

Balance problems after stroke

Stroke Support Helpline: **0303 3033 100**
or email: helpline@stroke.org.uk

This guide explains how a stroke can affect your balance, what can help and how to get support.

After a stroke, you may experience problems with balance, such as feeling unsteady when sitting, standing or walking. Balance depends on your brain, muscles, joints, sense of touch, vision and inner ear all working together. When a stroke affects one or more of these things, it can make it harder to stay upright and move safely.

There are some other causes of balance problems and treating these can help improve your balance. Some of these conditions are included in this guide, but you should always get individual advice from a GP or therapist about any balance problems you may have.

Problems with your balance may make you feel worried about falling, or less confident about moving around, but treatment and support can help.

How can a stroke affect your balance?

Weakness on one side of your body

A stroke often causes weakness on one side of your body, which can make it difficult to balance. You may find it hard to sit up safely or you may have difficulty standing.

You may be able to walk but find it difficult to lift or move your foot and toes quickly enough to stop them catching on the ground when you step. This is known as foot drop. It can make you feel unsteady or more likely to trip.

Loss of sensation

Reduced feeling and awareness of your body's position may make it more difficult to move and keep your balance, particularly with loss of sensation in your leg. This can increase your risk of having slips, trips and falls.

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Concentration problems

After a stroke, changes in your concentration and attention can make it harder to keep your balance and react to changes in your surroundings. Reduced focus can increase the risk of losing your balance or falling, especially in busy places or distracting situations.

Many people who fall say they were thinking of other things, or doing several things at the same time. One example is walking and talking at the same time – you might find you need to stop walking if you want to listen or talk.

Vision problems

Vision is an important part of balance. Vision problems are common after stroke. They include difficulty focusing, double vision, eye movement problems and missing part of your field of vision (hemianopia).

Vision problems can make it difficult to judge distances, see obstacles or stay aware of your surroundings. This can affect your balance and increase the risk of tripping or falling, especially when moving around unfamiliar or uneven areas. Our guide, '**Vision problems after stroke**', has more information on these problems.

Have a regular eye test and wear glasses if you need them. Your optician can refer you for specialist help with vision problems.

Vertigo

You may experience vertigo if a stroke happens in the areas that control balance in the brain, the cerebellum and brainstem. Vertigo means having a feeling that you or the world around you are moving or spinning. You can feel dizzy or lose your balance more easily.

Neglect

Spatial neglect, or inattention, happens when the brain does not process sensory information from one side of the body or your environment. You might find you bump into objects on that side. If it's more severe, you may be unaware of that side of your body and the space around it. You may try to move but forget that one leg is weak or ignore that side altogether, which can cause you to lose your balance.

Fatigue

Fatigue is common after a stroke. You may feel you lack energy and are constantly very tired, physically and mentally. This can make it harder to concentrate, move and stay alert and may affect your ability to keep your balance. Our guide, '**Fatigue after stroke**', has more information.

Ataxia

Ataxia refers to a lack of coordination and control over movement. This is often caused by damage to the cerebellum, which controls balance and movements. People with ataxia have difficulty with controlling smooth movements. Movements of your limbs and body tend to be shaky, and arms or legs can miss their target. This can make balance difficult when sitting and standing. If your steps are uncoordinated, your feet might not end up in the exact position you wanted. This can make it difficult to balance.

Pusher syndrome

Some people experience the sensation that they're upright even when they're leaning heavily to their weak side, sometimes to the extent that they cannot sit up safely. This is called 'pusher syndrome'.

Side effects of medication

Some medicines may sometimes cause dizziness or drowsiness, which might affect your balance. This may include some types of high blood pressure medication or antidepressants. Interactions between different medicines can also affect your balance.

Talk to your doctor, pharmacist or another healthcare professional if you have any concerns about your medication. You may be able to try new drugs or a different combination of drugs. Never stop taking any medication without speaking to a healthcare professional first.

