Benign paroxysmal positional vertigo (BPPV)

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BPPV tends to come and go for no apparent reason. An affected person may have attacks of vertigo for a few weeks, then a period of no symptoms for months. Some specialists recommend that patients with BPPV consult a physiotherapist or audiologist who is trained in their techniques.

**Diagnosis of BPPV**

Diagnosis of the condition is usually made based on:
- a physical examination
- answers to questions about when and where the symptoms occur
- your medical history
- damage caused by an inner ear disorder.

A health professional responsible for the management of BPPV will use a diagnostic test to look for the 'jumping' of the eye (nystagmus) in people with BPPV. This test is called the Dix-Hallpike test and can be performed in the health professional's rooms.

Diagnosis of the condition may be based on:
- the results of special balance tests.
- a physical examination
- answers to questions about when and where the symptoms occur
- your medical history
- damage caused by an inner ear disorder.

**Treatment for BPPV**

BPPV can usually be treated successfully with a range of positional manoeuvres. Surgery may be required in cases where other treatments do not work and you have had severe symptoms for a long time.

**BPPV symptoms**

- Head motion, especially sudden changes in the head, can trigger vertigo.
- You may feel as though your head is spinning or you are unsteady on your feet.
- You may feel as though your head is moving despite the fact that you are standing still.
- You may have difficulty concentrating.
- You may have difficulty seeing.
- You may have difficulty hearing.
- You may have difficulty understanding.
- You may have difficulty communicating.
- You may have difficulty walking.
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**BPPV diagnosis**

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**BPPV prevention**

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**BPPV management**

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**BPPV prognosis**

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**BPPV complications**

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**BPPV triggers**

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**BPPV causes**

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Swimmer's ear can be triggered by exposure to water or mechanical damage due to overzealous cleaning.

Tinnitus cannot be cured, but it can be managed with some lifestyle changes.

Deafness is caused by many different events including injury, disease and genetic defects.

Once hearing is damaged, it often can't be restored.

Auditory neuropathy is hearing loss caused by a disruption of nerve impulses travelling from the inner ear to the brain.

If you are unsure how to best communicate with a colleague who has a hearing impairment, ask them.

Many people with hearing loss experience a drop in self-esteem and confidence because of their impaired ability to communicate.

Lipreading can help people who are hearing impaired to cope better with their hearing loss.

Reduced sound tolerance can confine a person to their home, affect their career and social life, and make everyday activities impossible.

The earlier that hearing loss is identified in children, the better for the child's language, learning and overall development.

A ringing sensation in the ears (tinnitus), or people complaining that you talk too loudly are signs you may need to have your hearing checked.

Like any language, Auslan continues to evolve to meet the communication needs of people who are deaf.

Adenoids are constantly in the path of germs, infections are common.

People are less sensitive to smells the older they get, and women tend to have a more acute sense of smell than men.

Bleeding from the nose is common in children and is usually not severe or serious.

Nasal polyps can sometimes interfere with breathing.

If you suffer from sinusitis, it's important to see if there is any trigger which can be treated.

The Royal Victorian Eye and Ear Hospital

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Reference Information

Acoustic neuroma

In its earlier stages, an acoustic neuroma can present similar symptoms to other less serious conditions, which may delay diagnosis and treatment.

Sign language - Auslan

Like any language, Auslan continues to evolve to meet the communication needs of people who are deaf.

Ear wax

In most cases, blockage of the ear canal with wax is a harmless event.

Ears - Meniere's disease

Meniere's disease affects the ear, which is the centre of hearing and balance.

Ears - otosclerosis

Otosclerosis eventually affects both ears, but the condition doesn't cause total deafness.

Related information on other websites

Balance disorders – The Royal Victorian Eye & Ear Hospital

The Vestibular Disorders Association.

Contact Partner

Design has been produced in consultation with an enduser from the Royal Victorian Eye and Ear Hospital.