

Do I need a TRV Chair? How 7 years of use has changed things at Leicester Balance Centre.

Tammy Barker, Sarah Burns, Anjum Chowdhury, Stuart Hope, Bilaal Popat, Preema Ruparelia
Leicester Balance Centre, University Hospitals of Leicester NHS Trust

Introduction

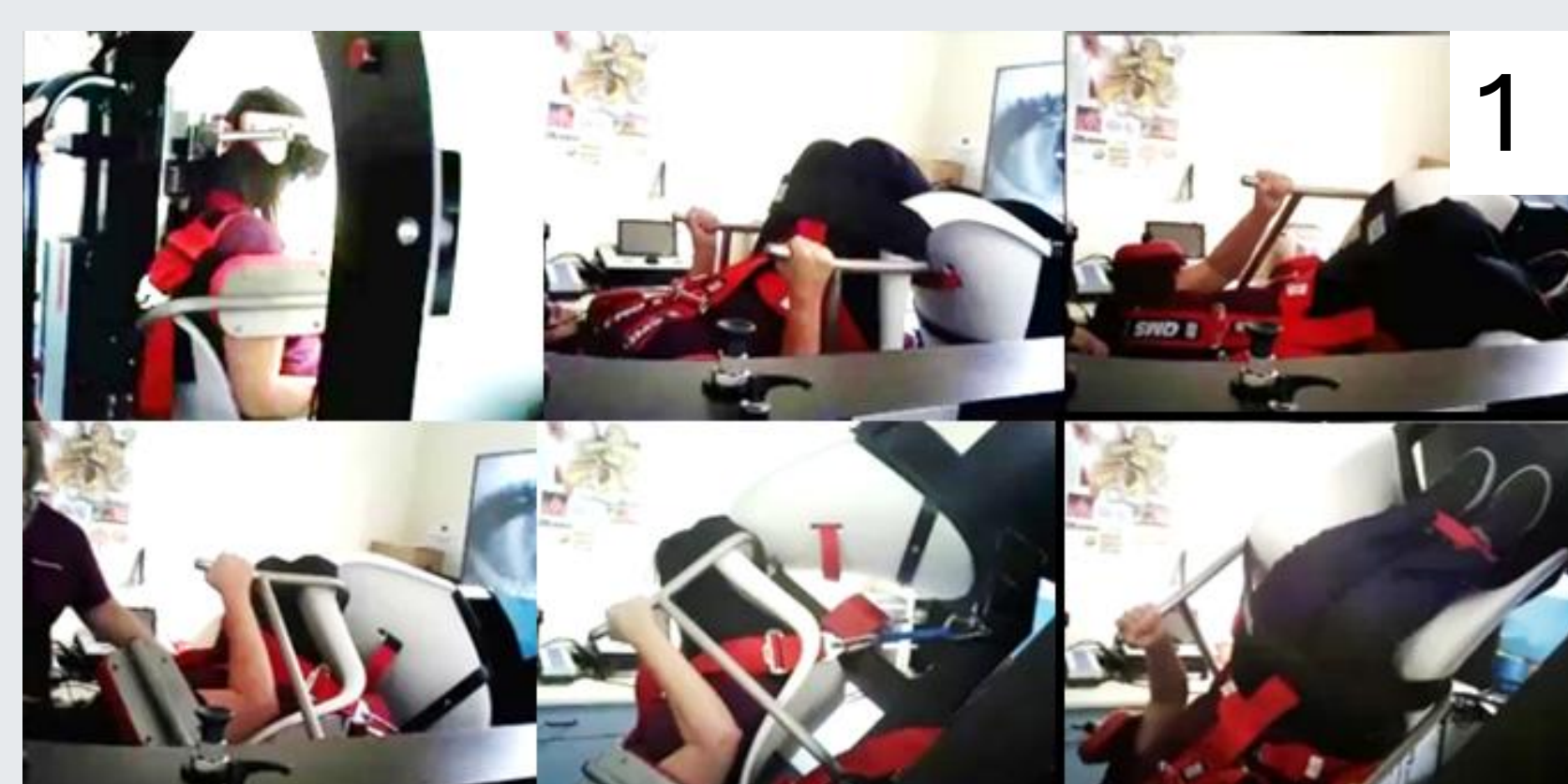
Does your service need a TRV chair?

Leicester Balance Centre has been home to the TRV Chair since 2019. Although initially acquired to address issues with accessibility and capacity, there have been a range of other changes that have followed. We think these have been for the better.

This service review considers the impact on the wider service.

