

BENIGN POSITIONAL VERTIGO

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What is dizziness?

A common complaint among patients who come into the emergency department is dizziness. For a physician, it's important to figure out what is meant by the chief complaint of "I am dizzy." So the physician will try to determine exactly what you mean. There are generally four categories of dizziness:

1. Are you lightheaded? Do you feel like you might faint or pass out?
2. Do you feel like the room is spinning? (This is called vertigo in medical terms.)
3. Do you feel off-balance or are falling to one side?
4. You can't decide. You are simply dizzy.

One of the most common reasons for the vertigo type of dizziness is called benign positional vertigo. This is the problem we will focus on in this paper.

Definition of Benign Positional Vertigo (BPV)

Benign positional vertigo (BPV) has a long name but is easily explained. "Benign" means that this diagnosis is not harmful. Besides making you feel dizzy and generally bad, it won't cause long-term problems. It's not permanent and will not cause permanent damage like a stroke. It is not caused by a brain tumor. "Positional" indicates that the dizziness is made worse by position, especially of your head. Often any type of movement of your body or head aggravates the dizziness, while keeping absolutely still usually gets rid of the dizziness temporarily. "Vertigo" as mentioned above is the medical term for a specific type of dizziness where the room is spinning. This condition is characterized by sudden onset vertigo, nausea, vomiting and feeling off balance when one walks. The vertigo often stops when the patient is absolutely still, and this condition can aggravate the patient for several days, although it eventually wears off.

What is the cause of BPV?

In our middle ear lie 3 perpendicular canals on each side of our head (semicircular canals) that are filled with fluid and lined with cells to detect which way our head turns and what position it is in the air. These remarkable tools allow us to know if we are lying or standing when our eyes are closed. The sensory cells are imbedded in a mound of gelatin on top of which sit minerals that give the gelatin extra weight so it can shift and excite the sensory cells with small head movements. Unfortunately, these minerals can flake off and float into other canals and inappropriately stimulate cells in other canals causing vertigo. Sitting still will eventually stop the displaced mineral from exciting the inappropriate cells and the vertigo wears off. But if the patient moves again, the mineral,

also called an otolith, will reexcite more cells and causing more vertigo, nausea, and vomiting.

Could vertigo be associated with other more serious problems?

With benign positional vertigo it is common to expect a sudden onset of dizziness where the room is spinning. You will often also be off balance and walk or fall to one side and be very nauseated and vomiting. Sitting absolutely still will make you feel better. If, however, you have any of the following symptoms, which are NOT associated with BPV seek medical help immediately.

- Weakness on one side of the body versus the other
- Facial droop
- Headache
- Fever
- Chills
- Confusion
- Slurred speech
- Vision changes including blurry, fading or double vision
- Fainting
- Neck stiffness
- Chest Pain
- Vertigo that does not go away when you are still

What should you do if you suspect BPV?

Vertigo in itself can be a sign of stroke, so even if you fit the exact description of BPV with only vertigo and nausea that goes away when you are still, it is still best to call your doctor and be evaluated by medical professional. Have someone else drive you to your doctor's office or the emergency department. Remember you are at risk for a fall or a car accident. You should have someone walk with you and never drive when symptomatic.

How is BPV treated?

One classic sign that the your vertigo is not caused by something dangerous like a stroke is that it can easily be treated with medicine which makes the vertigo, nausea and vomiting go away. If the vertigo does not go away with medicines or does not go away when you are still, it can indicate that something more dangerous is going on. Simple medications like Valium and Antivert quickly relieve the dizziness and nausea of BPV. There are other treatments like maneuvers of your head that are meant to move the mineral into its proper canal and alleviate the vertigo and nausea.

Will I get this again?

While we can treat your episode of BPV, we can't prevent future episodes. You may have many more episodes of BPV or no more episodes. Also we can't predict when your

next episode will be. If you are diagnosed with this condition in the Emergency Department, it is important to let your regular doctor know so that he can provide you with medications if or when you have flares in the future. However, most importantly, remember your danger symptoms. If any of the above symptoms appear with your “supposed” flare of BPV, or if your BPV is not relieved by your regular medications, then seek medical attention immediately.