

Treating Ménière's Disease: Surgery



Ménière's disease is a disorder of the inner ear that causes severe dizziness (vertigo), ringing in the ears, and hearing loss. Treatment often involves medicines, rehabilitation therapy, and dietary and lifestyle changes. If severe Ménière's disease doesn't respond to these treatments, your healthcare provider may advise surgery. If surgery is the best option for you, your provider will tell you more about it. This includes how to get ready and what to expect during and after the procedure.

Surgical procedures

These are procedures that might be done. Your healthcare provider can discuss these and other options with you.

- **Endolymphatic sac decompression or shunt.** Pressure on a structure in the inner ear called the endolymphatic sac is thought to play a role in Ménière's disease. During surgery, a small amount of bone is removed from around the sac. Tubing may be placed in the sac. This may help ease pressure and reduce symptoms.
- **Vestibular neurectomy.** The nerve from the balance portion of the ear is cut. This prevents the brain from receiving signals that trigger a vertigo attack. This affects the ability of that ear to regulate balance. But in a short time, the brain adjusts to using just one ear for balance. You often have physical therapy to help the brain compensate.
- **Labyrinthectomy.** The entire balance canal is removed from the affected ear. The ear can no longer regulate balance. The brain can usually adjust to one ear regulating balance. So balance can return to normal. But all hearing in that ear will be lost. So this procedure is most often done only in people with little or no hearing in the affected ear.

Risks and possible complications of surgery for Ménière's disease

All surgery has risks. The risks of inner ear surgery include:

- Hearing loss
- Balance problems may get worse
- Facial droop
- Spinal fluid leak

Your healthcare provider can discuss risks and benefits of surgery with you in more detail.

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