

Benign Paroxysmal Positional Vertigo (BPPV)

Information for patients, relatives and carers

 For more information, please contact: The Balance Centre

The York Hospital, Wigginton Road, York, YO31 8HE Tel: 01904 725611

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What is Benign Paroxysmal Positional Vertigo?

Benign Paroxysmal Positional Vertigo (BPPV) is a very common condition. It causes brief episodes of a sensation of everything around you spinning which is called rotary vertigo. This happens when you put your head in certain positions. Typically this is when you lie down, turn over in bed, get out of bed, look up or down or under something. The spinning sensation usually lasts for only a few seconds and certainly less than a minute. Some people feel very sick (nauseated) during the spinning sensation and occasionally may vomit. Most people also feel unsteady on their feet as well.

BPPV rarely occurs in children and is most common in people over the age of forty. The incidence increases with age, eighty percent of the population get BPPV at least once in their lives.

What Causes BPPV?

In the inner ear there are three semi-circular canals filled with a thick fluid. At the base of these canals there are some tiny calcium carbonate crystals. In people with BPPV some of these tiny crystals break off and float into one of the semi-circular canals. Movement of the head into certain positions causes the crystals and fluid to move. This triggers an eye reflex movement called a nystagmus, which causes the spinning sensation (vertigo) and normally last a few seconds, though can seem longer. The spinning will stop but happens again when the head is moved into the positions mentioned earlier. BPPV occurs suddenly in many people but can follow a viral infection, a head injury or some other disorders of the inner ear. In some people the few floating crystals are soon absorbed by the body or return to their proper place and the condition therefore settles quickly without treatment. In others, the episodes of the spinning sensation are persistent causing disruption to their lifestyle.

What is the treatment for BPPV?

- 1. Correct assessment and diagnosis
- 2. Repositioning manoeuvre
- 3. Self-management

1. Correct assessment and diagnosis

In the balance centre we take a detailed history and test your balance and eye movements. We also do positional tests (including the Hallpike Dix Test) for BPPV on a bed. This gives us information about which ear and semi-circular canal is affected. If this test is positive we can usually treat you immediately, but sometimes it is necessary for you to return on another day.

2. Repositioning manoeuvre

The most common and very effective treatment for BPPV is a repositioning treatment (also known as an Epley manoeuvre). This moves the crystals out of the area in which they are causing symptoms.

This involves putting you in the position that is causing the spinning sensation for up to thirty seconds, then turning your head, then rolling you onto your side and finally sitting up. There are other manoeuvres depending on the type and location of the BPPV.

In about ninety percent of cases the condition is cleared up with just one manoeuvre but for some people it is necessary to repeat the manoeuvre or choose another form of treatment.

After a repositioning treatment you will be given advice about what to do next.

3. Self-management

There are other methods of self-management, which can be given to you once a definite diagnosis of BPPV has been made and if deemed appropriate by your physiotherapist.

After your treatment

If you have had the repositioning manoeuvre carried out in the balance centre it is very important that you follow this advice:

- Do not drive home.
- Avoid quick sharp head movements for twenty four hours.
- Avoid lying on the affected side for three days.
- You may experience mild imbalance following the treatment but this should settle after a couple of days.

Ring the balance centre to tell us how you are. This is usually after two weeks. Sometimes the treatment needs to be repeated

The specialist physiotherapist in the balance centre makes the decision about which form of treatment is best for you.

Can my BPPV re-occur?

Once you have had BPPV there is a chance that it will re-occur. If it does re-occur and you have been discharged from the balance centre, firstly see your GP. Some GP`s can perform the simple manoeuvre in their surgery. If this is not possible your GP could refer you back to us for treatment. Regularly BPPV can settle on its own without any treatment.

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Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Specialist Physiotherapists, Balance Centre, The York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 725611

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

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Telephone: 01904 725566 Email: access@york.nhs.uk

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