



Benign paroxysmal positional vertigo (BPPV)

This leaflet explains what BPPV is and how it is treated.

Benign: this means that the cause of the dizziness is **not** a threat to your health.

Paroxysmal: this refers to the fact that the dizziness comes in short bursts.

Positional: this refers to the fact that the dizziness only comes on in certain positions.

Vertigo: this is the medical name for the spinning sensation.

BPPV is the most common cause of dizziness arising from the ear and it happens to people of all ages but it is more common amongst middle-aged and elderly people. BPPV causes short bursts of intense dizziness when the head is placed in certain positions such as lying on one side in bed or looking up at the sky. People often feel sick and sometimes will feel unsteady for hours after the intense dizziness has passed.

What causes the dizziness?

The dizziness is caused when small crystals float away from another part of the ear and find their way into one of the semi-circular canals. There are three semi-circular canals in each of your ears and they detect which direction your head is moving in. So, when you put your head into certain positions, the crystals move about in the canal making your brain think that you are moving, when in fact you are not. If you stay in the position that makes you dizzy for a minute or so, the crystals will usually float to the bottom of the canal and stay there – this is when the dizziness wears off.

The crystals can become unstuck from their normal place, as a result of head injury, or following an infection of the inner ear, but most commonly it happens for no particular reason. It is usually just in one ear but occasionally people have it in both ears at the same time.

How is BPPV diagnosed?

BPPV is diagnosed by your description of the problem you have been experiencing and the result of a test for BPPV. Normally, the semi-circular canals tell the brain which way your head is moving so that the brain can move the eyes in the right direction. Because of this we can tell if something is wrong with your semi-circular canals by looking at your eyes. If you have got BPPV, your eyes will move in certain ways when your head is placed in a position that makes you feel dizzy.

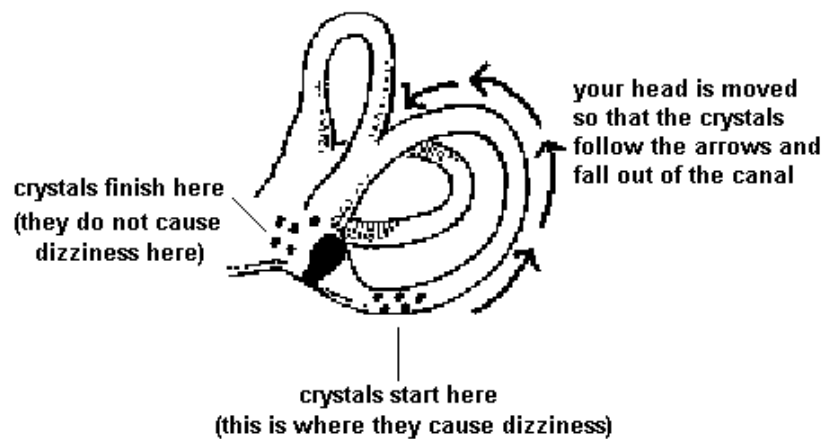
Treatment for BPPV

BPPV often clears up by itself after a few weeks or months without any treatment. For some people, the BPPV does not clear up by itself, so treatment is needed. Treatment is safe, simple and quick and for most patients the dizziness is eliminated after one treatment (although in some patients the treatment may need to be repeated).

How is BPPV treated?

To remove dizziness we have to remove the crystals from the canal. This can be done by taking you through a sequence of slow, controlled movements that make the crystals float out of the canal. The exact treatment depends on which canal the crystals are in and whether the crystals are floating around freely or if they have become attached to the sensitive part of the canal. We can usually tell which canal the crystals are in and whether they are floating or attached by the way your eyes move when we do the test.

Diagram of how the treatment works



What happens after the treatment?

It is not unusual to feel imbalanced or slightly unwell for up to 48 hours after treatment. After this, if the treatment has been successful, you should be able to move into positions that used to make you dizzy without any problems. Try all these movements three days after the treatment. Sometimes, a patient will need more than one appointment to successfully treat the BPPV. If you continue to have symptoms more than one week after you have had treatment appointment, please contact the department to arrange for a further appointment to repeat the treatment and to rule out need for further action.

What happens if the dizziness comes back?

It is not unusual for BPPV to return after a few months or years. If it does come back, you can contact us directly if it is within nine months of your last appointment with us and we will repeat the treatment. Following this time, you will need to be re-referred into the department.

Contact details:

If you have any questions or concerns you can contact your clinician in the Audiology Department on 0118 322 7238.

Email: audiology.royalberkshire@nhs.net

Website: www.royalberkshire.nhs.uk/audiology

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Audiology, January 2024.

Next review due: January 2026.

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