Service Review

Accuracy and effectiveness: A standard test strategy is used with fixed angles (1).

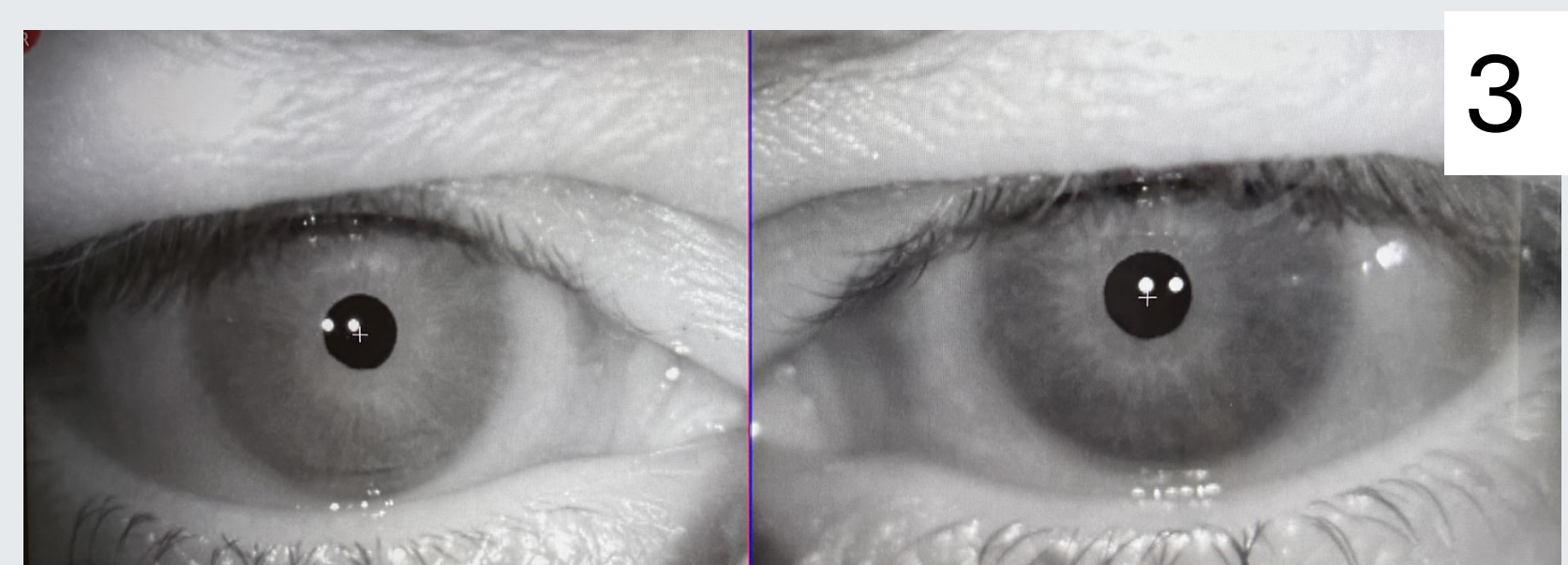


The Leicester BPPV Grid (2) guides phenotype and treatment decisions.

Test(s) nystagmus observed	Up and clockwise	Up and counter- clockwise	Down and clockwise	Down and counter- clockwise	Horizontal geotropic	Horizontal ageotropic
Left Dix-Hallpike	Left typical posterior canal (TPC)		Left anterior canal (AC)* Right atypical posterior canal (APC)	Right anterior canal (AC)* Left atypical posterior canal (APC) Responses may be bilateral Yacovino/Lorin/demi- Semont		
Treatment	Left Epley					
Right Dix-Hallpike		Right typical posterior canal (TPC)	Left anterior canal (AC)* Right atypical posterior canal (APC) Responses may be bilateral Yacovino/Lorin/demi- Semont	Right anterior canal (AC)* Left atypical posterior canal (APC)		
Treatment		Right Epley				
Roll test left side stronger					Left horizontal canal Left BBQ roll	Right horizontal canal TRV modified Gufoni
Treatment						
Roll test right side stronger					Right horizontal canal Right BBQ roll	Left horizontal canal TRV modified Gufoni
Treatment						

*Forsion may not be visible. Nystagmus may be down-beating only. AC and APC responses may be seen bilaterally. See further details about distinction.

Uses video-nystagmography (3).



