

The Efficacy of Repositioning Maneuver in the Management of Benign Paroxysmal Positional Vertigo

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Background: Benign Paroxysmal Positional Vertigo (BPPV) is a very common vestibular disorder. It is characterized by short lasting positional vertigo. Different etiology may be responsible for it. The diagnosis is based on history and on the nystagmus findings. Treatment of choice is the repositioning maneuver after Epley and/or Semont.

Objective: To assess the efficacy of the Repositioning Maneuver (RM) in the management of Benign Paroxysmal Positional Vertigo (BPPV).

Setting: ENT Clinics, Al-Khobar, Saudi Arabia.

Design: Prospective study.

Method: Fourteen patients complaining of vertigo from May 2007 to May 2009 were included in the study. All patients were seen, examined and treated by the author. After a detailed history, audiological and vestibular tests were performed. The patients either been subjected to Epley and/or the Semont maneuver.

Result: Fourteen patients aged 30-64 years (mean 49 years), 8 males and 6 females were included in the study. All were complaining of acute short lived positional vertigo. Examination of patients showed positive Dix-Hallpike test (DHT), some canal paresis, abnormal gait test and sensorineural hearing loss. Thirteen patients were free of symptoms after the maneuvers. One showed no improvement. Patients with dizziness have to be rehabilitated. Mean follow up was 3 months.

Conclusion: Epley and Semont maneuvers are very effective procedures to treat benign paroxysmal positional vertigo. In this study, eleven out of fourteen patients were relieved of their symptoms. The recommended time for follow up is 3 months and for reassessment one month.

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