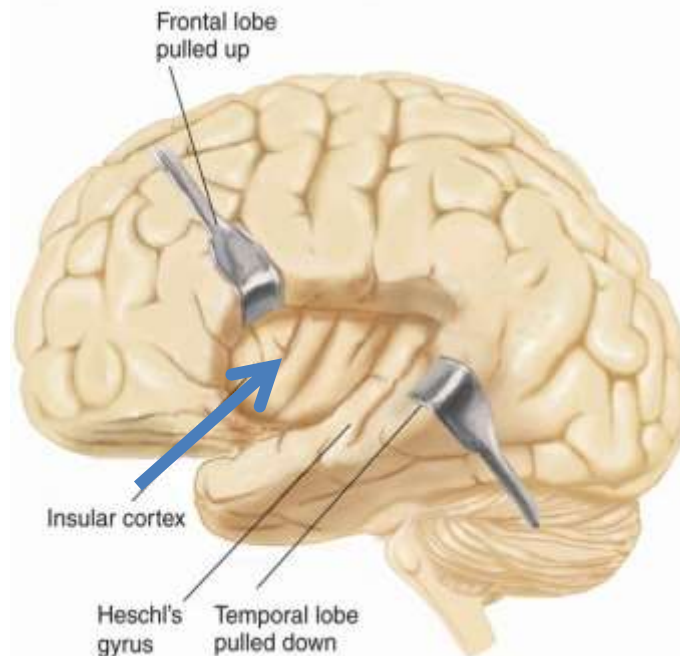
Emotion generation/processing

Anticipation of aversive stimulus

freezing & flight

identify facial expressions of disgust

Mediate shame, guilt



# EMOTIONAL BRAIN

Emotion generating/processing regions

Decreased connectivity -

Emotion modulation regions

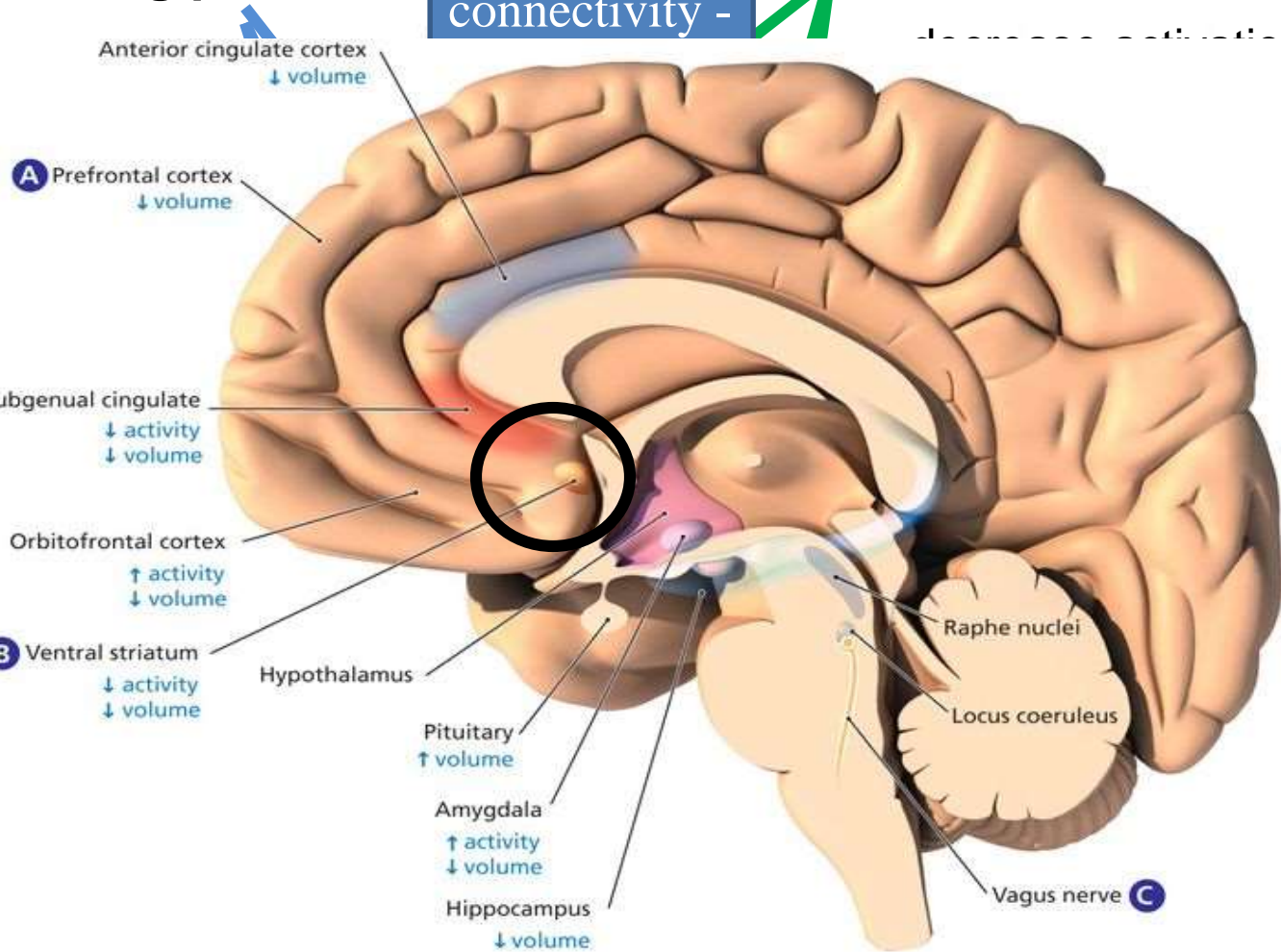
identify fear signals  
generate fear

Cing

emotion modulation  
