Chiari & Comorbid Symptoms Compilation (Revised)

HEADACHES					
Occipital headaches - headaches centered around the suboccipital bone (base of skull to the back of the neck). Valsalva headaches — a type of occipital headache that is made worse by coughing, sneezing, heaving, laughing, etc. These headaches are usually associated with problems of the craniocervical junction - Chiari Malformation and/or Craniocervical Instability (CCI), Atlan Instability (AAI), Basilar Invagination (BI, indicative of cranial settling), etc.	CSF leaks) — headaches that get worse when upright and improve with lying down (often accompanied by occipital headaches). Due to the nature of these pressure headaches, you will only have one or the				
	NEURALGIA				
☐ Occipital (back of head/neck)	☐ Trigeminal (pain and numbness in the face)				
	e to the cranial nerves located on/near the brainstem at the base of skull.				
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OTHER H	AD/NECK SYMPTOMS				
☐ Neck pain/tension/spasms	☐ Decreased neck mobility (up/down & side/side)				
 Feeling like your head is too heavy for your neck (like a bobblehead) 	☐ Popping/cracking sounds in neck or upper back when stretching (Crepitus)				
These head/neck symptoms are oft	en associated with compromised connective tissue				
and degeneration often caused	or exacerbated by the blockage of spinal fluid.				
	M/BALANCE PROBLEMS				
□ Clumsiness	☐ Swaying/Floating Sensation				
□ Dizziness (Vertigo)	☐ Dysmetria (hypermetria/hypometria)				
□ Cervical Vertigo	☐ Bilateral problems with coordination of movement				
☐ Height Vertigo	☐ Difficulty walking on uneven ground				
☐ Unsteady or drunken-like gait (walking difficulties)	Difficulty negotiating steps/stairs				
These equilibrium/balance issues are often associate	d with damage to the cerebellum and/or the vestibulocochlear nerve.				
CARDIO-RESPIRATORY PROBLEMS					
	Sleep Apnea (Central, Obstructive, or Mixed)				
Episodes of rapid heart rate (tachycardia)Heart Palpitations					
Postural Orthostatic Tachycardia Syndrome (POTS)Hypertension (high blood pressure)	□ "Strangling" feeling □ Feeling like there's a "lump" in your throat				
☐ Hypertension (high blood pressure)☐ Hypotension (low blood pressure)	Blackout spells (related to syncope)				
	Fainting (syncope)				
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position of head	Lack of gag reflex				
☐ Abnormal breathing	Excessive choking/aspiration (oropharyngeal dysphagia;				
☐ Shortness of breath	inhaling food, fluid and/or saliva down into the lungs)				
	with damage to the vagus nerve, which starts at the base of the brainstem.				
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ESOPHAGEAL/GA	STROINTESTINAL PROBLEMS				
☐ Difficulty swallowing (esophageal dysphagia; food/meds	get 🔲 Abdominal pain				
stuck in your esophagus before entering your stomach)	☐ GERD (Gastroesophageal Reflux Disease)				
□ Nausea/vomiting	☐ Hiccups (especially when drinking carbonated beverages)				
□ Gas/bloating	☐ Increased food allergies/sensitivities				
These esophageal/gastrointestinal problems are generally associated with damage to the vagus nerve, one of the longest nerves in the body, which starts at the base of the brainstem and travels to the gut.					

