

Meniere's Disease

What is Meniere's Disease?

Meniere's disease is a disorder of the inner ear. The underlying cause is unknown, but it is thought that a build-up of fluid in the labyrinth from time to time causes the symptoms.

Many factors are probably involved in the development of the disease. It has often been put down to viral infections of the inner ear, head injury, a hereditary predisposition (15% of patients have a family history of MD), and allergy. Migraine may cause symptoms that overlap with Meniere's disease and hearing tests are therefore required to confirm a diagnosis.

What are the symptoms of Meniere's?

- Episodes of vertigo/nausea/vomiting/unsteadiness
- Tinnitus ringing in the ears, and fullness or pressure in the ear
- Fluctuating hearing loss during attacks, with a progressive hearing loss in the affected ear over time.

A Meniere's Attack:

- Can last between 2-4 hours
- Can leave people exhausted and they may need to sleep for several hours.
- Meniere's episodes may occur in clusters that is, several attacks may occur within a short period of time. However, years may pass between episodes.

How is a diagnosis made?

The diagnosis is usually based on the patient's history of typical symptoms. A hearing test showing progressive hearing loss repeated over time helps confirm the diagnosis. The diagnosis may also only become clear over time as the typical pattern of recurring attacks develops.

Simple clinic balance tests will be carried out by either an ENT Consultant or Specialist Physiotherapist.

Occasionally scans and other specific vestibular function tests may be required, but these are not done in all patients.

Did you know?

- About 1 in 2000 people develop Meniere's Disease.
- It can occur at all ages, and most frequently starts between ages of 20 and 50 years.
- To start with usually the disease affects one ear, but 15% of people will have both ears affected.
- Although an acute attack can be incapacitating, the disease itself is not fatal.
- Meniere's Disease is an over-diagnosed condition, you must have symptoms of tinnitus, fullness in the ear, hearing loss/ fluctuating hearing and vertigo or dizziness to be correctly diagnosed.

What are the treatments for Meniere's Disease?

- You will receive advice on any medication that may help.
- Recent evidence suggests that people with Meniere's Disease can benefit from steroid injections (powerful anti-inflammatory medication) placed in the ear in small doses. Trials have shown that they reduce the frequency and severity of vertigo attacks.
- Audiologists will assess and help with hearing loss and tinnitus, providing hearing aids as needed, white noise generators to help with tinnitus, and tinnitus counselling where necessary.
- Specialised Physiotherapy (vestibular rehabilitation) may be needed if there is a balance problem in between attacks. A physiotherapist will be able to advise on interventions and exercises to help restore balance between the attacks. Unfortunately, they will not be able to help reduce the attacks themselves.



- Physiotherapists can also help you manage your acute attacks and any anxiety you may have.
- Diet and life-style changes may be recommended.
- Some patients may need counselling to help with the anxiety associated with Meniere's Diesase (MD).
- Surgical treatment is only indicated in extreme circumstances.

Top Tips:

- Most people with MD cope well with their symptoms once they have a clear diagnosis and advice on self- management.
- During an acute attack, lay down on a firm surface. Most people prefer to lie down until the severe vertigo (spinning) passes, and then get up SLOWLY. After the attack subsides, you'll probably feel very tired and need to sleep for several hours.
- If you have been given medication to reduce vomiting and nausea take it immediately at onset of the symptoms or warning signs.
- Regular exercise is beneficial.
- Methods to combat stress may help ease the anxiety associated with the episodes.
- Stopping smoking if you are a smoker.

Useful websites:

nhs.uk/conditions/menieres-disease/

menieres.org.uk/information-and-support/symptoms-andconditions/menieres-disease

patient.info/health/tinnitus-leaflet/menieres-disease

Things to Consider:

As it may be difficult to predict when the next episode may occur, it may be worthwhile considering the risks of the following activities:

- Swimming
- Driving
- Climbing ladders
- Operating heavy machinery

Driving and Meniere's Disease:

If you are prone to sudden episodes of dizziness without warning signs you must inform the DVLA.

For more information about driving and dizziness please refer to the ACPIVR leaflet on 'Driving and Dizziness'.