attention control

Deficiency – pathological anxiety

Sep



decreased activation in regions

modulate attention

gain

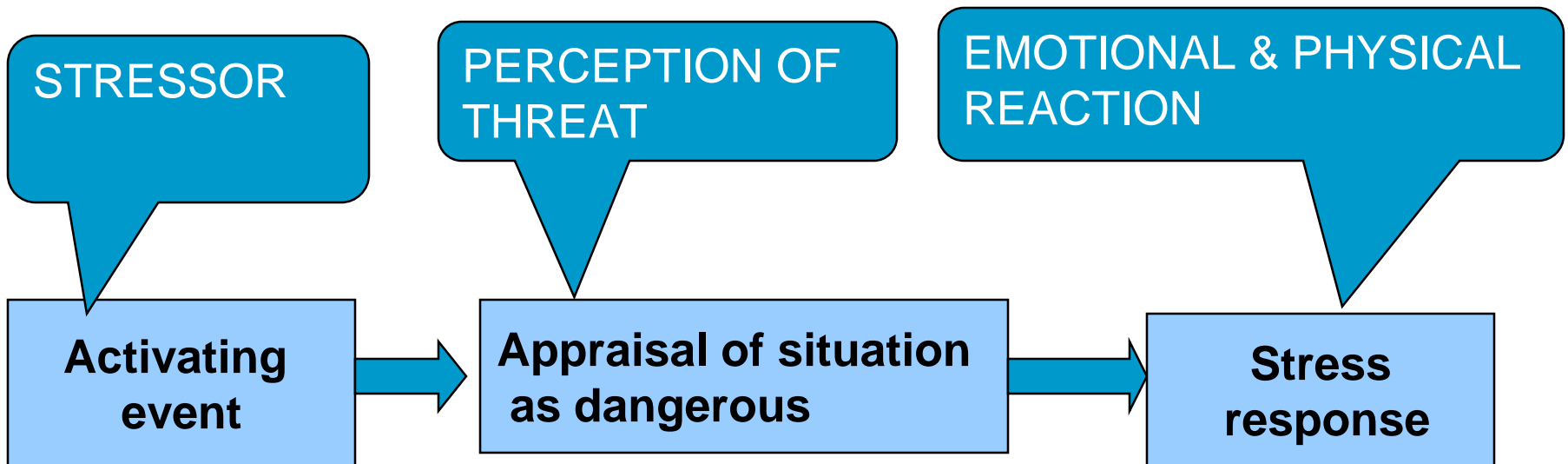
actual

modulate fear response within context of threat & safety signals

Poverty stress trauma - reduced amygdala to prefrontal/cingulate connectivity -impaired top-down regulation of emotion processing

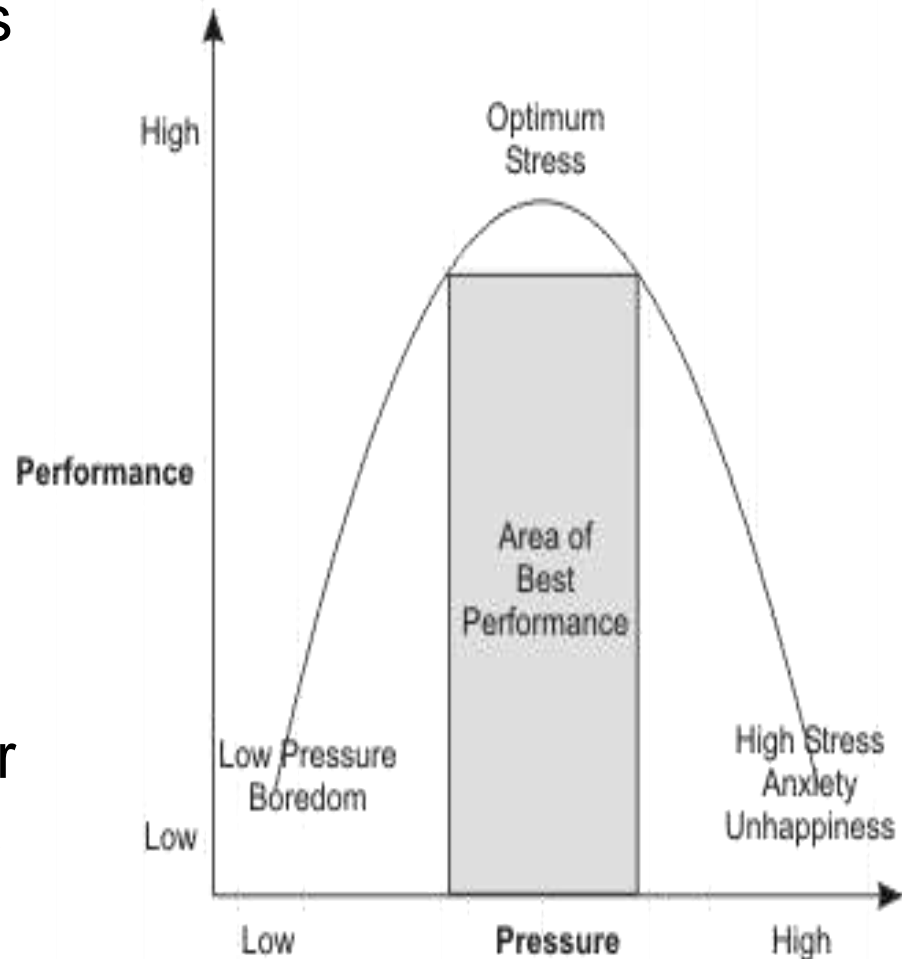
# What is Stress?