Other causes of balance problems

A range of other conditions not directly related to stroke can also cause dizziness and loss of balance. These include:

- Inner ear infections.
- Inner ear problems like Benign Paroxysmal Positional Vertigo (BPPV).
- Migraines.
- Confusion due to a urinary tract infection.

What help is there for balance problems?

From 24 hours after a stroke, with your therapists' help, you can try to help your recovery by starting to get moving. Recovery tends to be fastest in the first few weeks and months after a stroke, but it can continue for years. Everyone is different and there is no fixed time for recovery.

Physiotherapy

A physiotherapist can assess you. They can recommend activities or exercises that may help improve your balance. You should see a physiotherapist while you are in hospital. If you have left hospital, your GP can refer you for physiotherapy. Private physiotherapists and some NHS services will accept a self-referral where you can go to them directly to request assessment and treatment. For more information, see our guide, '**Physiotherapy after stroke**'.

'I was given exercises from my physio that helped me regain my balance and coordination for walking and getting around.'

Ryan, stroke survivor

Balance retraining exercises

A physiotherapist might give balance re-training exercises. They will work with you to find out what you find difficult and set activities and exercises to help you improve your balance. These will become gradually more challenging to help you improve. The exercises may start while sitting and then progress to standing and walking, perhaps with the help of equipment or the support of other people.

Other activities might include moving past obstacles, changing direction and speed, and walking up stairs. You'll only be asked to do these when the therapist thinks it's safe for you.

Balance retraining may take place in one-to-one and group sessions in hospital with a physiotherapist or rehabilitation support worker. You can carry on by practising yourself or with support from family or friends.

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After you've left hospital, some of your rehabilitation may be offered online in one-to-one or group sessions. Your healthcare team should make sure you have the right equipment and support to access online appointments, or offer therapy in person if online appointments are not suitable for you.

Sometimes, people feel worried about falling while practising balance exercises. If you're concerned, ask your therapist for advice.

Activity and fitness groups

Some stroke support groups and other community groups run exercise classes or other services to help people with disabilities stay active. Group activities might take place in person or online. Classes such as tai chi might help improve balance for some people, but always speak to the instructor about your abilities before you start a new class. See our guide '**Getting active after a stroke**' for more ideas about staying active.

Vestibular exercises

Vestibular training focuses on improving balance and reducing dizziness by retraining the brain to adapt to changes in movement and head position. The vestibular system helps control balance and spatial orientation (understanding where you and other objects are positioned in relation to your surroundings, for example, knowing how close you are to furniture). The vestibular system can be affected after a stroke, leading to unsteadiness, vertigo (a spinning sensation) or disorientation.

You may be referred to a specialist if you need vestibular rehabilitation. Vestibular exercises may include head and eye movements, balance challenges and walking tasks that gradually increase in complexity. These activities help the brain relearn how to process sensory signals from the inner ear, eyes and body. This can help improve your overall balance, coordination and confidence while moving.

Equipment to help with balance problems

A walking stick or walking frame can improve your balance and your confidence. It's important the equipment is the correct size for you, so get professional help when choosing.

If you have foot drop (difficulty lifting your foot and toes off the ground when walking) you may be offered an ankle-foot orthosis. An orthosis (also called a splint) lifts your toes and foot and supports your ankle when you step forward. Your physiotherapist can prescribe a splint or may refer you to the local orthotics department. See our guide '**Physical effects of stroke**' for more information on foot drop and other treatments, including functional electrical stimulation.

Help to prevent falls

Many people tell us they feel worried about having a fall after a stroke. Support is available to help you reduce your risk of a fall and feel more confident getting around. You should be offered a falls risk assessment and support as part of your stroke rehabilitation.

If you've left hospital, your GP can give you advice if you've had a fall or are worried about falling and may refer you for help. A physiotherapist can also give you individual advice, including about what to do if you have a fall.