Chiari & Comorbid Symptoms Compilation (Revised) Continued

COGNITIVE PROBLEMS					
☐ Insomnia/Fatigue ☐ Brain fog (problems thinking and/or concentrating)	□ Depression/Anxiety□ Sensitivity to auditory stimuli				
☐ Secondary Attention Deficit Hyperactivity Disorder (sADHD)	☐ Emotions (over/under emotional)				
☐ Memory Problems (long/short term)	Easily confused (sometimes causing aggression, resentment				
☐ Mild Aphasia (problems remembering words)	and/or depression) ☐ Sensory Processing Problems (especially auditory stimuli)				
Dyslexia While same of these cognitive problems can be a	lirectly physiological in nature, most are associated with				
	ms, caused by damage to the vagus nerve.				
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	ON PROBLEMS				
□ Blindness or Color Blindness	☐ Problems with depth perception				
□ Blurred/Double Vision	Aura Disturbances (floaters, spots, halos, or fireflies)				
□ Blind spots	Photophobia (sensitivity to bright lights)				
□ Decreased peripheral vision	□ Problems with depth perception				
	lly associated other conditions that are "comorbid" to Chiari h as Ehlers-Danlos or Intracranial Hypertension.				
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EAR/HEARING PROBLEMS					
☐ Hearing loss	☐ Increased sensitivity to certain frequencies (Hypersensitive)				
☐ Fluctuating hearing	Pain/tension along ear, eye, jaw line				
☐ Pressure (stopped up feeling) in the ears (aural fullness)	☐ Fluid-like sound in ears (like water running)				
☐ Ringing or buzzing in the ears (tinnitus)	☐ Hear heartbeat in ears				
☐ Intolerance of loud/confusing sounds	☐ Earaches				
☐ Increased sensitivity to noise (Hyperacusis; Misophonia)					
Many of our auditory (ear/hearing) problems are associated with damage to the vestibulocochlear nerve, which connects the brainstem at the pontomedullary junction, which is the groove between the lower pons and the upper medulla oblongata., often damaged by the cerebellar compression with Chiari.					
SENSORY PROBLEMS (TOUCH, TASTE, SMELL)					
☐ Tingling/crawling feeling on scalp/body	☐ Electric shock sensations (Lhermitte's sign)				
□ Itchiness	☐ Loss of taste				
☐ Pins/needles sensations	Problems with sense of smell (loss of smell)				
☐ Burning sensations	Decreased sensation to temperature				
Most of these sensory problems center around nerve damage (crania	l or peripheral), while others are centered around damage to the spinal cord.				
PROBLEMS WITH VOICE/SPEECH/ORAL					
☐ Hoarseness/inability to modulate voice when singing or	☐ Voice Tremors				
speaking loudly	☐ Disjointed (incoherent) speech				
□ Slurred speech	☐ Excessive Drooling				
☐ Change in voice character and timber					
These issues are often associated with	damage to one or more of the cranial nerves.				
PROBLEMS WITH EXTREMITIES					
☐ Poor blood circulation (cold hands/feet)	☐ Numbness/tingling sensation (paresthesia; can be felt in				
☐ Decreased sensation to touch in extremities	arms/hands, legs/feet, face/scalp, trunk)				
☐ Decreased hand coordination (poor fine motor skills)	☐ Joint laxity/hypermobility problems (subluxations,				
☐ Spasms/Tremors (internal and external)	dislocations, early degeneration, etc.)				
☐ Arms/legs feel heavy & hard to lift					
These problems of the extremities can have a variety of pathologies of the spine and nerves,					
but in general the point of damage is generally above the problematic extremity					

Chiari & Comorbid Symptoms Compilation (Revised) Continued

GYNECOLOGICAL/UROLOGICAL PROBLEMS					
	Numbness of the pelvic area		Pulling sensation while sitting/standing		
	Menstrual problems (severe cramping during period)		Urinary frequency		
	Loss of sexual interest (lack of sensation in pelvic area)		Bladder/Bowel incontinence		
These gynecological/urological problems are generally associated with damage to the spinal cord/nerves at a point at/above the pelvic area, pathologies include but are not limited to Tethered Cord Syndrome (TCS) and/or degenerative disc issues.					
OTHER PHYSICAL PROBLEMS					
	Decreased muscle tone		Excessive thirst		
	Muscle weakness		Dehydration		
	Heaviness of limbs		Swollen face		
	Restricted movements		Skin problems		
	Inability to regulate body temperature		Dry skin and lips		
	Profuse sweating or inability to sweat		Swollen lymph nodes		
	Excessive shivering or inability to shiver		Seborrheic Dermatitis		
	Hair loss/thinning hair				
These other physical problems can stem from a broad variety of issues, from Mast Cell Activation (MCAS), to symptoms of Dyautonomia, to damage to the spine/spinal nerves or other areas of the brain (such as the pituitary gland).					

CHIARI N BRIDGES