



Disclaimer: This leaflet provides general information and should not be used as a substitute for professional medical advice. It is essential to consult with a qualified healthcare professional for any health concerns or before making any decisions related to your health or treatment.

Overview

Benign paroxysmal positional vertigo (BPPV) is a common cause of vertigo, a sensation of spinning or dizziness. It occurs when tiny crystals in your inner ear become dislodged and move into the semicircular canals, which are responsible for balance. This can cause brief but intense episodes of vertigo, often triggered by specific head movements, such as rolling over in bed or looking up.

Symptoms and Causes

The main symptom of BPPV is vertigo, which can range from mild to severe. Other symptoms may include:

- Dizziness
- Light-headedness
- Nausea
- Vomiting
- Imbalance
- Unsteadiness

The exact cause of BPPV is not always known, but it can be triggered by:

- Head injury
- Inner ear infection
- Ageing
- Certain medications
- Prolonged bed rest

Diagnosis and Investigations

Your GP or ENT specialist can diagnose BPPV by performing a physical examination and asking about your symptoms. They may also perform a Dix-Hallpike test, which involves moving your head and body in specific ways to trigger vertigo. Further investigations are rarely needed, but occasionally an MRI scan of the brain and inner ear may be done to rule out other causes of vertigo.

Management and Treatment

The most effective treatment for BPPV is a series of simple exercises called canalith repositioning procedures (CRPs). These manoeuvres are designed to move the dislodged crystals back into the correct part of your inner ear.

Canalith Repositioning Procedures (CRPs)

There are two main types of CRPs: the Epley manoeuvre and the Semont manoeuvre. Both are very effective, with a success rate of around 80-90%.

- **Epley Manoeuvre:** This is the most commonly used CRP. It involves a series of four head positions, held for about 30 seconds each. The Epley manoeuvre can be performed by a healthcare professional or at home, after being shown the correct technique.
 - The Epley Manoeuvre (Left Ear): <https://www.youtube.com/watch?v=FVMfF7jQoKc>
 - The Epley Manoeuvre (Right Ear): <https://www.youtube.com/watch?v=BY4UeRmTYmA>
- **Semont Manoeuvre:** This manoeuvre is less commonly used than the Epley manoeuvre, but it can be just as effective. It involves a series of two head positions, held for about one minute each. The Semont manoeuvre is usually performed by a healthcare professional.
 - The Semont Manoeuvre (Left Ear): <https://www.youtube.com/watch?v=z2KUrQoZ-sU>
 - The Semont Manoeuvre (Right Ear): <https://www.youtube.com/watch?v=A72UjulJSzE>

Brandt-Daroff Exercises

If CRPs are not successful, or if you prefer to try a home exercise, you can try the Brandt-Daroff exercises. They often need to be repeated to be effective. They involve a series of head movements that are repeated several times a day.

- How to do the Brandt-Daroff exercises: <https://www.youtube.com/watch?v=kHRN21K-tWU>

How frequently to do the exercises at home:

- **CRPs:** If performed by a healthcare professional, a single session may be enough to resolve your symptoms. If you are performing the Epley manoeuvre at home, you may need to repeat it several times a day for a few days or weeks.
- **Brandt-Daroff exercises:** These exercises should be performed three times a day for two weeks. Each repetition should be held for 30 seconds, or until the dizziness subsides. Perform five repetitions in the morning, five in the afternoon, and five in the evening.

Other Home Balance Exercises

In addition to CRPs and Brandt-Daroff exercises, there are other home balance exercises that can help to improve your balance and reduce your risk of falls. These exercises may include:

- **Single leg stance:** Stand on one leg for 30 seconds, then switch legs.
- **Heel-toe walk:** Walk in a straight line, placing one heel directly in front of the other toe.
- **Clock reach:** Stand with your feet apart and reach for imaginary numbers on a clock face.
- **Balance board exercises:** Stand on a balance board and try to maintain your balance.

Vestibular Rehabilitation Therapy (VRT)

If your symptoms do not improve with home exercises, you may be referred for vestibular rehabilitation therapy (VRT). VRT is a specialised type of physical therapy that helps to improve your balance and reduce dizziness. It involves a series of exercises and activities that are tailored to your individual needs.

Prevention

There is no sure way to prevent BPPV, but you can reduce your risk by:

- Avoiding head injuries
- Treating inner ear infections promptly
- Getting regular exercise
- Maintaining a healthy weight
- Avoiding smoking

Outlook / Prognosis

The outlook for BPPV is generally very good. Most people's symptoms resolve completely within a few weeks or months with treatment. However, BPPV can sometimes recur, so it is important to be aware of the triggers and to seek treatment promptly if your symptoms return.