Report on the Reunión Iberoamericana de Neuro-otologia 2018

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ABSTRACT

A report on the Reunión Iberoamericana de Neuro-otologia 2018 Fundacion Iberoamericana de Neuro-otologia.

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The scientific program of the Fundacion Iberoamericana de Neuro-otologia (FINO) took place at the AR Centro de Convencion in Bogotá, Colombia from 27 to 29 July 2018 and provided a venue for neuro-vestibular and neuro-ophthalmologic specialists to share experiences and learning together. The marvellous landscape of Bogotá (Figure 1) was the ideal setting for experts and attendees to embrace our shared experiences and explore new ideas.

Each day of conference highlighted a different set of subspecialty topics. Day 1 lectures were given by neurologists and ophthalmologists. Themes included disorders of cerebrospinal fluid dynamics, skull base, and unusual primary headache disorders. Day 2 topics revolved around otology and vestibular neurology, and included positional vertigo and Meniere's disease. Day 3 featured two *magistral* conference speakers: David Zee and David Newman-Toker.

Jorge Kattah was honoured at the conference for his career achievements and he also presented the inaugural conference lecture, 'Vestibular and Oculomotor findings in Thiamine Deficiency' (Figure 2).

During the first session of the meeting, the topic of pseudotumour cerebri was explored. Dr. Jonathan Horton presented his experience with lumboperitoneal (LP) shunting in these patients and how he personally had success with this procedure. He prefers LP shunting to ventriculoperitoneal shunting, but notes that much of the success may be

based on the talents of the surgeon, so finding an experienced surgeon to work with on a regular basis would be imperative to using this approach. An entertaining and passionate debate then occurred among the expert panel and the audience about if patients with suspected pseudotumour actually need a spinal tap for diagnosis. It has always been a presumed fact that spinal taps are performed in these patients, but the question came up: why? Walter Jay pointed out that he has had several patients who had presumed pseudotumour who actually had alternative diagnosis, but there were others who noted the likelihood of finding a different diagnosis in the appropriate clinical setting was so low, that it becomes unnecessary. David Newman-Toker concluded the debate by pointing out that it would only be settled by creating an algorithm which could answer the question based on data.

Another query arose: Can you have IIH without papilledema? Several of the experts stated that it is possible, although one had not seen a convincing case in his experience.

Janet Rucker reviewed intracranial hypotension, and one audience member pointed out that it would seem to be a conflict to perform a lumbar puncture to diagnose this condition, considering it could potentially lower the spinal pressure even more, but Dr. Rucker reassured us that a spinal tap was safe and not inappropriate.

This English-language session ended with a few pearls: Walter Jay noted that we should

Figure 1. The landscape of Bogotá Colombia upon entering the city.

Figure 2. Dr. Jorge Kattah at the podium at his inaugural speech.

not wait too long to perform a surgical procedure on pseudotumour patients who are deteriorating, and Dr. Horton used the ‘picture is worth a thousand words’ concept to iterate that pseudotumour could be cured with gastric bypass.

The next set of talks switched from English to Spanish. Skull based cases were followed by an entertaining and informative session on headaches. Andres Castagno reminded us that although tension headaches are band-like and trigeminal autonomic cephalgias run in the distribution of

Figure 3. Dr. Kattah (second from left) surrounded by his friends and colleagues (left to right: Dr. John Pula, Dr. David Newman-Toker, and Dr. David Zee).

the trigeminal nerve, a patient describing pounding of the entire head could have the condition of ‘being married’! Sergio Carmona discussed the elusive topic of vestibular migraine. He noted that 95% of cases have ataxia and central signs. He uses Topamax for migrainous vertigo.

Following the first day of speakers, a powerful dedication of the meeting to Colombia was given including a video presentation showcasing the pride and honour of the Colombian people and participants and which also was played the Colombian National Anthem during which all audience members stood out of respect to the country. A welcome from the FINO ambassadors

welcomed participants from around the world, including speakers from not only Colombia and the US, but also Spain, Argentina, Italy, Brazil, and Switzerland, among others.

Throughout the meeting, friends and co-researchers shared stories about the meeting’s honoured guest: our neuro-ophthalmology colleague Dr. Kattah. During breaks and at the receptions, Dr. Kattah was greeted with cheers and stories of his clinical acumen and magnanimous personality (Figure 3). Dr. Silva recognized his upbringing in Colombia, followed by training in Washington, then fellowship in Pittsburg, followed by professorialship at Georgetown, then as

Figure 4. A girl dressed in Colombian colours watching passers-by.

chairman of the University of Illinois College of Medicine in Peoria.

Dr. Sergio Carmona addressed the program participants, noting that future meetings in Cancun and Spain would continue the tradition of the FINO, and a tradition of awarding a gold medal would be given each year. The chairman

of the FINO scientific committee presented Dr. Kattah with a gold medal. Dr. Kattah then spoke of the Vestibular and Oculomotor Findings in Thiamine Deficiency. He showed that in early thiamine deficiency, gaze evoked nystagmus and an abnormal head impulse test could predate other symptoms such as

Figure 5. Fruits at the market in Bogota.

encephalopathy. After administration of thiamine, these symptoms have been shown to improve. Other pearls he presented to us regarding this clinical entity are that the horizontal vestibular-ocular reflex is more affected early on and that these patients do not have Korsakov psychosis. He concluded that not performing a head impulse test in all patients will cause you to miss disease.

There was much more content and excellent speaker presentations for the duration of the meeting. Some of the other highlights included Dr. Aasef Shaikh discussing the physiology of perceptive vertigo, Dr. Dario Scocco explaining the concept of 'sitting up vertigo', and presentations by Dr. David Zee on magnetic vestibular stimulation

and Dr. David Newman-Toker on the HINTS evaluation.

Besides the exceptional presentations and audience enthusiasm, the setting of Bogota lifted the spirits of those from the area, and amazed those who had never set foot in Colombia before. The pride and culture of the people was on display at almost every street corner ([Figure 4](#)). For those of us whose first time in Colombia would not be soon forgotten, the gustatory offerings would be one of the reasons! ([Figure 5](#)).

With that, I conclude this recap of the 2018 FINO conference, with the hope and expectation that it grows and flourishes and that the specialties of neuro-ophthalmology and neuro-otology continue to partner and share their talents for the future.