# Benign paroxysmal position vertigo after traumatic brain injury.

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Ethical review Approved WMO

**Status** Pending

**Health condition type** Inner ear and VIIIth cranial nerve disorders

**Study type** Observational non invasive

## **Summary**

## ID

**NL-OMON51263** 

#### Source

**ToetsingOnline** 

#### **Brief title**

BPPV After Trauma (BAT) study

## **Condition**

- Inner ear and VIIIth cranial nerve disorders
- Head and neck therapeutic procedures

#### **Synonym**

**Dizziness** 

## Research involving

Human

## **Sponsors and support**

**Primary sponsor:** Gelre Ziekenhuizen

**Source(s) of monetary or material Support:** Gelre wetenschapsfonds; toegekende

subsidie bedraagt ¤22.640

#### Intervention

**Keyword:** Benign paroxysmal position vertigo, BPPV, Canalith repositioning manoeuvres, Traumatic brain injury

#### **Outcome measures**

## **Primary outcome**

The primary study parameter is the frequency of t-BPPV after mild TBI.

## **Secondary outcome**

Secondary study parameters are: 1. The symptoms and characteristics of t-BPPV.

2. The treatment success of CRM treatment in terms of resolution of symptoms and the recurrence rate after one year follow up in patients with t-BPPV.

# **Study description**

## **Background summary**

Benign Paroxysmal Positional Vertigo (BPPV) is one of the most common vestibular disorders. Patients with BPPV suffer from vertigo after movements of the head, increasing the risk of falling. BPPV can be very effectively treated by a canalith repositioning manoeuvre (CRM). The majority of cases of BPPV is idiopathic. Secondary BPPV can be related to traumatic brain injury (TBI) or inner ear disorders. Dizziness affects a large proportion of head injured patients and may persist for many years after the injury. Therefore, it is important to investigate ways to facilitate early diagnosis and management of dizziness and imbalance after head injury and identify the patients suffering from traumatic-BPPV (t-BPPV). Currently there is no data on the frequency and type of BPPV in acute TBI and contradictory data about the recurrence of t-BPPV. The main aim of this study is to accurately determine the frequency of BPPV after TBI. Secondary aims are to address: (1) the symptoms and characteristics of t-BPPV. Is there a \*\*subclinical\*\* type of BPPV (without symptoms)? (2) determine the treatment success of t-BPPV and (3) determine the recurrence rate of t-BPPV. We hypothesize that the frequency of BPPV is higher after a TBI than reported in previous studies, because of underdiagnosis and absence of symptoms.

## Study objective

The primary objective is to clarify the frequency of t-BPPV in patients after mild TBI. Secondary objectives are: assessment of the symptoms of t-BPPV and the treatment success of t-BPPV.

## Study design

A prospective, single-center, observational cohort study.

#### Intervention

All patients will be tested for t-BPPV by means of Dix-Hallpike and Supine roll tests and treated if necessary with a CRM.

## Study burden and risks

If patients consent to enter the study, they will be invited to visit the ENT/Neurology department of Gelre Hospital one week after trauma. The included patients will be asked to fill in two questionnaires regarding their symptoms, the severity of vertigo and the impact of dizziness on their quality of life. Patients will be tested for BPPV by means of Dix-Hallpike and Supine roll tests. All patients with confirmed t-BPPV will be treated with a CRM. There will be an one year follow up after trauma. No other extra procedures will be performed for the study (no invasive procedures, clinical tests, laboratory tests etc.).

## **Contacts**

#### **Public**

Gelre Ziekenhuizen

Albert Schweitzerlaan 31 Apeldoorn 7334 DZ NL

#### Scientific

Gelre Ziekenhuizen

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## **Trial sites**

## **Listed location countries**

**Netherlands** 

# **Eligibility criteria**

## Age

Adults (18-64 years) Elderly (65 years and older)

## Inclusion criteria

- Older than 18 years
- Mild traumatic brain injury (with or without a CT scan)

## **Exclusion criteria**

- Patient does not speak English or Dutch
- Cervical spine ligament injury or fracture

# Study design

## **Design**

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Diagnostic

## Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-03-2021

Enrollment: 196

Type: Anticipated

## **Ethics review**

Approved WMO

Date: 25-03-2021

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

metc-ldd@lumc.nl

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

CCMO NL75988.058.20