

Understanding Motion Sickness

Information for patients and families

Your clinician has talked with you about motion sickness — the queasy, unwell feeling that some people get in cars, boats, planes, on fairground rides, and increasingly from screens and virtual reality. This leaflet explains what it is, why some people get it more than others, and the practical things that help.

What is motion sickness?

Motion sickness is a normal response of the balance system — not a disease and not a weakness. Your brain judges movement by combining signals from your inner ears, your eyes, and your body. When these signals disagree — for example when your inner ear feels the car moving but your eyes, fixed on a book, say you are still — the brain registers a mismatch, and that mismatch can produce nausea. How easily this happens is called your motion sickness susceptibility. It varies a lot from person to person, it tends to run in families, and it can be measured with simple questionnaires.

What can set it off?

- Travel — cars (especially as a passenger or when reading), buses, trains, boats and ships, and aircraft.
- Fairground rides, swings and roundabouts.
- Screens and virtual reality — scrolling on a phone, wide cinema screens, video games and VR headsets. This is sometimes called 'cybersickness' and is becoming more common.

What does it feel like?

Common feelings include nausea, cold sweating, going pale, increased saliva, drowsiness, headache, a sense of unsteadiness, and sometimes vomiting. Symptoms usually settle once the movement stops, but they can leave you washed out for a while.

Why me?

Susceptibility is partly inherited, so it often runs in families. It is strongest in childhood and usually eases through the teenage years. Women tend to be more susceptible than men, particularly in the reproductive years, and it can increase around hormonal changes and in pregnancy. People who experience migraine are also more prone to motion sickness. Interestingly, susceptibility usually decreases again in older age.

Things you can do yourself

- Choose the lowest-motion spot — the front seat of a car, over the wing of a plane, or the middle of a boat.
- Look at the horizon or a distant fixed point, and avoid reading or looking at a screen while moving.
- Get fresh air, keep cool, and recline your head against a support.
- Travel with a light, settled stomach — neither very hungry nor over-full — and sip water.
- Try slow, steady breathing — about six slow breaths a minute — practised before you travel.

- Ginger (for example ginger tablets or ginger tea) helps some people and is a good option in pregnancy.

Medicines that can help

Several medicines can prevent motion sickness, but the key is to take them before you travel — once you already feel sick they work poorly. Skin patches (scopolamine) need to go on a few hours before travel and last a few days. Tablets such as cinnarizine and dimenhydrinate are widely used and effective. Some of these can cause drowsiness, so do not drive or operate machinery after taking them, and check with your pharmacist or doctor — especially if you are pregnant, elderly, or take other medicines.

Training your brain to cope

The most powerful long-term approach is gradual, repeated exposure. Because motion sickness comes from a sensory mismatch the brain can learn to correct, building up exposure little and often — short trips, or brief periods of screen or VR use that you slowly increase — trains the brain to tolerate movement. This 'habituation' is the basis of programmes used for travel sickness, for screen and VR sickness, and for crews in the navy and aviation. A vestibular physiotherapist can guide a structured programme if simple measures are not enough.

When to see your doctor

Motion sickness itself is harmless. But you should be reviewed if it begins for the first time in adult life, gets steadily worse, or comes with other symptoms such as new hearing changes, severe headaches, double vision, or persistent dizziness and unsteadiness off motion. These need checking to make sure nothing else is going on.

Living well with motion sickness

- Plan ahead — take any medicine in good time before travelling, not after symptoms start.
- Keep doing the things you enjoy — gentle, graded exposure builds tolerance, whereas avoiding everything tends to make susceptibility worse.
- Be patient — with the right measures most people find their symptoms become much easier to manage.

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This leaflet is general information and does not replace advice from your own clinician.