4. BENIGN PAROXYSMAL POSITIONAL VERTIGO (BPPV) EVALUATION

ABOUT BPPV
Benign Paroxysmal Positional Vertigo (BPPV) is caused by debris which has collected in the semi-circular canals of the inner ear. This debris can be thought of as “ear rocks”, or otoconia. Otoconia become displaced due to the utricle being damaged by a head injury, infection, other disorders of the inner ear, or because of degeneration due to advanced age.

DIAGNOSING BPPV
To diagnose BPPV, a maneuver called the Dix-Hallpike test is performed while you are wearing video-goggles that track your eye movements. You will first be seated on an exam table with your head turned to one side, you will be quickly moved to a lying position, with your head hanging slightly over the edge of the table. If you have BPPV, this maneuver will induce symptoms and nystagmus (eye jerks) within several seconds, confirming BPPV.

TREATING BPPV
To treat BPPV, the therapist will carefully guide your head and body through a series of rotations designed to reposition displaced otoconia from the semicircular canal to the inner part of the ear were they came from. Once your BPPV is cleared, if you are still having symptoms, we will then proceed to further testing to try and determine your problem.

PHYSICAL THERAPY TREATMENT

During your physical therapy evaluation your therapist and your physician will decide if you are appropriate for our services here at NDBC. If appropriate, you will start your treatment by developing your individualized treatment plan at your first physical therapy treatment session.

Your physical therapy treatment sessions will initially begin at 2 visits per week for the first month. After a month of treatment, you will have a re-evaluation with your therapist and re-test in the CDP to see the progress you have made. Depending on the results of the re-evaluation, your therapist and your physician may decide to cut your therapy sessions to only once a week.

Your regular attendance to these sessions is essential as they are an important part of your healing process. Each time you come to therapy, your home exercises will be adjusted based upon your individual situation and your progress. The progression of your exercises is essential for allowing your brain to compensate for your specific sensory system weakness(es), and ultimately reducing or eliminating your symptoms.

If you do not come to your therapy sessions, your therapist will not be able to progress your exercises, and you will not get the maximum benefit from starting them. Then, it will take longer for you system to adapt and feel better.

Your physical therapist will work with you to progress the exercises and activities on an individual basis. While it is highly important that you comply with your exercise program at home, in order to see progress and feel better, the one-on-one instruction you will receive in your therapy sessions plays a significant role in your overall success.
INTRODUCTION

Your healthcare provider has requested that you have a physical therapy evaluation in order to help identify factors that may be causing your dizziness or balance problem.

You will be evaluated by a physical therapist that has been specially trained and certified in treating balance disorders. All of our physical therapists are required to complete our internal certification program prior to treating any patients. This ensures that all patients receive a high continuity of care at all NDBC clinics, and all therapists are properly trained before working with any patients.

PHYSICAL THERAPY EVALUATION

Your physical therapy evaluation will last 60-75 minutes. There are no restrictions in terms of medications or caffeine use prior to your scheduled appointment.

We do ask that women DO NOT wear eyeliner or mascara, and no dresses or skirts as it interferes with the safety harness during CDP testing.

A Physical Therapy Evaluation Consists of these Procedures:

1. Medical history/symptoms evaluation
2. Functional balance evaluation
3. Computerized dynamic posturography (CDP)
4. Head positional testing & treatment for BPPV (if ordered or indicated)

Balance Sensory Inputs

The human body uses three sensory inputs to maintain balance, they are; Vestibular (inner ear system), Somatosensory (feet, ankles, joints), and Vision (eyes). During your evaluation, the physical therapist will evaluate each of your sensory inputs to see which ones may be contributing to your balance problem.

1. MEDICAL HISTORY EVALUATION

The physical therapist will take a thorough history of your symptoms and other pertinent medical history to help identify what provokes your symptoms and how often they occur.

2. FUNCTIONAL BALANCE EVALUATION

The Therapist Will Then Evaluate You In The Following Areas:

- Strength
- Flexibility
- Posture
- Coordination
- Walking quality and safety
- Sensation
- Balance (standing & walking)

3. COMPUTERIZED DYNAMIC POSTUROGRAPHY (CDP)

CDP is one of the key tests we use here at NDBC for evaluating balance disorders. CDP can objectively measure a persons three balance sensory inputs at one time, and can provide detailed results on how well each sensory input is functioning independently, and as a balance system.

You will first be tested during your initial evaluation to establish a starting point for your rehabilitation program, and then re-tested during your 30 day re-evaluation. Your therapist can then use your CDP re-test data as a progress indicator which gives your therapist immediate feedback on the overall effectiveness of your Individualized therapy program. This enables your therapist to fine tune your program to achieve the maximum benefit for you.

For a CDP evaluation, you will be asked to stand in the CDP machine without your shoes and keep your balance under various conditions. While being tested, you will be closely monitored by the therapist and you will be harnessed into the support system so there is no chance of you falling.