

MdDS is recognised as a Disability by

- The Department of Human Services Australia
- National Health Institute USA
- Wellcome Trust UK

Our Research/Medical Board consists of:

Alan Pearce Associate Professor.
La Trobe University. Responsible for rTMS treatment trials in Australia

Dr Cherylea Browne. Lecturer in Human Anatomy at Western Sydney University. Currently investigating the underlying hormonal aspects of MdDS and autonomic nervous system maladaptation in MdDS patients.

Dr Luke Chen. Neurologist at Sydney Neurology, Brain and Mind Centre, University of Sydney. And also Neurology Network Melbourne

Dr Shaun Watson. Neurologist and has practices located in Blacktown and Randwick. NSW

Dr Mingjia Dai. PhD Assistant Professor, Neurology, Mt Sinai, NYC, USA

OUR AIM

- To promote awareness both within the medical world and the wider Community
- To assist with clinical trials and studies
- Encourage and embrace ways of helping better manage our symptoms

Please contact:

Mddsaustralia@yahoo.com.au

For further information visit

MdDS Australia

www.mddsaustralia.org

Vestibular Disorders Association

www.vestibular.org

Rare Voices Australia

www.rarevoices.org.au

National Organisation for Rare Diseases

www.rarediseases.org

Whirled Foundation

<http://www.whirledfoundation.org/>



ABN 474756417



Mal de Debarquement Syndrome

is a rare and chronic condition. It is considered to be an Orphan condition, the prevalence of which is currently unknown.

MdDS is a neurological disorder where one has a persistent perception of rocking and swaying.

It may last for months, years or be forever present. It generally appears after being exposed to passive motion- such as being on a ship, an airplane or even a car journey.

Together we can offer help, support and understanding.

Together we can find how to better manage our symptoms..

Together we can find a balance!

For more information visit

mddsaustralia.org

What is MdDS

Persistent Mal de Debarquement Syndrome is a rare disorder

The individual experiences a continuous sense of motion when on stable ground. MdDS usually occurs after the person has travelled on a ship, but may occur after exposure to other motion such as a plane journey.

It is thought that during this period of travel the brain is sensitised to the rocking motion. Once back on solid ground, the brain fails to readjust.

Due to the rarity of the condition, research is being undertaken to find the underlying mechanisms.

Other symptoms may include:

- Fatigue
- Difficulty concentrating
- Staggering gait
- Headaches
- Tinnitus
- Ear pain/fullness

Cure and Treatments

To date there is no known cure for Mal de Debarquement Syndrome

Treatments offered by your Doctor will depend on your personal circumstances. Some have benefited from SSRIs (anti-depressants), Osteopathic Care, Vestibular therapy and Massage as temporary relief of symptoms.

Relief is found whilst being back in passive motion such as driving. This is not found to be the case with other balance disorders

MRI and CT scans appear normal

MdDS Australia does not endorse any type of medication.

Please refer overleaf for more information



Recent Survey Results

In December 2015, a survey of the Australian MdDS community was undertaken.

It revealed :

- Over 90% were women
- Cruising was the main cause of onset
- Air travel was more greatly recognised as a cause of onset
- Improved diagnosis rate - up by 23%

The latter confirms that awareness is growing within the medical community, together with better understanding.

Exacerbating factors also included:

- Fatigue
- Stress/anxiety
- Bright lighting
- Low barometric pressure
- Confined spaces
- Hormonal changes
- Computer work
- Showering
- Supermarkets
- Shopping Centres
- Bending down
- Repetitive Movement
- Darkness
- Going Down Stairs
- Cold/flu