



"Doctor, I'm dizzy!"

Prof Margie Sharp
Contact number 8291 8577



When a patient presents with intermittent attacks of vertigo, triggered by specific head positions, the most likely explanation is BPPV, which is the most common inner disorder, comprising 50% of inner ear dysfunction in people 65 years and older.

WHAT IS BPPV?

Benign Paroxysmal Positioning Vertigo (BPPV) is a biomechanical problem in the semicircular canals of the inner ear. Crystals of calcium carbonate become dislodged, ending up in the canals causing nausea and vertigo.

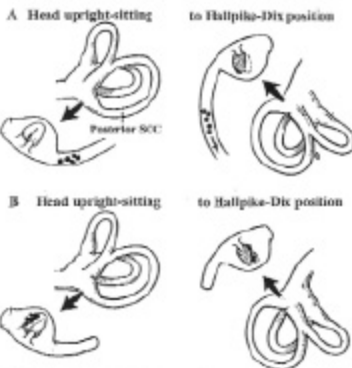


FIGURE 19-1. In canalithiasis (A), the calcium carbonate crystals are floating freely in the long arm of the canal (shown here for posterior canal). When the head is moved into the head-hanging position (Halpike-Dix), the debris moves to the most dependent portion of the canal. The movement of the debris causes the endolymph to move which in turn overcomes the inertia of the cupula and an abnormal signal is sent to the central nervous system. In cupulolithiasis (B), the debris is adhering to the cupula of the semicircular canal (shown here for posterior canal). Movement into the head-hanging position, gravity displaces the weighted cupula again resulting in an abnormal signal from that canal. (Modified from Hoffman, S, et al, 1993, with permission.)

WHAT CAN BE DONE?

Numerous clinical studies have shown that patients with BPPV must be treated when vertiginous. Dr Professor Margie Sharpe of the Dizziness and Balance Disorders Centre Pty Ltd uses state of the art infrared video Frenzel

glasses for accurate assessment and treatment of BPPV. As the only accredited vestibular physiotherapist in South Australia, Dr Margie Sharpe has been treating patients with BPPV for over a decade with an outstanding success rate

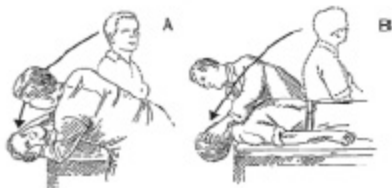


Figure 5-6. Method for inducing paroxysmal positional nystagmus (Dix-Hallpike maneuver). Patient is taken rapidly from sitting to head-hanging right (A) or head-hanging left (B) position.

approaching 100%.

A NEW INITIATIVE FOR GPs: HELPING YOU TO HELP YOUR PATIENTS - FASTER

The Centre is now offering a BPPV service to help GP's fast-track their BPPV patients to receive help when they need it most - immediately. Appointments are guaranteed within 48 hours of calling, and most patients only require two 1/2hr treatments, including a follow-up appointment.

Patients with this disorder spend literally thousands of dollars searching for help or else put up with falling, both of which result in loss of quality of life.

Our experience has been that after just two half hour sessions patients have told us their symptoms have improved to the extent of their previously healthy balance and no dizziness/vertigo.

If you have a patient who is complaining of intermittent dizziness/vertigo and imbalance, call us to advise whether it is BPPV.

Source of patient drawing: Robert W Baloh and Vincent Honrubia "Clinical Neurophysiology of the Vestibular System" 3rd Edition 2001 Oxford University press.



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Some patients may be eligible for treatment under the Enhanced Primary Care Package for up to 5 treatments per annum with GP approval and a Pension Card holder Rebate applies.