

Benign Paroxysmal Positional Vertigo (BPPV)

Balance clinic

This leaflet is for patients who may have been told that they have a condition called BPPV and will need to be assessed and if needed treated. This leaflet aims to inform patients on what to expect during their appointment and how to prepare.

If you have any questions about your appointment or information provided in this leaflet, please contact your clinician to discuss these prior to your appointment.

What is BPPV

Benign Paroxysmal Positional Vertigo (BPPV) is the name given to a condition which often causes short, intense bursts of vertigo (spinning sensation), often associated with certain head movements.

- **Benign** – meaning this is not a threat to your health
- **Paroxysmal** – meaning short bursts of dizziness
- **Positional** – meaning dizziness is triggered by certain positions
- **Vertigo** – meaning a spinning sensation

BPPV is a common cause of dizziness which involves the balance organs in the inner ear. BPPV can affect people of any age but is more common in the elderly population. Symptoms of BPPV include short intense bursts of vertigo (spinning sensation) which lasts usually for a few seconds (up to a minute).

These bursts of vertigo almost always occur following certain head movements e.g. rolling over in bed, bending down or looking up. These are known as triggers. Triggers do not cause BPPV, they only induce the dizziness when the crystals have dislodged into the semi-circular canals.

Causes of BPPV

To understand BPPV you need to have a little understanding of how your inner ear works.

Your inner ear is located deep within your head and is responsible for both hearing and balance. The inner ear is made up of the cochlear (hearing organ), and 5 balance organs on each side: 3 semi-circular canals and 2 otolith organs (called the saccule and utricle) containing chalky crystals.

The semi-circular canals are fluid-filled and provide information to the brain to detect angular movements, that is, when the head is tilted up and down or sideways or turned from side to side. The otolith organs detect linear movements, that is which way is up or down as well as forward and backward movements.

BPPV develops when those chalky crystals, dislodge and enter one of the semi-circular canals. Most cases, the cause is unknown (idiopathic) but there are some conditions that could dislodge the crystals e.g. head trauma, severe whiplash, inner ear infections like labyrinthitis.

Thus, when you make a head movement, the fluid in the semi-circular canals move which also moves the crystals, the crystals will travel further through the fluid, resulting in dizziness.

Appointment

Appointment duration

Your appointment will be allocated between 30 minutes to 1 hour to complete all necessary tests and treatment.

Preparation for appointment

- Please stop taking any anti-dizziness medication for 48 hours before your appointment. Continue to take other medication as normal. Speak to your GP and your Clinician if you feel you are unable to stop taking your anti-dizziness medication
- Please do not consume any alcohol for 48 hours before your appointment
- Please do not wear any make-up, including eye-make-up to your appointment as it can interfere with the tests
- Please bring a list of your current medications (if you take regular medication)

What to expect at your appointment

This is a training department so you may be seen by a trainee and their supervisor. If you do not wish to be seen by a trainee, please let your clinician know.

The first stage of your appointment will involve the clinician taking a detailed history (description) of your balance episodes and general health. The timeline of episodes and their triggers are important. The clinician will also ask about your general health which includes medications.

The second stage of the appointment will involve completing a test for BPPV and treatment manoeuvres if needed.

Diagnosis and Treatment

BPPV is diagnosed by:

1. Listening to a description of your episodes.
2. Positioning tests that will trigger your symptoms. We need to see the dizziness which will become evident in your eye movements (nystagmus). The eye movements occur when dizziness is triggered. The eye movements will then be measured and analysed to identify which canal is housing the loose crystals. The tests will involve either sitting or lying on a bed and extending your neck. The most common positioning test is the Dix Hallpike test.
3. There are other diagnostic positional tests, for example the side-lying, roll and straight head hanging tests. Discuss with your clinician if you are unable to lay flat or move your head in various positions and the tests could then be modified.

For the most common type of BPPV, you will be required complete a series of movements as depicted below.

You will be sat up right on the bed, with head turned slightly to the left or the right.



You will then be asked to lie down as quickly as you can, keeping your head turned slightly. You will end with your head off the back of the bed, being supported by the clinician.



