Clinical Trial Protocol
Iranian Registry of Clinical Trials

22 Nov 2026

Comparative effects of Semont Liberatory Maneuver Versus Cawthorne Cooksey Exercise in posterior canal benign paroxysmal positional vertigo (BPPV)

Protocol summary

Study aim

To determine the comparative effects of semont liberatory maneuver and Cawthorne Cooksey exercises in patients with posterior semicircular canal BPPV To estimate the effectiveness of both the treatments To evaluate the improvement in patient's symptoms

Design

Pragmatic, parallel group, single blinded, randomised controlled trial

Settings and conduct

Allied Hospital Faisalabad National Hospital Faisalabad

Participants/Inclusion and exclusion criteria

Inclusion Criteria 1. Gender female 2. Willing participants 3. Age 25-45 years 4. Acute cases of BPPV 5. Participants physically capable of undergoing the Semont maneuver. 6. Positive Dix-Hallpike test 7. Absence of other vestibular disorders Exclusion Criteria 1. Patients with progressive vascular pathology 2. Patients with active vertigo complaints were excluded 3. Patients having neck fragility or neck instability 4. Patients who had some brainstem or cerebellar signs. 5. Mentally unstable patients 6. patients with cognitive and perceptual problems

Intervention groups

Intervention Group A Group A will receive Semont liberatory maneuver. Group B Group B will receive Cawthorne Cooksey Exercises. Both groups will receive intervention 3 times per week for 3 weeks. Pre readings will be calculated before the start of intervention. 1st reading post treatment will be taken after 2 weeks, 2nd reading post treatment will be taken after 3rd week.

Main outcome variables

Dizziness Visual analogue scale (VAS) Dizziness handicap inventory (DHI)

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20240315061294N1**
Registration date: **2024-05-31, 1403/03/11**
Registration timing: **retrospective**

Last update: **2024-05-31, 1403/03/11**
Update count: **0**

Registration date

2024-05-31, 1403/03/11

Registrant information

Name

Ruhma Tariq

Name of organization / entity

The university of Faisalabad

Country

Pakistan

Phone

+92 323 6617619

Email address

2022-ms-pt-017@tuf.edu.pk

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2023-12-20, 1402/09/29

Expected recruitment end date

2024-05-20, 1403/02/31

Actual recruitment start date

empty

Actual recruitment end date

empty

Trial completion date

empty

Scientific title
Comparative effects of Semont Liberatory Maneuver Versus Cawthorne Cooksey Exercise in posterior canal benign paroxysmal positional vertigo (BPPV)

Public title
Effects of Semont Liberatory Maneuver Versus Cawthorne Cooksey Exercise in posterior canal benign paroxysmal positional vertigo (BPPV)

Purpose
Health service research

Inclusion/Exclusion criteria

Inclusion criteria:
Gender female Willing participants Age 25-45 years Acute cases of BPPV Participants physically capable of undergoing the Semont maneuver Positive Dix-Hallpike test Absence of other vestibular disorders

Exclusion criteria:
Patients with progressive vascular pathology Patients with active vertigo complaints Patients having neck fragility or neck instability Patients who had some brainstem or cerebellar signs Mentally unstable patients Patients with cognitive and perceptual problems

Age
From **25 years** old to **45 years** old

Gender
Female

Phase
N/A

Groups that have been masked

- Participant

Sample size
Target sample size: **28**

Randomization (investigator's opinion)
Randomized

Randomization description
method of randomization is simple random sampling. 1- population was selected i.e. females of age 25-45 2- sample size of 28 was taken 3- two groups were made 4- each group was assigned to have 14 patients 5- We used "Drawing Lots" as a method to select and allocate population into groups. 6- we gave group A semont liberatory maneuver 7-and group B the Cawthorne cooksey exercises 8- then collected data for 3 weeks from both the groups 9- we then analyzed the data using SPSS

Blinding (investigator's opinion)
Single blinded

Blinding description
The primary aim of a single-blinded study is to reduce or eliminate the placebo effect and other forms of bias that might affect the participants' behavior or self-reported outcomes. By blinding the participants, researchers can obtain more accurate and objective data regarding the efficacy and safety of the intervention being tested. Develop a Protocol: Created a detailed study plan, including the hypothesis, inclusion/exclusion criteria, intervention details, and outcome measures. Recruit Participants: Selected a sample that meets the study criteria. Randomize Participants: Randomly assigned participants to be in any of the group. Implement Blinding: Ensured participants do not know which group they are in. This may involve using identical-looking placebos for the control group. Administer the Intervention: Provide the treatment or placebo to the respective groups according to the study protocol. Collect Data: Gathered data on the outcomes of interest while maintaining blinding. Analyze Results: Compared the outcomes between the treatment and control groups using appropriate statistical methods. Report Findings: Present the results, discussing the implications, limitations, and potential biases.

Placebo
Not used

Assignment
Parallel

Other design features

Secondary Ids

empty

Ethics committees

1

Ethics committee

Name of ethics committee
Research and Ethics Committee of the University of Faisalabad

Street address
university avenue faisal town canal road faisalabad

City
Faisalabad

Postal code
38000

Approval date
2024-01-05, 1402/10/15

Ethics committee reference number
TUF/addl Reg/SB /761

Health conditions studied

1

Description of health condition studied
Benign paroxysmal positional vertigo (BPPV) is one of the most common causes of vertigo — the sudden sensation that you're spinning or that the inside of your head is spinning. BPPV causes brief episodes of mild to intense dizziness. It is usually triggered by specific changes in your head's position.

