



The Most Authoritative Study on Record for Canalith Repositioning and Benign Paroxysmal Positional Vertigo

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Jennifer Meier, MPT, CLT
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This February, *Audiology & Neurotology* published what we believe to be the most authoritative study on record for benign paroxysmal positional vertigo (BPPV) and canalith repositioning procedures.¹ The Vestibular Disorders Association estimates that 42% of the adult population reports episodes of dizziness or vertigo to their physicians and that in 85% of those cases, vestibular dysfunction causes the patient's problems. Left unaddressed, the occasional dizziness or disequilibrium can lead to injury falls, auto accidents, work accidents, or fear of performing normal activities of daily living. Benign Paroxysmal Positional Vertigo (BPPV) has been described as the most prevalent form of vertigo, with incidence rates estimated as high as 50% in the age 70+ population.² Enfield Health & Wellness Center effectively treats BPPV with conservative positioning maneuvers and efficiently improves most types of peripheral vestibular disorders with techniques including Frenzel lens evaluations, eye-head coordination exercises, etc.



In the current study, researchers followed 965 patients with confirmed BPPV (posterior, anterior, and/or horizontal canal) for up to 74 months. Symptom duration ranged from one-day to eighteen months. **Eighty-five percent of cases resolved with one treatment, and 98% of cases resolved with two or three treatments.** Over the course of more than **six years, recurrence was only 14%**, with elderly patients and patients with head trauma leading that average. This large trial with a six-year follow-up improves the long-standing body of evidence demonstrating the efficacy of physical therapy approaches for BPPV.²⁻⁷ Enfield Health & Wellness Center uses the types of evaluations and treatments described in the current study and enjoys similar outcomes.

We recommend canalith repositioning maneuvers be performed by a suitably trained professional. In some cases, correctly performed maneuvers can make symptoms worse, and there are contraindications. Vertebral compression of the artery contraindicates some maneuvers in vestibular rehabilitation. Enfield Health & Wellness Center will pre-screen all patients with a Vertebral Artery Test. When tested positive, we will report to the referring practitioner and avoid neck hyperextension positions. We will also screen for orthopedic and neurologic conditions that may contraindicate evaluation or treatment. Complications from the BPPV repositioning maneuvers include horizontal canal migration and canalith jam. Additional repositioning maneuvers can correct both of these complications.



Certified in Vestibular Rehabilitation

Pictured Left: Melissa A. Doten, MPT, LMT, Director of Physical Therapy

Melissa Doten, MPT, LMT, Director of Physical Therapy, is certified in vestibular rehabilitation through the American Physical Therapy Association and Emory University School of Medicine. This advanced certification verifies expertise in assessment and treatment of vertigo, dizziness, spinning sensation, and other balance complaints.

Please refer your patients to Enfield Health & Wellness Center

Doctor Recommended, Patient Preferred

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