**Benign Paroxysmal Positional Vertigo (BPPV)**

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What is it and why do I have it?  
BPPV is caused by otoliths, a calcium carbonate crystal, being out of alignment in one or both of your inner ear balance canals. These otoliths, which we frequently call “crystals” or “stones”, are a normal part of your inner ear anatomy. It is only when they get out of place that the problem occurs. This can happen for a number of reasons but often develops after a head or whiplash injury, inflammation or infection in the inner ear, aging, or a sedentary lifestyle. It frequently occurs without any apparent reason.

What are the symptoms?  
Classic BPPV typically causes brief spells of true vertigo lasting less than a minute, triggered by certain head and body movements. The most common trigger movements include rolling over in bed, lying back in bed, bending over, looking over one shoulder, or by looking up. The condition might cause you to awake during the night with vertigo if you rolled over while sleeping. Although the vertigo is usually very brief, you might feel off balance for minutes or even several hours after this abnormal response is triggered. Between spells you may feel the sensation that your balance is slightly altered or “off”.

How do I know if I have BPPV?  
We performed a Dix-Hallpike maneuver today to test you for this condition. This simply means we had you lie back flat on a chair or table and allowed your head to hang towards the floor while your head was held to the right or the left. While you were in this position we observed your eyeballs for an electrical movement called rotatory nystagmus. If we saw this abnormal movement of your eyes during this maneuver, it means the crystals were out of place in the ear facing towards the ground and that you had a “positive” Hallpike.

How is it treated?  
The Epley maneuver was designed to dislodge the crystals. During the maneuver your BPPV is treated by turning your head to specific positions and then asking you to roll over to lie on your side and shoulder with your head still angled off the end of the table. We then asked you to sit up on the side of the table. It is encouraging if you experienced dizziness throughout the Epley maneuver as this means that the crystals were being moved during the treatment. Sometimes the Epley maneuver is performed more than once during your visit.

What if I have BPPV in both ears?  
You will still be treated with an Epley maneuver, but only one side can be treated at a time. The second ear will need to be treated another day.

Will I feel better immediately after the Epley maneuver?  
Some people feel better immediately. Some people may take up to 72 hours to feel better. Both are normal.

What do I do when I leave the office?  
If you do not feel like driving you will be asked to wait in our lobby until you feel better. Some people feel more comfortable having someone else drive them home. We ask that you take it easy for the rest of the day. We do not want you to bend over a lot today or work above your head. Some sources and internet sites suggest that you do should not lie flat for 48 hours or that you should wear a neck brace for several days. Our office does not ask this of you as it is our experience that such measures do not change the outcome of the Epley maneuver.

Is there a medication or surgery that will cure this instead?  
There is no medication that will cure this condition. In rare cases a surgery may need to be performed to control the condition.

Can I do this maneuver at home?  
Sometimes we do provide instructions in how to perform a Home-Epley maneuver.

Will it come back?  
Although the Epley maneuver is quite successful in treating BPPV, symptoms can develop again weeks, months, or even years down the road, requiring another course of treatment.

What if the Epley maneuver does not work for me?  
Fortunately the Epley maneuver treats BPPV successfully up to 85% of the time. However, there are some different versions of BPPV where the crystals are out of place in a different canal that requires a different type of maneuver. This was taken into account during your visit today. Sometimes additional testing may be required, including an MRI or formal balance testing called a VNG (videonystagmography). We may also consider having you participate in a course of balance rehab physical therapy.

Will I need to make another appointment?  
You can schedule a follow up appointment with us today before you leave. If you no longer have the symptoms it is acceptable to cancel later. Or you can wait a week or two and call us if you think you need to schedule another Epley maneuver. Either way is fine with us. We typically wait at least a week between maneuvers.

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**Important Contact Information**

**The Ohio State University**  
- (614) 366-3931 or dania.ahmed@osumc.edu  
  Dania Ahmed in Dr. Adunka’s office  
  non emergent questions, scheduling
- (614) 366-3687 Hospital Operator  
  after hours, ask for ENT resident

[The Ohio State University logo]

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**Nationwide Children's Hospital**  
- (614) 722-2000 Operator  
  after hours questions, ask for ENT resident
- (614) 722-6547 ENT Nurse line
- (614) 722-4333 Emergency Department  
  after hours emergency, only if no response from resident