ICD-10 code
H81.1

ICD-10 code description
Benign paroxysmal vertigo

Primary outcomes

1

Description
This study will help to improve the different aspects of patients' problems with posterior canal benign paroxysmal positional vertigo (BPPV) as this is one of the most common problems now a days. It will improve the understanding of clinicians about two major techniques of treating BPPV. It will improve the quality of life of patients and their attendants.

Timepoint
Before intervension and 1,2,3 weeks after intervention

Method of measurement
VAS for vertigo and Dizziness questionnaire

Secondary outcomes

empty

Intervention groups

1

Description
Intervention group 1: receives semont liberatory maneuver The Semont Liberatory Maneuver is a physical therapy technique used to treat Benign Paroxysmal Positional Vertigo (BPPV), particularly when it affects the posterior semicircular canal of the inner ear. Here is a summary of how to perform the maneuver The Semont Maneuver aims to move the dislodged otoliths (calcium carbonate crystals) in the inner ear back to their correct position, alleviating the vertigo symptoms associated with BPPV.Starting Position: The patient sits on an examination table with their legs hanging off the side and head turned 45 degrees toward the unaffected side.First Movement: Quickly move the patient to a lying position on their affected side (the side experiencing vertigo), with the head still turned 45 degrees. The patient’s head should now be facing upward.Maintain this position for about 30 seconds or until the vertigo stops. Second Movement: Without changing the head position, rapidly move the patient to the opposite side. The patient’s head will now be turned 45 degrees downward, lying on the unaffected side.Hold this position for about 30 seconds or until the vertigo subsides.Returning to Sitting Position:Slowly bring the patient back to a sitting position, keeping the head turned toward the unaffected side.

Category
Treatment - Other

2

Description
Intervention group 2: receives cawthorne cooksey exercise The primary goal of Cawthorne-Cooksey exercises is to facilitate vestibular compensation, which involves retraining the brain to adapt to changes in balance and spatial orientation signals caused by inner ear problems.The exercises are typically performed in progressive stages, starting with simple movements and gradually advancing to more complex tasks. Here’s a summary of the typical exercises included:Early Stage Exercises (Performed while sitting or lying down)Eye Movements:Look up and down, then left and right, keeping the head still. Gradually increase speed.Head Movements:Turn the head from side to side, then up and down, initially with eyes open and then with eyes closed.Shrugging and Circling Shoulders:Perform shoulder shrugging and shoulder circling exercises to enhance coordination and reduce neck tension.Intermediate Stage Exercises (Performed while sitting)Sitting and Standing Movements:Sit down and stand up repeatedly, first with eyes open and then with eyes closed.Throwing and Catching:Throw a small ball from hand to hand above eye level.Advanced Stage Exercises (Performed while standing and walking)Standing Balance:Stand with feet together, then progress to standing on one foot. Repeat with eyes open and then closed.Walking Exercises:Walk across the room with eyes open, then closed.Walk up and down a slope or stairs.Walk in a circle or figure-eight pattern.

Category
Treatment - Other

Recruitment centers

1

Recruitment center

Name of recruitment center
National Hospital Faisalabad and Allied hospital faisalabad

Full name of responsible person
Dr. Anbreena Rasool

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university avenue faisal town canal road faisalabad

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Sponsors / Funding sources

1

Sponsor

Name of organization / entity
the university of Faisalabad

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Grant name

Grant code / Reference number

Is the source of funding the same sponsor organization/entity?

No

Title of funding source

the university of faisalabad

Proportion provided by this source

100

Public or private sector

Private

Domestic or foreign origin

Domestic

Category of foreign source of funding

empty

Country of origin

Type of organization providing the funding

Persons

Person responsible for general inquiries

Contact

Name of organization / entity

Physthetic Clinic

Full name of responsible person

Dr. Ruhma Tariq

Position

Consultant physiotherapist

Latest degree

Specialist

Other areas of specialty/work

Physiotherapy

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Person responsible for scientific inquiries

Contact

Name of organization / entity

Physthetic Clinic Faisalabad

Full name of responsible person

Dr. Ruhma Tariq

Position

specialist

Latest degree

Specialist

Other areas of specialty/work

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Person responsible for updating data

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Full name of responsible person

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Latest degree

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Other areas of specialty/work

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Sharing plan

Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

Study Protocol

Yes - There is a plan to make this available

Statistical Analysis Plan

Yes - There is a plan to make this available

Informed Consent Form

Yes - There is a plan to make this available

Clinical Study Report

Yes - There is a plan to make this available

Analytic Code

No - There is not a plan to make this available

Data Dictionary

Yes - There is a plan to make this available

Title and more details about the data/document

comparative effects of semont liberatory maneuver and cawthorne cooksey exercises in posterior canal bppv

When the data will become available and for how long

starting 6 months after publication . and it will remain available for everyone

To whom data/document is available

this will be available for everyone

Under which criteria data/document could be used

drruhmatariq@gmail.com contact # 03236617619

From where data/document is obtainable

ruhma19@yahoo.com contact #: 03236617619

What processes are involved for a request to access data/document

for any problem contact for data/file at ruhma19@gmail.com or contact at 03236617619

Comments