

# Homoeopathic Management of Meniere's Disease

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**Abstract:** *Meniere's disease, also called endolymphatic hydrops, is a disorder of the inner ear where the endolymphatic system is distended with endolymph. It is characterized by vertigo, sensorineural hearing loss, tinnitus and aural fullness. Homoeopathic medicines can help to treat and manage the symptoms of Meniere's disease such as vertigo, tinnitus, ear fullness and hearing loss. Also, medicines help to stop the further progression of the disease.*

**Keywords:** Meniere's disease, Homoeopathy, Inner ear, Vertigo, Tinnitus, Hearing

## 1. Introduction

Meniere's disease is due to an abnormality of the endolymph that causes episodes of vertigo accompanied by tinnitus and fullness in the ear, each attack typically lasting a few hours. Over the years, patients may develop progressive deafness. The diagnosis is clinical, supported by abnormal audiometry.<sup>1</sup>

Meniere disease has a prevalence of approximately 200 cases per 100,000 people in the United States and in other states it is less than 0.2% of the population has a case of Meniere disease. Prevalence increases steadily with increasing age, and in especially over 60 years<sup>2</sup>.

The subtypes of Meniere's disease are Cochlear Hydrops and Vestibular hydrops. The pathologically advanced variants of Meniere's disease are Drop attacks in which sudden drop attack happens without the loss of consciousness and Lermoyez syndrome in which symptoms of Meniere's disease occur in reverse order.<sup>3</sup>

Co-morbidities that can be seen along with Meniere disease are Migraine, Autoimmune diseases like Rheumatoid arthritis (RA), Ankylosing spondylitis and Systemic lupus erythematosus (SLE). Genetic factors like autosomal recessive or dominant inheritance can be seen.<sup>2</sup>

## 2. Aetiology

The main pathology in Meniere's disease is distension of endolymphatic system due to increased volume of endolymph. This can result either from increased production of endolymph or its faulty absorption or both. The exact cause of Meniere's disease is not yet known. Various theories have been postulated such as allergies, sodium and water retention and autoimmune disorders.<sup>3</sup>

## 3. Diagnostic Criteria

Patients with a definite Meniere disease, according to the Barany Society, have:

- Two or more spontaneous episodes of vertigo with each lasting 20 minutes to 12 hours
- Audiometrically documented low - to medium - frequency sensorineural hearing loss in one ear, defining and locating to the affected ear on in at least one instance prior, during, or after one of the episodes of vertigo
- Fluctuating aural symptoms (fullness, hearing, tinnitus) located in the affected ear
- Not better accounted for by any other vestibular diagnosis

Probable Meniere disease can include the following clinical findings:

- Two or more episodes of dizziness or vertigo, each lasting 20 minutes to 24 hours
- Fluctuating aural symptoms (fullness, hearing, or tinnitus) in the affected ear
- The condition is better explained by another vestibular diagnosis<sup>4</sup>.

## 4. Treatment and Management

Reassuring a patient particularly in an acute attack is important. Cessation of smoking, low salt diet, avoiding excessive intake of water, avoiding of over-indulgence in coffee, tea and alcohol, avoiding excessive stress and bringing a lifestyle change can help in the management of Meniere's disease.<sup>3</sup>

Conventional treatment options include Symptom relief with antiemetics, antihistamines, or benzodiazepines, Diuretics and low-salt diet, rarely vestibular ablation by drugs or surgery, Intratympanic gentamicin. Surgical intervention like Endolymphatic sac decompression, Vestibular neurectomy and labyrinthectomy.<sup>2</sup>

## 5. Complications

The most challenging complications of Meniere's disease are:

- Unexpected spells of vertigo.
- Possibly permanent hearing loss.
- An individual who is affected can become unbalanced as a result of vertigo. They may experience more slips, trips, and falls as a result<sup>5</sup>.
- Prevalence of anxiety and depression is higher in Meniere's disease patients<sup>4</sup>.

## 6. Homoeopathic Management

Homoeopathic medicines can help to treat and manage the symptoms of Meniere's disease and medicines help to stop the further progression of the disease.

### BELLADONA

Vertigo, with falling to left side or backwards. Tearing pain in middle and external ear. Humming noises. Autophony - hearing one's voice in ear<sup>6</sup>.

### CHENOPODIUM

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Sudden vertigo. Hearing better for high - pitched sounds. Comparative deafness to sound of voice, but great sensitiveness to sound, as of passing vehicles and also a shrinking from low tones. Buzzing in ears<sup>6</sup>.

#### CHININUM - SULPH

Vertigo is almost often accompanied by an extraordinary ringing or roaring feeling in the ears. People with postural vertigo and ear heaviness are typically those in whom Chininum sulph is suggested. The start of vertigo may be extremely abrupt, and in severe situations, the person may lose their balance and fall. When there is a significant degree of hearing loss (particularly that affects the left ear)<sup>5</sup>.

#### CONIUM

Vertigo, as if he were turning in a circle, when rising from his seat followed by a complete loss of muscular power throughout the body, any movement in bed makes the vertigo worse<sup>7</sup>.

#### DUBOISIN

Vertigo on rising up or on walking; great tendency to fall backward, especially on ascending stairs; sudden ringing in ears, particularly the right one; unsteady gait; intense vertigo which does not cause nausea<sup>7</sup>.

#### GELSEMIUM

Dizziness, drowsiness, dullness, and trembling. Vertigo, spreading from occiput. Difficulty in walking with a loss of balance may arise from dizziness<sup>6</sup>.

#### KALI - MUR

Snapping and crackling noises in the ear. Head congestion and vertigo. Sensation of fullness and plug in the ear<sup>5</sup>.

#### NATRUM SALICYLICUM

Produces marked effects upon the internal ear, with vertigo, deafness, noises in ears and loss of bone conduction, hence, its use in Meniere's disease. Vertigo; worse, raising head. Tinnitus of a low tone. Deafness<sup>6</sup>.

#### SALICYLIC - ACID

Vertigo, which comes and goes, often from no observable reason; tendency to fall to the affected side, while objects seem to fall away to the opposite side; headache frequent, but not always present, noises in the ear; defective of absent perosseous hearing; indeterminate giddiness in the horizontal position, but considerable when raising the head or sitting up<sup>7</sup>.

#### THERIDION

Rushing noise in ears, like that of a waterfall, with impairment of hearing; every seems to reverberate through whole body, particularly through teeth; auditory vertigo, aggravated by noise, motion, talking by closing eyelids<sup>7</sup>.

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