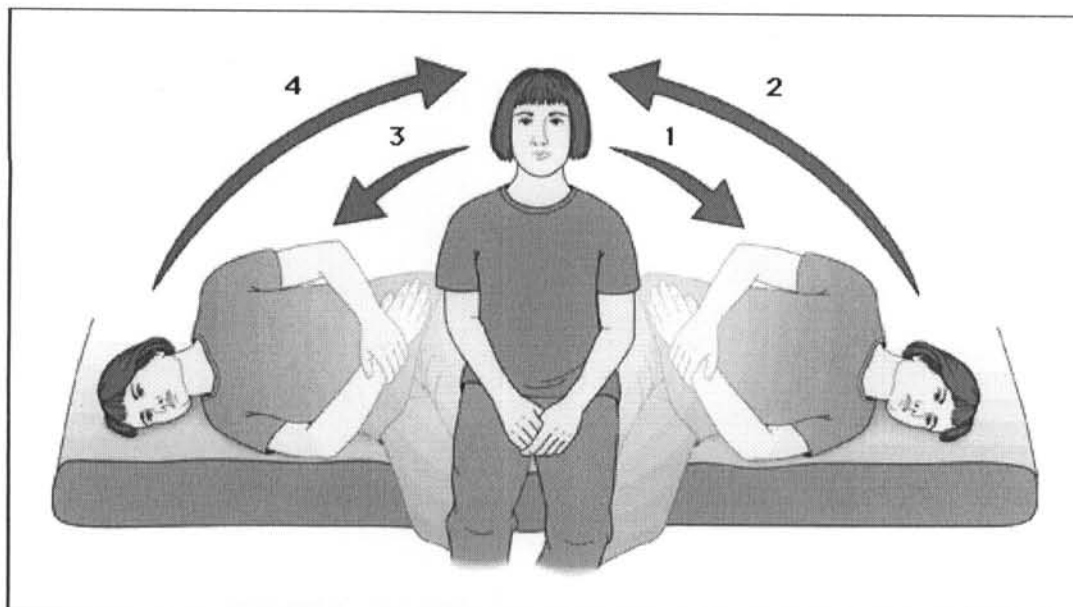


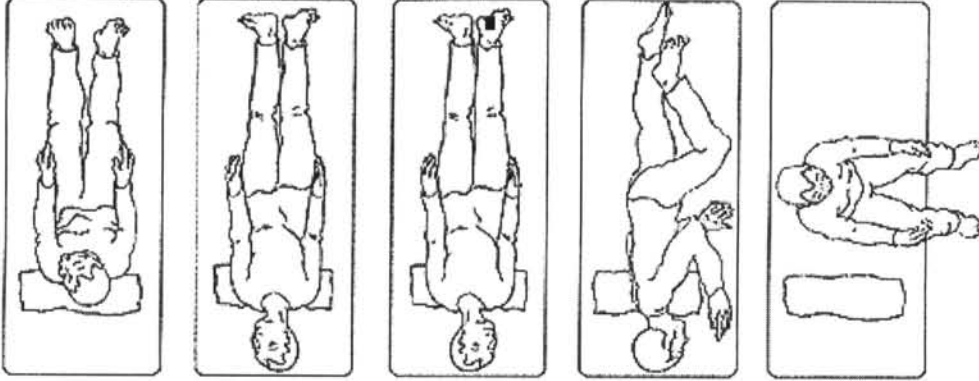
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Brandt-Daroff maneuver The Brandt-Daroff maneuver is performed in the same manner for right and left-sided posterior canalithiasis. The seated patient begins by rapidly lying on one side (1), and then waits until any provoked vertigo subsides. The patient then sits up again (2), and waits once more for vertigo to subside. The next move is to rapidly lie on the other side (3), wait for any vertigo to subside, and then sit up again (4). The sequence is repeated 10 to 20 times, up to three times a day, until the patient is asymptomatic. The symmetry of this maneuver makes it appropriate for either left or right-sided pathology, and it also makes this maneuver useful when one is uncertain as to the side of the canalithiasis. Modified from Troost BT, Patton JM. Exercise therapy for positional vertigo. *Neurology* 1992; 42:1441.

