

Mb Meniére

Care program

Meniere sjukdom

Vårdprogram

Hearing & Balance Clinic University Hospital of Karolinska

Hörsel- och Balanskliniken Karolinska Universitetssjukhuset



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I want to thank Thomas Mellgren and all colleagues at Hearing & Balance Clinic contributions in discussion and suggestions for the care program contents. Efforts care program has been made possible with the help of Stingerfonden. Layout and editing C. Ahnborg

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Unit for Hearing rehabilitation Adults

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Hearing & Balance Clinic's website www.karolinska.se/horsel

	DEFINITIVE MENIERE'S DISEASE			EVALUATION	
DIAGNOSIS	Two or more definitive spontaneous episodes of vertigo 20 minutes or longer Audiometrically documented hearing loss on at least one occasion Tinnitus or aural fullness in the treated ear Other causes excluded			Dizziness assessment, neurotological status with eye movement analysis videostagmoscopy	
				Hearing evaluation, pure tone and speech audiometry and Auditory Brain Stem response (ABR)	
	MEASURES			RECOMMENDATION	
TREATMENT - DIZZINESS	Acute			Dizziness symptoms are treated acutely with prescription of drugs as needed.	
	Prophylactic	Esidrex, Salures Centyl K Hygroton	Betaserc/Vasmotal	Long term treatment Effect of treatment evaluated after three months. The treatment should end six months after latest dizziness attack. Diuretics can be combined with Betaserc.	
	Surgical drainage	Sacculotomy	Patient remitted to	ear surgeon	
	Intratympanic	Gentamycin (30 mg/ml)	Clinic's own protoco	l for treatment and followup	
	Operative	Nerve section	Labyrinthectomy	In case of no response to gentamycin treatment	
	Alternative treatments	Antisecretory Factor, SPC- Flakes, Salovum	Intratympanal drainage (TMD) Meniett	Treatment can be started at any phase of the disease	
	Other treatments	Physiotherapist balance/c	compensation training - Psychiatrist		
REHAB	Group habilitation	Medicinal, technical, psychosocial and psychological information and discussion about communication. Possibily given for discussion and reflection.			
	Individual contact with	Audiologist (hearing aids)	Paedagogue	Social worker	Psychologist
OTHER TESTS	For evaluation of the function of the labyrinth: caloric test, Vestibular Evoked Myogenic Potential (VEMP), Visual Subjective Horizontal (VSH). No pathology in the tests is specifically related to Meniere's disease				

 $\it Malted\ oats$ - $\it SPC-Flakes$. Daily intake 1 g/kg body weight. It is a prophylactic treatment for patients with few dizziness attacks. (T Tomanovics experience)

Egg powder - Salovum can also have a good effect. The effect can be seen already from 1-2 sachets/day (T Tomanovics experience). Can be combined with vestibulosuppressing medicines, e.g. Meclozine or metoclopramide during acute attacks.