You will stay in the position for ~30 seconds, whilst the clinician monitors your eye movements. Your dizziness may be triggered in this position if you have loose crystals present.



Once the dizziness has passed, you will then sit back up to the starting position.

Treating BPPV

BPPV can often clear up on its own after a few weeks.

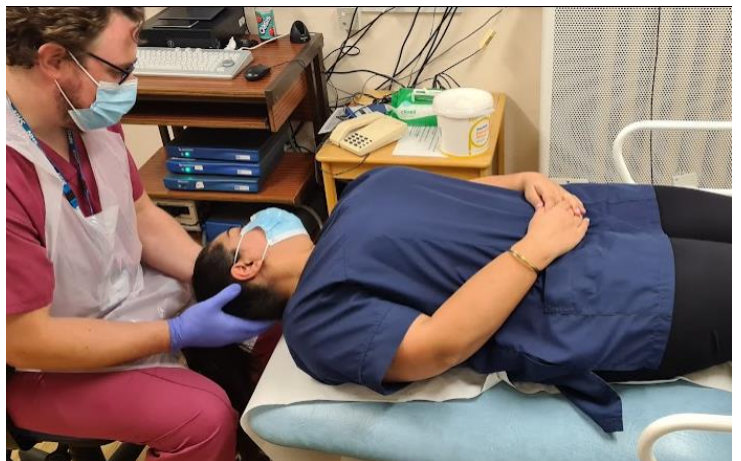
If this isn't the case treatment will involve completing manoeuvres which aim to move the loose crystals out of the canal back to the otolith organ. The most common being the Epley manoeuvre. Medications are ineffective and should generally not be used to treat BPPV. At times anti-sickness medication may be needed when someone is experiencing severe nausea and vomiting.

At each stage of the manoeuvre, you will be asked to stay in that position for several seconds, before moving on to the next position. With each stage, your dizziness may be triggered as the crystals are moving, however this should be short lived. See depiction below.

You will be lying flat on your back, with your head off the bed and supported by the clinician.



You will then slowly turn your head from one side to the other, remaining in the same lying position.



You will then be asked to turn onto your side, keeping your head turned so that you should end up facing the floor.



You will stay in this position for several seconds.



You will then bring your legs off the bed, and come to a sitting position, keeping the chin tucked in.



Are there precautions or potential risks for performing the tests?

These tests are designed to trigger your dizziness, however it is unlikely that the tests will trigger long-lasting balance symptoms, but if this is the case please contact your clinician for further guidance.

The test and treatment require whole-body movements. This will especially focus on the head, neck, shoulders, back, feet and legs. Some of the tests may be adapted depending on your abilities. The clinician will perform a risk assessment to decide on the safest test and treatment.

Can BPPV re-occur?

BPPV can re-occur even after successful treatments. The reasons for this are not clear. You will have open access to the BPPV clinic should your symptoms come back in the future, where we will assess and repeat treatment if needed without you having to see your GP.

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What should I expect after treatment for BPPV?

In the majority of cases BPPV is successfully treated after the first appointment. However sometimes the manoeuvre has to be repeated. It is not unusual to feel imbalanced or slightly unwell over the next 48 hours after treatment. In some cases you may have loose crystals in multiple canals and may need a different re-positioning manoeuvre.

After 48 hours we encourage you to move as normally as you can, even into those positions that were making you feel dizzy. We will call you a week after your appointment and see how you are doing and if you still have symptoms.

BPPV can co-exist with other balance disorders which may only come to light only after a successful treatment of the BPPV. Your clinician will discuss this with you if this is the case.

After the manoeuvre has been performed, avoid vigorous head movements, bending or extending your neck for about 24-48 hours.

Can I decline to have any of the tests performed?

Of course, we can only conduct these tests with your consent. The clinician will check you are happy to continue before beginning the test. You are free to decline any of the tests and treatments during the appointment. If you are concerned about the tests, contact your clinician prior to your appointment so this can be discussed.

Questions about the appointment

If you have any questions about your appointment, or any of the information provided in this leaflet, please contact your clinician before your appointment.

Contact us

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