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Modified Epley's Maneuver for Self-Treatment of Benign Positional Vertigo (Left)*



Start sitting on a bed and turn your head 45 degrees to the left. Place a pillow behind you so that on lying back it will be under your shoulders.

Lie back quickly with shoulders on the pillow and head reclined onto the bed. Wait for 30 seconds.

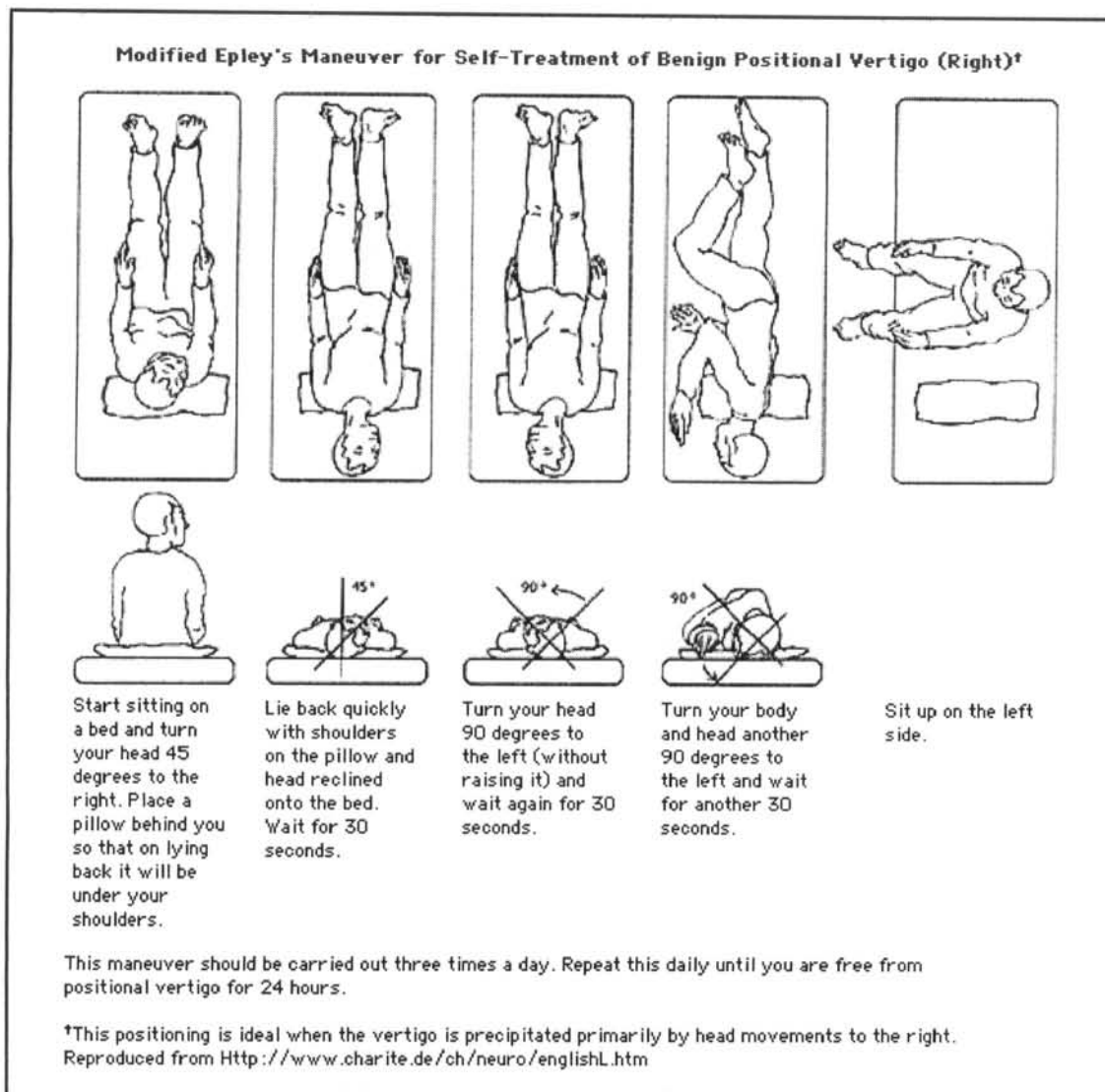
Turn your head 90 degrees to the right (without raising it) and wait again for 30 seconds.

