

McLaren Print System Order

Order No: 52819
 Order Date: 2020-02-25
 User: shelby brandon
 Phone: 810-342-2362

Ship Location: McLaren Flint Health Services Bldg Physical Therapy Dept Attn: Susan Hillger
 G-3239 Beecher Road
 Flint, MI 48532

Brochures
 Quantity: 200
 Paragon Dept No: 38110
 Dept Name: McLaren Flint Physical Therapy
 Company Number: 60

Order Total Price: 31.00

Item Number: M-2932
 Item Description: The McLaren Balance Center Flyer
 Revision Date: 2/2020
 Print:
 Paper:
 Size:
 Fold:
 Finish:
 Drill:
 Misc Info: Finish size: 8.5 x 11 inches; CLC; no bleed; 32 lb color copy text



The McLaren Balance Center

Benign Paroxysmal Positional Vertigo (BPPV)

BPPV is a condition which causes dizziness due to debris which has collected in a portion of the inner ear. This debris consists of calcium-carbonate crystals (otoconia) that are normally attached to hair cells located in the vestibule of the inner ear. This problem occurs when the otoconia become loose and float to a portion of the ear that they don't belong (usually the Posterior Semicircular Canal). In some cases the otoconia become loose after an accident where a person hits their head. In other cases it is thought that the hair cells can degenerate with age. In many cases there is no known cause.

What are some of the symptoms associated with BPPV?

Often people with BPPV will complain of dizziness that they describe as a spinning sensation. They feel like the room is spinning or that they are spinning. The dizziness is associated with movement of the head and people will experience dizziness when they look up, or turn-over in bed. The dizziness occurs when the calcium-carbonate crystals are moving within the semicircular canal. The dizziness lasts until the crystals stop moving (usually only a minute or less). The dizziness can be severe and even cause nausea and vomiting in some cases. Over time the symptoms get better and often go away on their own as the crystals dissolve or float back to the vestibule. However, symptoms can go on for several weeks or even months before they resolve on their own.

Loss of hearing and ringing in the ear are not usually associated with BPPV. If these symptoms are present and occur with the onset of dizziness, then other diagnoses should be considered.

Treatment Options:

Particle repositioning is the preferred course of treatment and is very effective. This can be done by a Physical or Occupational Therapist and only takes a few minutes in the office. Upon follow-up to the therapist, approximately 80% report that their symptoms of dizziness have resolved.

When the medication antiemetic (meclizine) is prescribed to decrease the dizziness. Antiemetic works by suppressing the information that goes from the inner ear to the brain. This medicine may be used in an acute stage to help with dizziness, but should not be used for long periods of time. If taken for long periods of time antiemetic can weaken the vestibular system and prolong recovery.

Karen Humphrey, BS, MPT, Certified in Vestibular Rehabilitation
 McLaren Rehab Center

