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 latency
  – No fatigueability
  – No habituation

• Refer for ENT assessment