SYMPTOM

Dizziness

Dizziness is a feeling of lightheadedness, unsteadiness, faintness, or spinning.

WHAT IT FEELS LIKE
Lightheaded, unsteady, faint, or as if everything is spinning

WHERE IT IS FELT
The head, balance, or whole body

MOST COMMON CAUSES
Dehydration, standing up quickly, inner-ear balance problems

WHEN IT IS URGENT
Sudden dizziness with weakness, speech trouble, fainting, or chest pain

USUALLY LASTS
Seconds to days, depending on the cause

SEE A DOCTOR IF
Recurring, persistent, worsening, or affecting daily activities

Overview

Dizziness is a broad term for several sensations. You may feel lightheaded, off balance, close to fainting, or as though you or the room is spinning. The spinning feeling is called vertigo .

Dizziness is a symptom, not a disease. Causes range from dehydration and standing up quickly to inner-ear problems. Less often, it is related to the heart, brain, nerves, or another medical condition.

Timing and triggers provide useful clues. Brief spinning when you roll over in bed may have a different cause from constant unsteadiness or feeling faint whenever you stand.

What it may feel or look like

Dizziness may feel like:

Related symptoms may include nausea, vomiting, ringing in an ear, hearing changes, headache, blurred vision, a racing heartbeat, sweating, or weakness.

Notice when the feeling starts, how long it lasts, and what you are doing. Turning your head, getting out of bed, standing, missing a meal, exercising, or starting a medicine may be relevant.

- The room is spinning or tilting
- You are floating, swaying, or walking on an uneven surface
- You might faint or black out
- Your balance is poor, especially when walking
- Your head feels light, foggy, or disconnected

Common causes

Common causes include dehydration, overheating, viral illness, missing meals, and standing up too quickly. Standing can briefly lower blood pressure, especially after resting or when you have not had enough fluid.

A common inner-ear cause is benign paroxysmal positional vertigo (BPPV). It causes short bursts of spinning after head movements such as rolling in bed or looking upward.

Medicines can cause dizziness, including some blood pressure medicines, sedatives, antidepressants like sertraline or fluoxetine , and medicines that affect blood sugar. Alcohol and other substances may contribute.

Migraine can cause vertigo or movement sensitivity, sometimes without a strong headache. Stress, panic, and rapid breathing may cause lightheadedness, but physical causes should not automatically be dismissed.

Less common causes include inflammation of the inner-ear balance nerve, Ménière's disease, anemia, low blood sugar, thyroid problems, and abnormal heart rhythms. Hearing loss, ear pressure, or ringing may suggest an ear-related cause.

Urgent causes include stroke, significant bleeding, a serious heart problem, or severe infection. These usually cause other warning signs.

When to seek medical care

Call emergency services for sudden dizziness with any of the following:

These symptoms can occur with stroke or another emergency. Do not drive yourself.

Seek same-day medical care if dizziness is new and continuous, causes repeated vomiting, or makes it unsafe to stand or walk. Sudden hearing loss in one ear also needs prompt assessment, particularly with vertigo.

Book a routine appointment if dizziness keeps returning, lasts longer than expected, worsens,

or interferes with work, sleep, driving, or daily activities. Arrange a review if it began after starting or changing a medicine. Do not stop prescribed medicine without advice.

- Face drooping, arm or leg weakness, numbness, or trouble speaking
- New double vision, severe loss of coordination, or inability to walk
- Fainting, chest pain, severe breathlessness, or a very irregular heartbeat
- A sudden severe headache, confusion, or seizure
- Dizziness after a serious head injury

How the cause is found

A healthcare professional will ask what dizziness feels like, when it began, how long episodes last, and what triggers them. Mention hearing changes, headache, fainting, falls, recent illness, pregnancy, bleeding, and all medicines or supplements.

The examination may include checking blood pressure while lying and standing, eye movements, hearing, balance, walking, heart rhythm, strength, and coordination.

If head movements trigger brief spinning, a positional test may be performed by moving your head and watching for characteristic eye movements.

Blood tests, a heart tracing, hearing tests, or brain imaging are sometimes needed. Testing is selected based on your symptoms and examination.

Treatment and self-care

Treatment depends on the cause. If you become dizzy, sit or lie down to reduce the risk of falling. Get up slowly and hold onto something stable.

Drink water if dehydration may be contributing, unless you have been told to limit fluids. Eat regular meals if symptoms occur when you have not eaten, and avoid alcohol while dizzy.

Do not drive, cycle, use ladders, or operate machinery until you feel steady and understand what is causing the episodes.

BPPV can often be treated with guided head and body movements called a repositioning manoeuvre . Have the diagnosis confirmed and learn the correct technique, especially if you have neck, back, circulation, or mobility problems.

Balance exercises or vestibular rehabilitation may help with some inner-ear conditions by training the brain and body to adjust to altered balance signals.

Medicines may be used for nausea, migraine, or certain inner-ear symptoms. Some dizziness medicines cause drowsiness and are intended only for short-term use. A clinician or pharmacist can review whether your medicines may be contributing.

What to expect

The course depends on the cause. Dizziness from standing quickly may settle within seconds or minutes. BPPV episodes usually last less than a minute but can return with movement. An acute inner-ear problem may cause strong symptoms for days, followed by gradual improvement over several weeks.

Recurring or persistent dizziness may take longer to assess. Record the timing, duration, triggers, and related symptoms to help identify patterns.

Falls are an important concern. Until your balance improves, use handrails, keep walkways clear, and ask for help when needed.

Common questions

Is dizziness the same as vertigo?

No. Vertigo is a type of dizziness that feels like spinning or movement. Dizziness can also mean lightheadedness, faintness, or poor balance.

Can dehydration cause dizziness?

Yes. Fluid loss through heat, exercise, vomiting, diarrhea, or not drinking enough can lower blood pressure and cause lightheadedness.

Can stress cause dizziness?

Stress and panic can contribute to dizziness, especially with rapid breathing. However, new or persistent symptoms still deserve assessment rather than being assumed to be stress-related.

Should I stay in bed until it passes?

Rest may help during a severe episode, but prolonged bed rest can worsen balance and weakness. Resume safe, gentle movement as symptoms allow. Seek advice if you cannot stand or walk safely.

Sources

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