- Stress is your mind and body's response or reaction to a real or imagined threat, event or change
- The threat, event or change are commonly called stressors. Stressors can be **internal** (thoughts, beliefs, attitudes) or **external** (loss, tragedy, change)



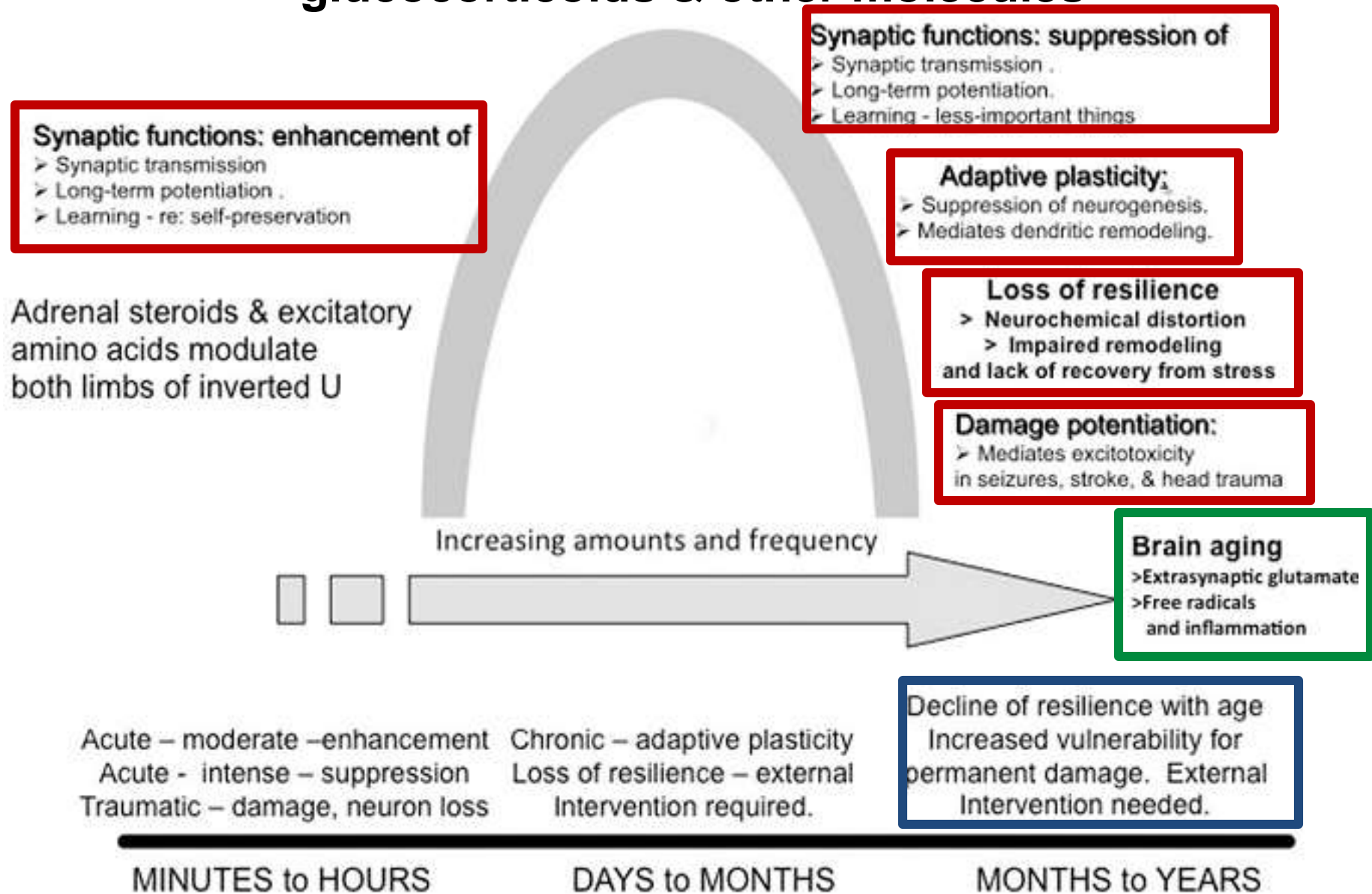
# Stress versus Performance

- In small doses, stressors can increase energy & alertness, keep us focused on problem at hand
- Healthful stress levels vary
- As the level of pressure increases, stress eventually surpasses our ability to cope with it in a positive way