Turn your body and head another 90 degrees to the right and wait for another 30 seconds.

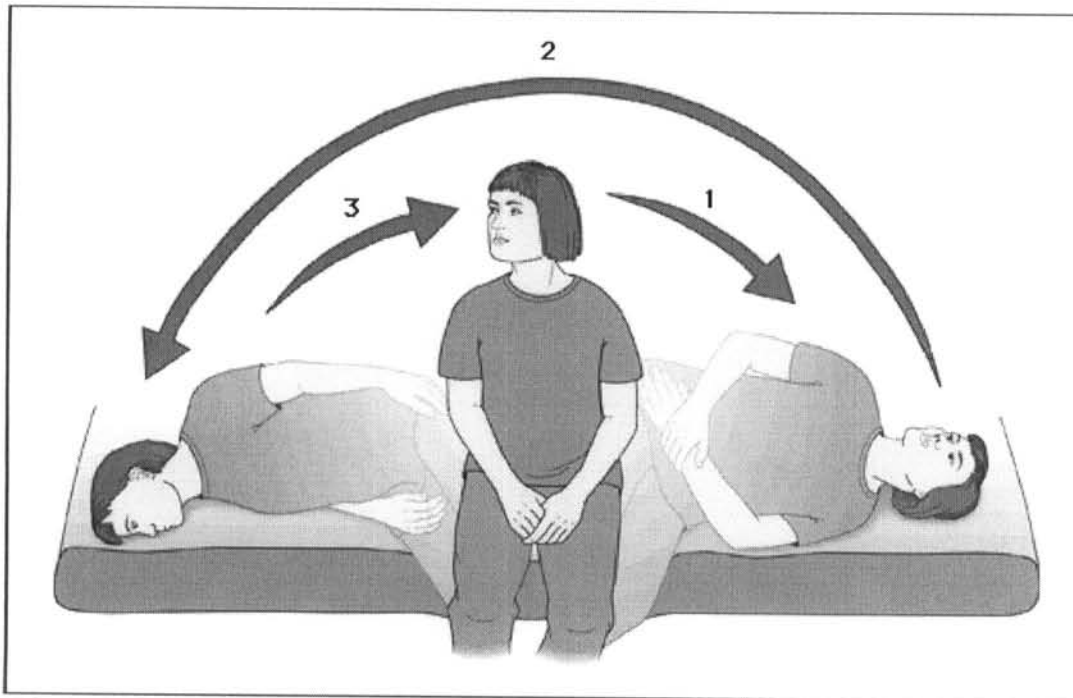
Sit up on the right side.

This maneuver should be carried out three times a day. Repeat this daily until you are free from positional vertigo for 24 hours.

*This positioning is ideal when the vertigo is precipitated primarily by head movements to the left. Reproduced from [Http://www.charite.de/ch/neuro/englishL.htm](http://www.charite.de/ch/neuro/englishL.htm)



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Modified Semont maneuver The modified Semont maneuver is illustrated for left posterior canalithiasis. The seated patient begins by turning the head 45° to the right. The patient then quickly drops the trunk to the left side (1) with the head turned 45° to the right. This position is held for at least 30 seconds or until any provoked vertigo subsides. The patient then quickly sits up and lies down on the right side without stopping in the upright position (2), all the while keeping the head turned 45° to the right so that the head now faces partly down into the bed. This position is held for 30 seconds or until vertigo subsides. Then patient returns to the upright position (3). This maneuver is repeated three times a day until the patient is asymptomatic. For right posterior canalithiasis, the maneuver must be performed in the opposite direction, starting with the head turned toward the left. Modified from Radtke, A, von Brevern, M, Tiel-Wilck, K, et al. Self-treatment of benign paroxysmal positional vertigo. *Neurology* 2004; 63:150.