

**Patient
Information**

Understanding Benign Paroxysmal Positional Vertigo (BPPV)

Introduction

This leaflet gives you information about Benign Paroxysmal Positional Vertigo (BPPV) and aims to give you a better understanding of the condition.

What is BPPV?

This is a condition where people have short, sudden attacks of dizziness or vertigo brought on by certain positions of the head. These attacks may be unpleasant, but are not harmful. Vertigo is the sensation felt when either you or the environment around you is moving or spinning.

Why do symptoms occur?

Your inner ear is located deep within your head and is responsible for both hearing and balance. The inner ear is made up of three semi-circular canals, which are arranged in such a way that they respond to movements in all directions.

Inside each of the canals is fluid, which moves in response to the movement of your head.

This movement is translated into messages which are sent to the brain to tell your body how to keep your balance.

The lining of the canals is a soft film which is covered in tiny particles. Sometimes these particles can become loose and float in the fluid within the canal. This may happen for no apparent reason or as a result of a:

- Road traffic accident
- Head injury
- Bacterial or viral infection

Usually, only 1 of the 3 canals of either ear is affected. You will only have symptoms of vertigo or dizziness when particles in that particular canal are moved.

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Department

Therapy

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The following activities can cause you to have these symptoms but are not harmful.

- Turning in bed
- Lying flat in bed
- Lying on either side
- Bending forwards
- Looking up or down

Your symptoms will settle again once you have changed position.

Why have I been referred to the physiotherapist?

The physiotherapist will assess your dizziness or vertigo and will advise you on the best method to treat or manage it.

What will the physiotherapist do?

The physiotherapist will need to trigger the symptoms. You will be asked to lie on the bed and change positions to see when your symptoms occur. If your dizziness is triggered, it will be short lasting and will settle quickly. The physiotherapist will then be able to use the information they have learnt from this test to decide how to treat your symptoms. This may be by exercises or by a manoeuvre (movement).

A manoeuvre is a series of head movements that enables the particles in the inner ear to move to a location within the canal where they cannot be detected and do not cause further symptoms.

How will I feel afterwards?

You may feel dizzy and/or sick after a manoeuvre, so we advise you not to drive home afterwards. You may wish to bring someone with you to this appointment who will be able to drive you home.

You may feel the benefit of treatment immediately, but it often takes a few days to know if there has been any improvement.

Patient Information

Contact information

Therapy Departments

Gloucestershire Royal Hospital

Tel: 0300 422 8527

Cheltenham General Hospital

Tel: 0300 422 3040

Monday to Friday, 9:00am to 4:00pm

Further information

NHS UK

Website: www.nhs.uk/conditions/Vertigo/

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>