The Inverted-U relationship between pressure and performance

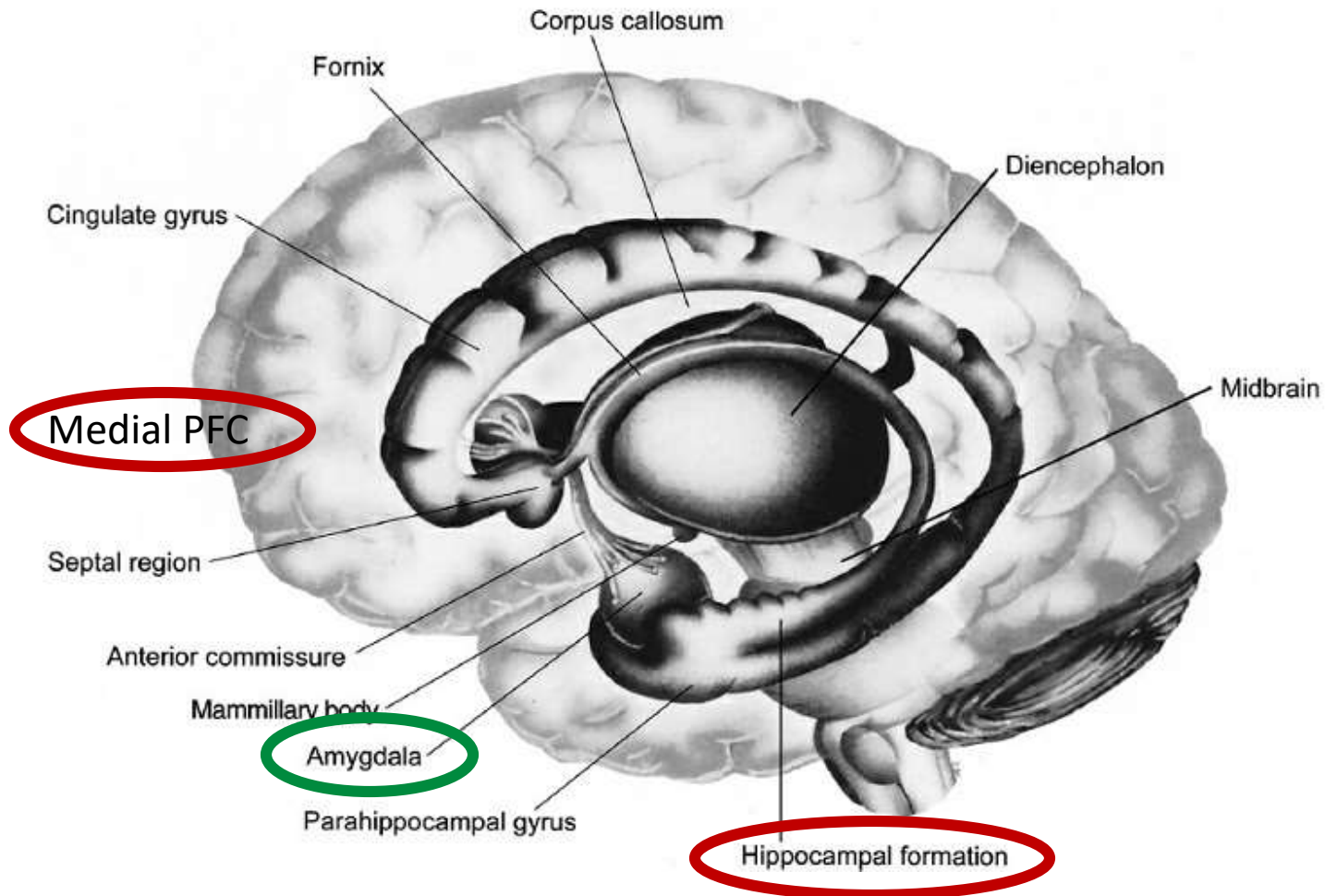
# Effects of acute & chronic stress mediated by Glutamate, glucocorticoids & other molecules



(McEwen et al, 2015)



# Stress : effects on Brain



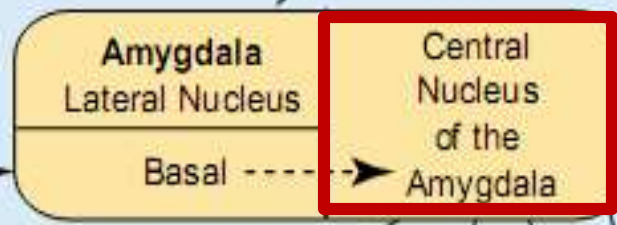
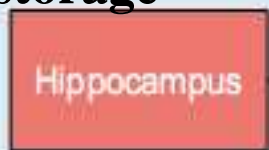
*(McEwen et al, 2015)*

