

Dix-Hallpike test – Quick guide

- See also:

<http://www.youtube.com/watch?v=Ew14aZqiUrw&feature=related>

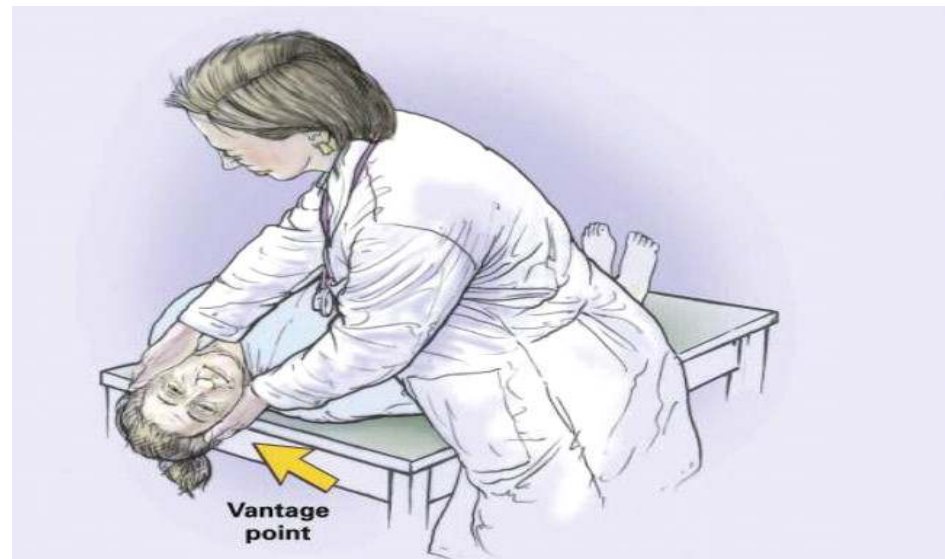
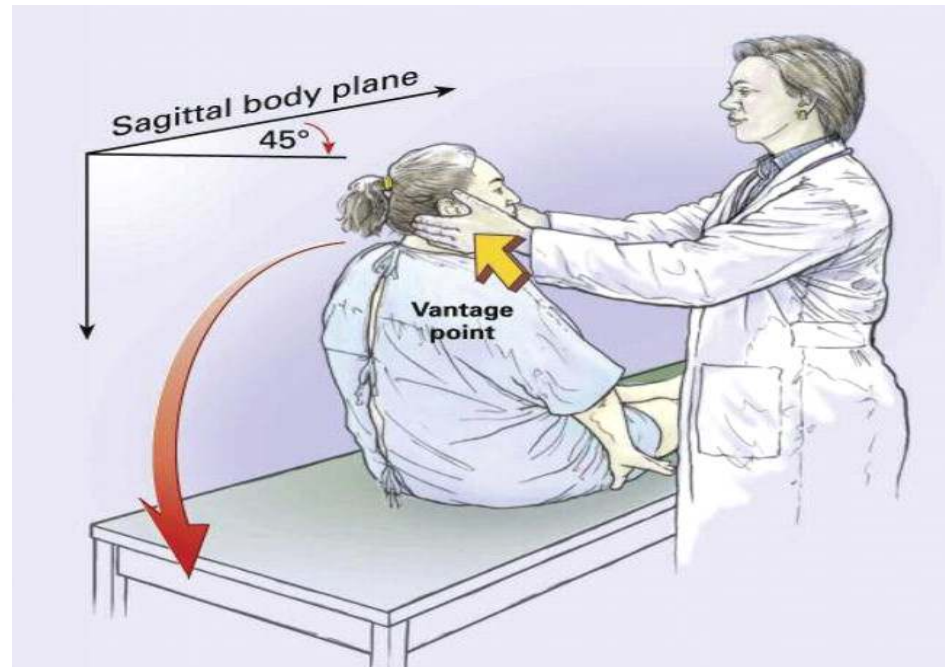
For video of Dix-Hallpike test and typical nystagmus

Dix-Hallpike test – Quick guide

- To diagnose BPN
- Explain beforehand
- Ensure no neck/back problems that would be aggravated by sudden change in posture

- **Dix Hallpike Test**

- Stand to the side of the patient
- Pt sitting with head turned to examiner
- Pt sat so that when supine, the head will be beyond the end of the couch
- Patient lain flat in one quick, smooth movement
- Eyes must stay open
- Repeat on other side



Dix-Hallpike test continued

- Positive test:
 - Rotatory (torsional) nystagmus (& vertigo):
 - Diseased ear downmost
 - 3 features of BPN:
 - Latency – delay of up to 20 seconds before onset of nystagmus
 - Fatigueability – nystagmus fades if head held in provoking position
 - Habituation – Repeating DH test produces less vigorous response

Interpretation of Dix Hallpike Test



- Consider central problem if atypical:
 - Non-rotatory nystamus
 - No latencey
 - No fatigueability
 - No habituation
- Refer for ENT assessment