



**LOYOLA
MEDICINE**

*We also treat the human spirit.**

POSITIONAL VERTIGO

Positional vertigo is also known as Benign Positional Paroxysmal Vertigo (BPPV). It is **BENIGN** because it is almost never due to anything seriously wrong inside the inner ear. **POSITIONAL** because it occurs with various position changes in the head. It is **PAROXYSMAL** because it can occur suddenly and last only a few seconds. It is **VERTIGO** because patients usually have episodes of spinning, rather than unsteadiness.

This condition is believed to be caused by the detachment of microscopic particles in the inner ear. The particles are called "otoliths" and originate in a part of the inner ear called the vestibule. From here the particles break loose and float around in the semicircular canals. When a person with BPPV moves his head, the particles move and stimulate the nerve endings in the semicircular canals, causing vertigo.

The vertigo usually occurs when looking up, looking down, or rolling to the right or left in bed. BPPV is one of the most common causes of vertigo, but what causes the otoliths to break loose is unknown. Fortunately, it is possible to treat BPPV by moving the head and body through various positions (called **REPOSITIONING MANEUVERS**). This attempts to move the otoliths back into the vestibule. Sometimes it is possible to perform the repositioning maneuvers at the first visit. However, if the vertigo is severe, then the patient must first be treated with a medicine (**DIAZEPAM** or **VALIUM**) that will help lessen the vertigo. The patient takes this medicine 30 minutes before the next appointment. The repositioning maneuvers can be very successful in lessening the vertigo of BPPV. Although most people are better after the treatment, there may be an unsteadiness that lasts for a few days. It may also be necessary to repeat the repositioning more than once. After a treatment, it is important for the patient to sleep in an upright position and avoid abrupt changes in head position for three days.

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