# Neuroanatomical Pathways of Viscerosensory Information in the Brain

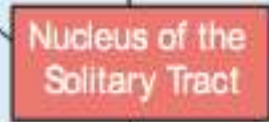
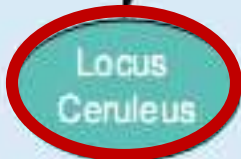
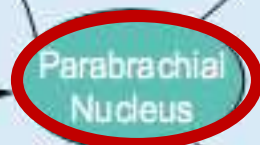
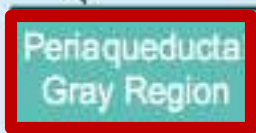
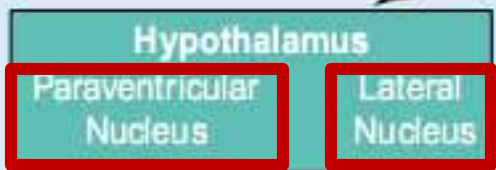
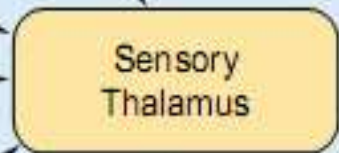
**Downstream --neurocognitive processing & modulation of sensory information**

Medial Prefrontal Cortex, Cingulate ← Association Bundle → Insula

**Contextual information storage**



**Upstream Viscerosensory information**



**Respiratory rate & timing**

**Defensive behaviors  
Postural freezing**

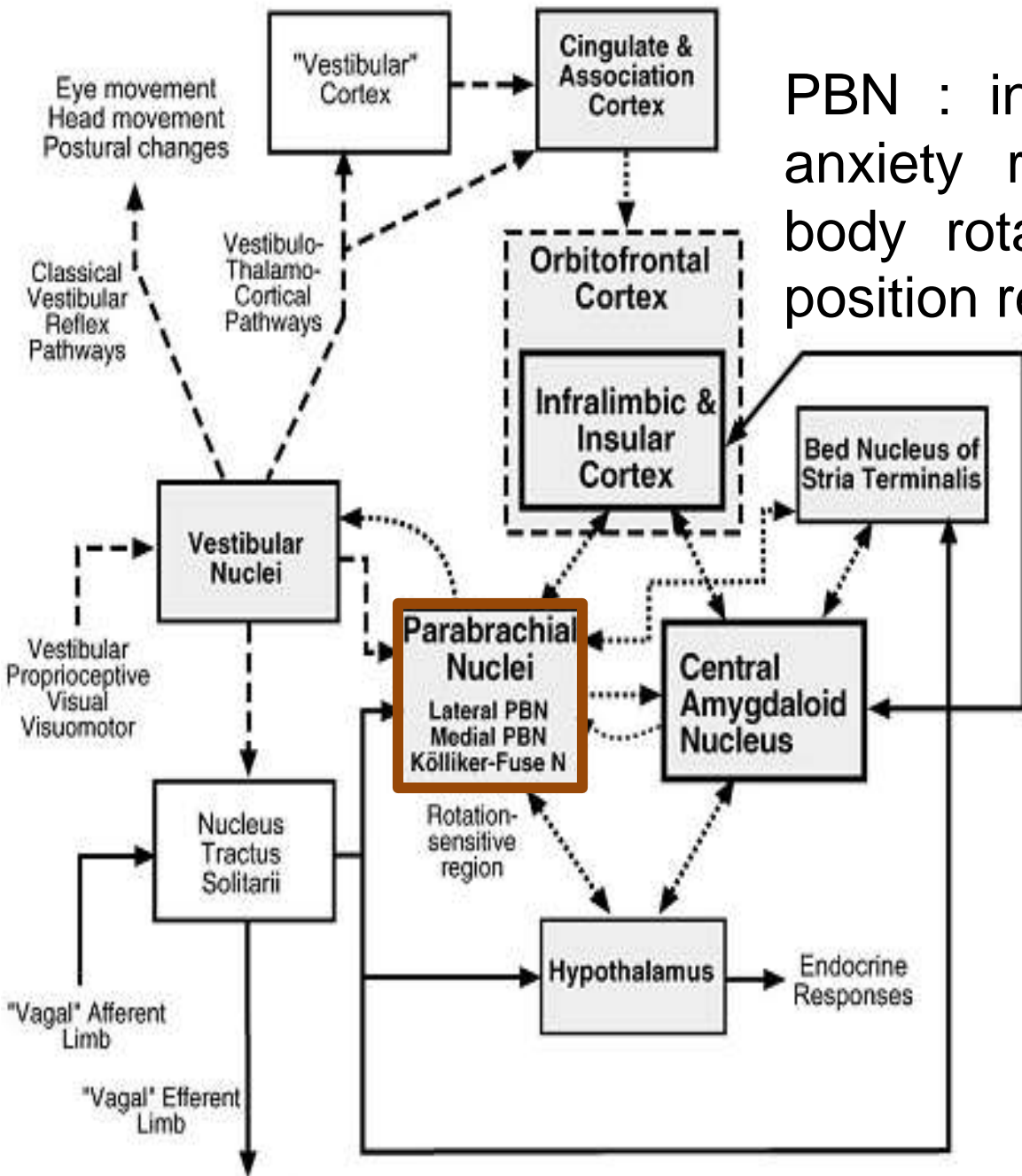
**increased norepinephrine release  
physiologic & behavioral arousal**



