



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

Meniere's disease

Ménière's Disease

Patient Information

ENT Department

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What is Ménière's disease?

Ménière's disease (MD) is a disorder of the inner ear which causes:

- Episodes of dizziness, vertigo, spinning
- Tinnitus - ringing in the ears
- Fullness or pressure in the ear
- Hearing loss.

MD can affect one or both ears.

MD is not serious, although some people may experience unexplained sudden falls (also known as drop attacks); this occurs in a very small number of patients.

Ménière's episodes may occur in clusters - that is, several attacks may occur within a short period of time - however, years may pass between episodes.

MD can occur at any age and most usually starts between the ages of 20 and 50 years.

What is the cause and is there a cure?

Many factors may be involved in the development of the disease; however, the underlying cause is unknown. A build-up of fluid in the labyrinth (inner ear) is thought to cause

symptoms.

MD has often been put down to viral infections of the inner ear, head injury, family history and allergy.

At the present time, there is no cure for MD, although there are ways to manage the condition to help control your symptoms.

How is the diagnosis made?

The diagnosis may only become clear as the typical pattern of frequent attacks and symptoms develops over time.

Other conditions can cause similar symptoms to Ménière's and these will be excluded by the Ear Nose and Throat team (ENT), such as injury, infection, or tumours in the inner ear.

Migraine is also commonly seen in MD patients and can mimic many of the same symptoms.

What tests will I have?

- A hearing test, which may be repeated over time.
- A simple clinic balance test.
- Occasionally scans and other specific tests.

How do I manage a severe attack?

- Lie down on a firm surface and stay as still as possible with your eyes open and fixed on a stationary object.
- Stay in this position until the severe vertigo (spinning) passes and then get up slowly.
- If you have been given medication to reduce vomiting and nausea, you should take it immediately that you are aware of the attack.

You will probably feel very tired and need to sleep for several hours after the attack subsides.

What can be done to treat MD?

- Medication can be used to help with severe vertigo and vomiting during attacks and also to reduce the frequency and severity of attacks.
- White noise generators that produce a continuous "shushing" sound may be useful in the treatment of tinnitus, together with retraining and counselling.
- Hearing aids can help with hearing loss.

Diet and lifestyle changes

The following changes to your diet and lifestyle may help you:

- A low-salt diet; over time, salt restriction results in decreased fluid accumulation in the inner ear, reducing excess pressure on the nerve endings of balance and hearing
- Regular exercise and methods to help prevent stress

- Stop smoking
- Cutting out caffeine (found in tea, coffee, cola, and chocolate)
- Cutting out alcohol.

Medical management of MD

The ENT team will work together to make a specific diagnosis of MD and suggest any medication that may help.

Specialised physiotherapy (vestibular rehabilitation) may be required if there is a balance problem in between attacks.

Audiologists will assess and help with hearing loss and tinnitus.

Once people with MD have a clear diagnosis and have the advice and self-management techniques they generally manage their condition very well.

Surgical treatment

Surgery is rarely carried out and is generally only undertaken when only one ear is affected and the patient's quality of life is very limited.

Contact information

If you require further advice or information please contact us on:

Telephone:

Further information

For information about vertigo, tinnitus and deafness contact:

The Ménière's Society

The Rookery

Surrey Hills Business Park

Wotton

Surrey

RH5 6QT

www.menieres.org.uk

You may find the following websites useful for advice on living with balance problems:

www.dizziness-and-balance.com

www.vestibular.org



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