Some areas offer a falls prevention service to support people at risk of a fall. The way services run varies, but they all offer advice on how to prevent falls and injuries. They can help you address issues, including:

- Any other conditions you have which may increase your risk of a fall.
- Reviewing your medication.
- Vision problems.
- Footcare and the importance of appropriate footwear.
- Your home environment, to see if there is anything that increases your risk of a fall, such as loose rugs. Simple home adaptations may help, such as a hand-rail for steps or a seat to help you get in and out of the bath.
- They may also offer exercises to strengthen your legs and improve your balance.

In some areas, you may be able to self-refer to a falls service. Check with your GP surgery or see [nhs.uk/conditions/falls](https://www.nhs.uk/conditions/falls) for more information.

Tips to avoid a fall

- Try to avoid doing two things at once, such as walking and talking on the phone. Many falls happen when people are thinking of something else or doing several things at once.
- Focus on your movements when you do anything tricky. This includes turning, going up and down stairs, or getting in and out of the bath or bed. These are all common times when falls happen. Step around carefully when you are turning, rather than twisting. Hold onto nearby solid objects and take your time. If you feel dizzy when you first stand up, hold onto something and wait for the dizziness to pass before you go anywhere. Use aids if you have them and get someone to help if you need to.
- Move at a speed you find comfortable. Do not rush to do things more quickly.
- Organise your home so you're less likely to bump into things. Remove clutter. Arrange furniture so you do not have to walk around it. Keep items you use the most in cupboards which are easy to reach.
- Keep floors clear of trailing wires, loose rugs, frayed carpets or anything else you might trip on.
- Mop up any spills straight away.
- Use high-wattage light bulbs so you can see clearly, particularly around stairs. If you get up in the night, turn the light on.
- Keep your home warm. Cold muscles work less well and this can affect your balance.
- Ask an occupational therapist about getting equipment such as hand-rails for the stairs and bathroom. Your GP can refer you to an occupational therapist. Use any walking aids, such as sticks or frames your therapist has provided.

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- Consider getting a personal alarm which can call for help if you have a fall. See our guide, '[Equipment for independent living](#).'
- Wear well-fitting shoes or slippers with thin soles, high sides and a good grip. Never walk on slippery floors in socks or tights. Avoid wearing loose, trailing clothes which could trip you up.
- Talk to a podiatrist (also called a chiropodist) about any foot problems. These can increase the risk of falls if left untreated. Your GP may be able to refer you to a podiatrist or some services may accept self-referrals.
- Try to keep physically active, as not moving around for long periods can affect your balance.
- Eating well and drinking enough can stop you feeling light-headed, which can also affect your balance.
- Have regular eye tests and wear any glasses prescribed for you.
- Ask for help with tasks you cannot carry out safely, or leave them if they are less important.

Where to get support and information

From the Stroke Association

Stroke Support Helpline

Our Stroke Support Helpline is for anyone affected by a stroke, including family, friends and carers. The Helpline can give you information and support on any aspect of stroke.

Call us on **0303 3033 100**,
Textphone **18001 0303 3033 100**
Email helpline@stroke.org.uk

Read our information

Log onto stroke.org.uk, where you can find easy-to-understand information, videos and an online community to support you. You can also call the Stroke Support Helpline to ask for printed copies of our guides.

Other sources of help and information

Age UK

Website: ageuk.org.uk/falls

Adviceline: **0800 678 1602**

Information for older people including guidance on avoiding falls, plus wellbeing advice and tips on strength and balance.

Chartered Society of Physiotherapy (CSP)

Website: csp.org.uk

Tel: **020 7306 6666**

Information for the public on accessing physiotherapy.

NHS

Website: nhs.uk/conditions/falls

Offers practical tips for reducing falls and some balance exercises. Before you follow advice and exercises online, check with your physiotherapist or GP to make sure it's safe for you.

About our information

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at feedback@stroke.org.uk

Accessible formats

Visit our website if you need this information in audio, large print or braille.

Always get individual advice

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Stroke Support Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don't control the information provided by other organisations or websites.

You know more than most just how shocking and confusing having a stroke is. We're here to support you and your family find the strength and determination to get back to life.

Learn more about stroke support: stroke.org.uk

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