**Sympathetic Nervous System**

Visceral Afferents

**(Gorman et al, 2000)**



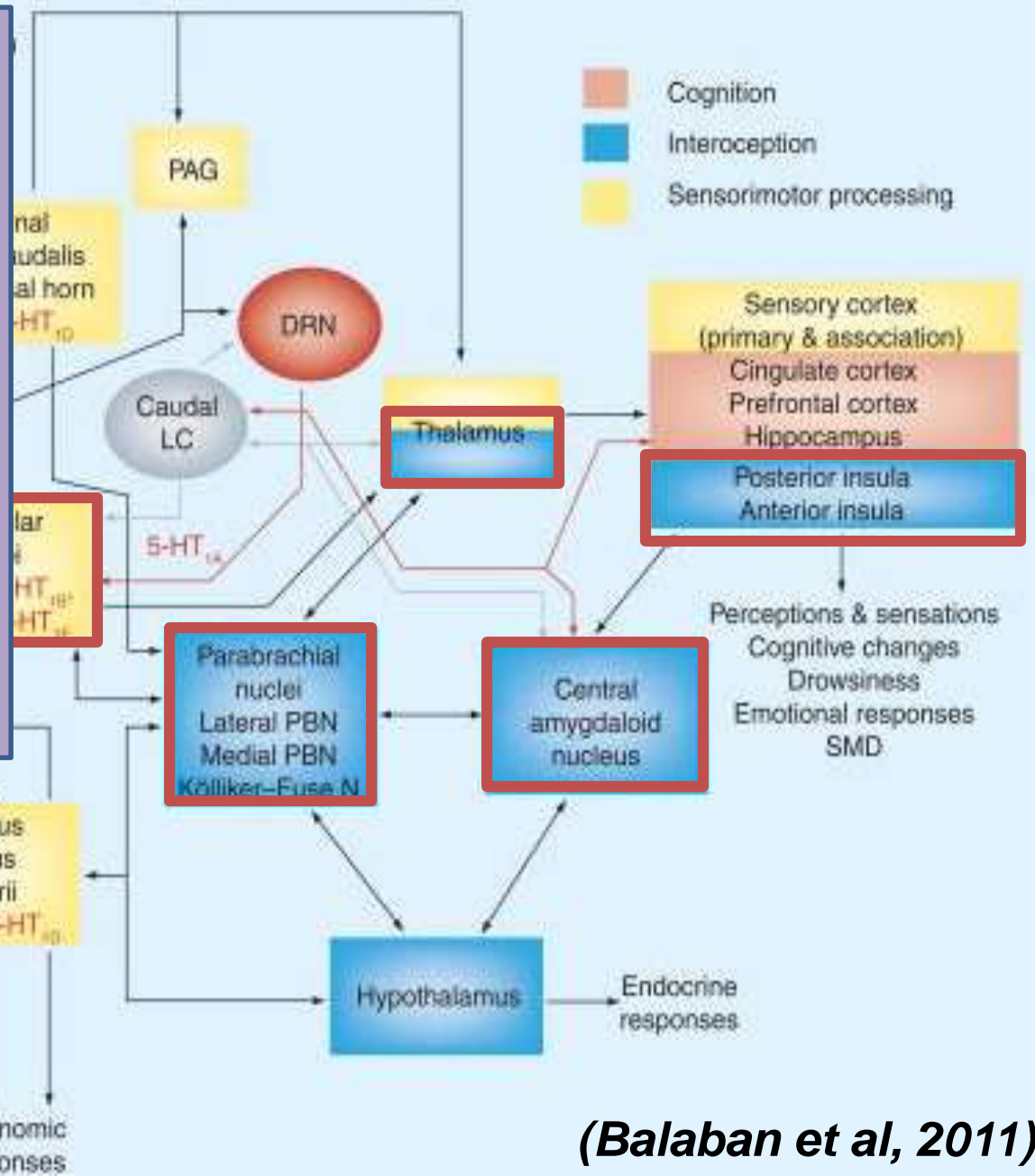
PBN : inform circuits mediating anxiety responses about whole body rotational velocity & body position relative to gravity

Context-dependent processing of body motion information due to reciprocity of connections among vestibular nuclei & structures comprising PBN network

*(Balaban, 2002)*

# Neuroanatomical circuits: balance maintenance

Integrate information regarding ongoing sensory processes relative to current physiological condition of the body & their translation into the 'sentient self' as subjective awareness and feelings