Versatility:

- Patient is secured (4A,B)
- Movement through all axes (4A)
- Fixed stopping points every 45° (except caloric test position) (4C)
- Full diagnostic system including ocular motor and caloric tests

Access: The TRV Chair has enabled access to assessment and treatment for patients with mobility problems who cannot be treated on a couch.

This patient had excision and fixation of the cervical spine due to chordoma.

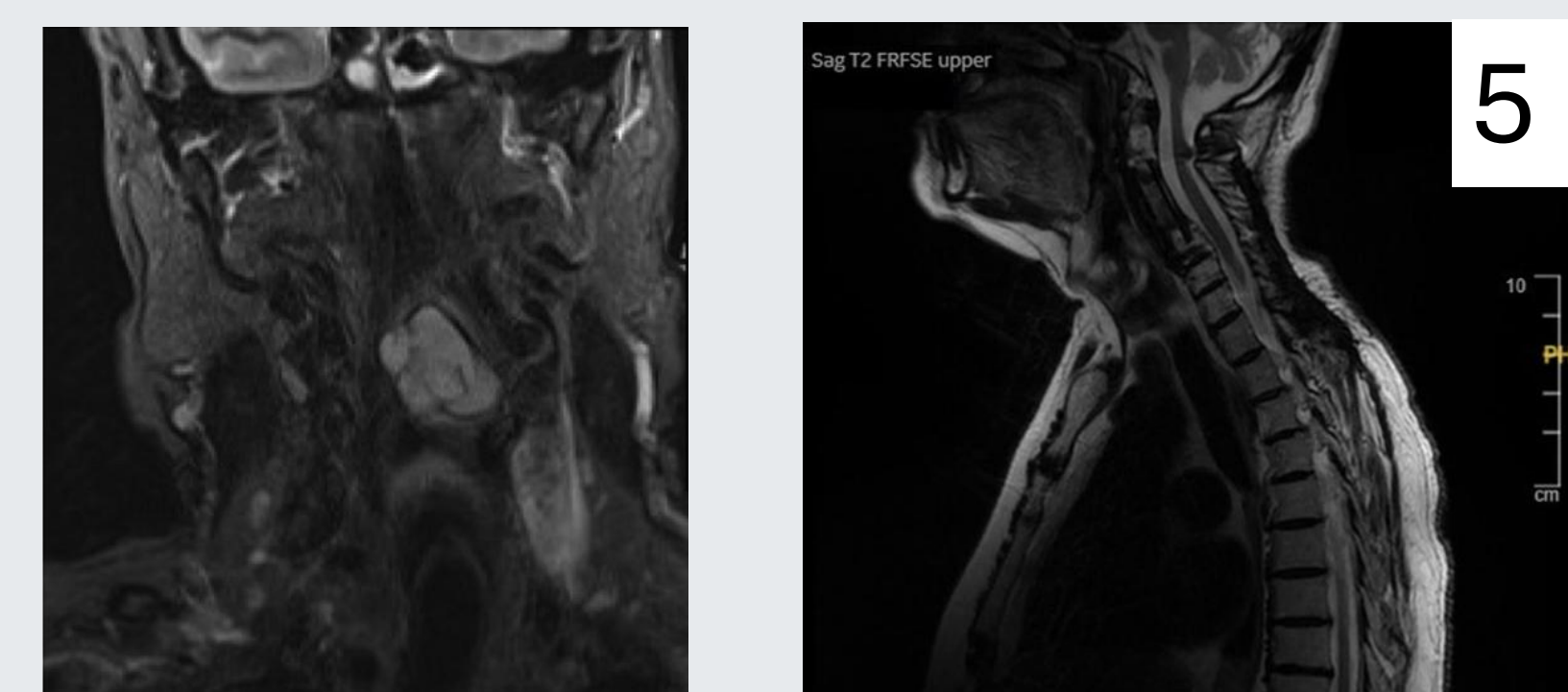


Figure 5: Chordoma pre and post excision and fixation
Villeneuve, E., Saman, Y., Barker, T., Patel, S. & Rea, P. (2026) The value of mechanical repositioning chair in managing BPPV in a patient with limited neck mobility: a case report, *Acta-Otolaryngologica Case Reports*, 11, 60-63.

Outcomes:

	Overall
TRV chair appointments in 2024	573
New	199
Follow ups	374
Discharge after 1 or 2 appointments (1 treatment)	78%
Discharge after 3 appointments (2 treatments)	87%
Recurrence rate	~ 50%

Recommendation

Current locations of TRV Chairs in the UK (📍) and where patients seen at Leicester Balance Centre have travelled from (📍) (6).



Consideration of improved regional access is suggested.