

VESTIBULAR DISORDERS — BENIGN PAROXYSMAL POSITIONAL VERTIGO (BPPV)

Cases

1. A 25 years old female presents to ENT OPD with severe vertigo. Vertigo lasts for 30 seconds on changing position. There is no history of hearing loss.
 2. A 50 year old female presented with vertigo while turning in bed, lasts only for a few seconds. Vertigo was not associated with tinnitus and hearing loss.
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Diagnosis

- Benign Paroxysmal Positional Vertigo (BPPV)
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Management

History / Clinical Features

- Vertigo associated with posture or head movements
- Duration: few seconds
- No vegetative symptoms (nausea, vomiting, diaphoresis usually mild or absent)

Examination and Investigations

- Dix-Hallpike test: Positive → confirms diagnosis
- Nystagmus elicited on certain head movements
- Full otoneurological examination
- Pure Tone Audiogram: normal
- MRI if symptoms persist >3 months
- Tympanogram: Type A (normal)
- No hearing loss

Treatment

- Epley's maneuver (canalith repositioning)
- Brandt-Daroff exercises
- Neck exercises for vestibular rehabilitation
- Vestibular sedatives if needed (rarely)

Differentiation from Meniere's Disease and Vestibular Neuronitis

- No hearing loss or tinnitus
- Vertigo lasts only a few seconds (vs. hours in Meniere, >24 hrs in neuronitis)
- Hallpike maneuver positive (specific for BPPV)

Differential Diagnosis

- Acute vestibular neuronitis
- Acute labyrinthitis
- Herpes zoster oticus
- Meniere's disease
- Perilymphatic fistula

-> The End <-