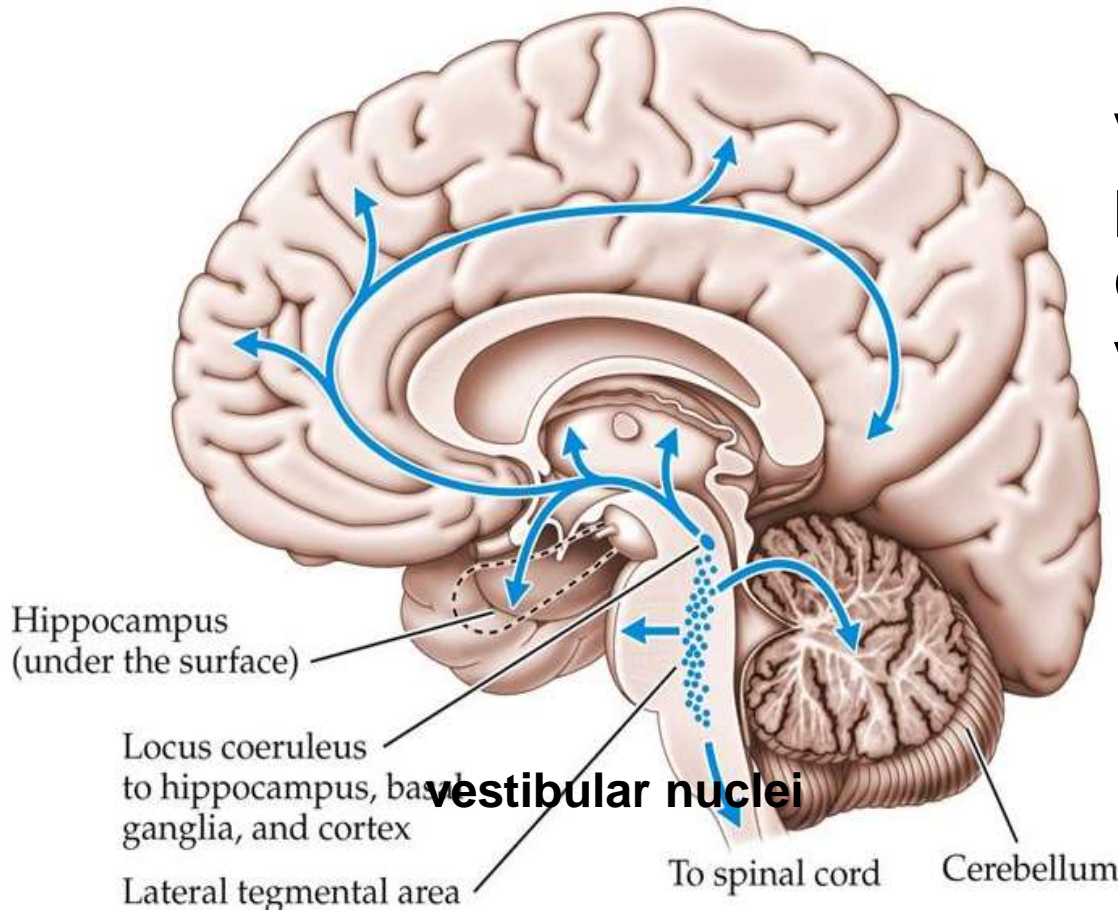


*(Balaban et al, 2011)*

# NORADRENARGIC PATHWAYS

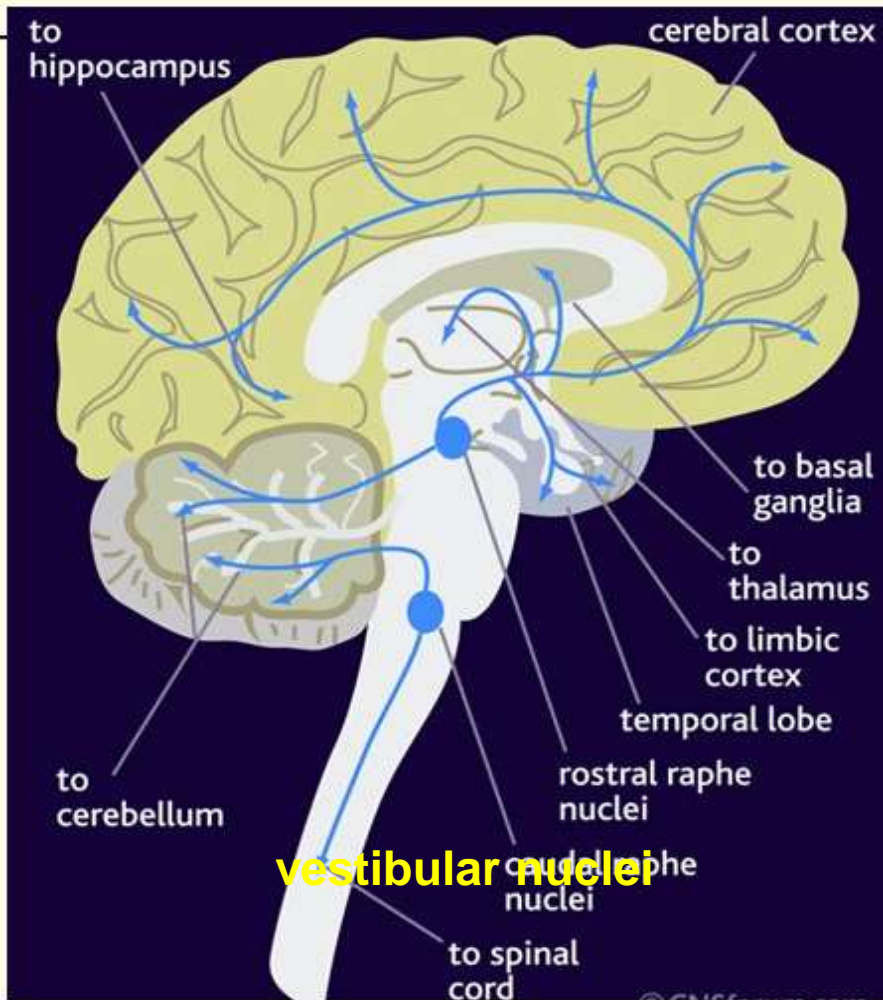
Dense projections from ACC & orbitofrontal cortices to locus coeruleus - regulation of affective states in parallel with modulation of postural control

Noradrenaline modulate vestibular-related motor performance with changes in alertness, vigilance & arousal



*(Gurvich et al, 2013)*

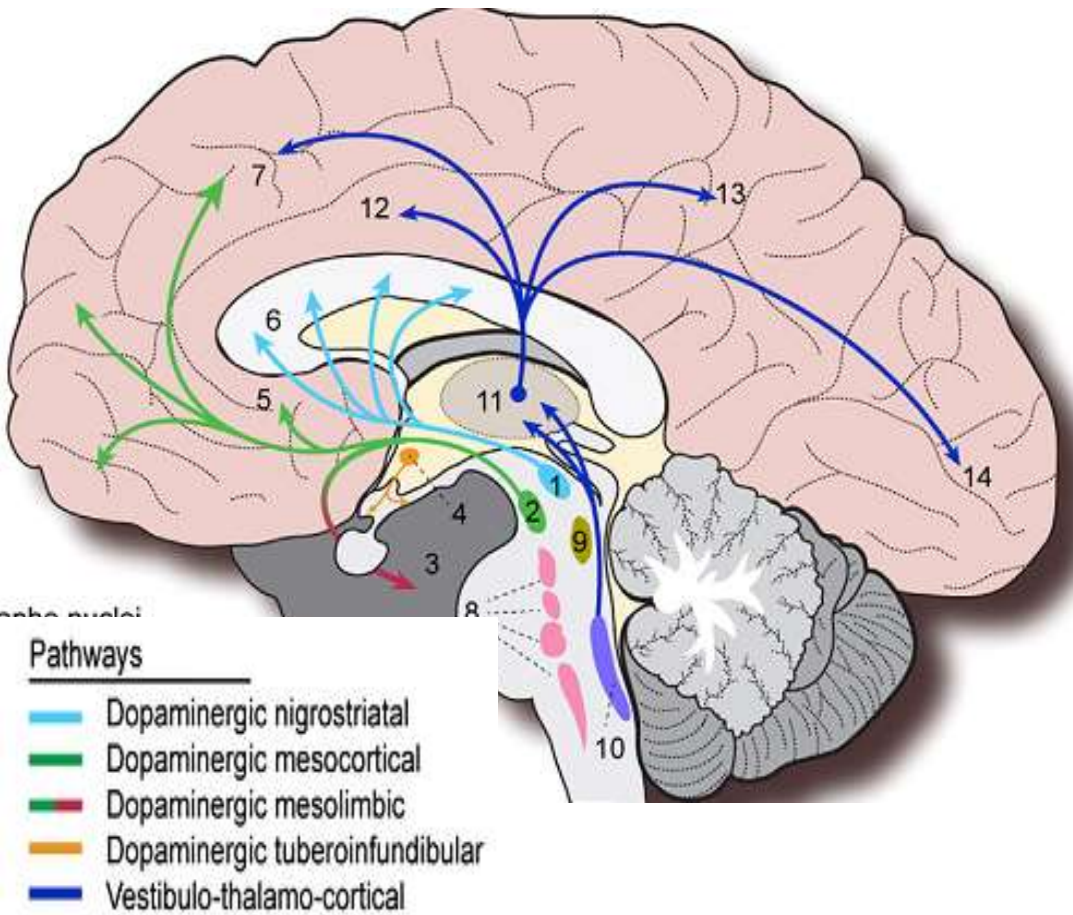
# SEROTONERGIC PATHWAYS



- Serotonergic & non serotonergic projections coactivate major structures in vestibulo-parabrachial pathway
- Vestibular nucleus neurons respond to stimulation by exogenous serotonin
- Rise in serotonin levels observed in medial vestibular nuclei after vestibular stimulation
- SSRIs efficacious in treatment of vertigo & withdrawal is associated with vestibular manifestations

*(Licata et al., 1995; Johnson, 1998; Halberstadt & Balaban, 2006; Gurvich et al, 2013)*

# Dopamine pathways



**(Petrosini & Dell'Anna, 1993; Vibert et al, 1995; Gurvich et al, 2013)**

- D2 receptors present in medial & lateral vestibular nuclei
- Dopamine might exert modulatory action on vestibular system, either by direct action on vestibular neurons or by modulation of GABAergic transmission
- Dopamine may play a role in recovery from vestibular asymmetries

# CONCLUSION

- Psychiatric symptoms may be a “reaction” to distress of living with a vestibular disease
- May represent alterations to the neural circuitry that involves anatomical & neurochemical (predominantly monoaminergic) connections between the vestibular system & areas such as the hippocampus, amygdala & infralimbic cortex
- The vestibular system plays a role in controlling autonomic functions (e.g. heart rate, blood pressure) which may also trigger a range of changes in cognition, emotion & personality



**THANK YOU**