

Clinical Digest

ONLINE EDITION

OTOLARYNGOLOGY

Ménière's Disease and the Elderly

The elderly have a greater risk of both new and reactivated Ménière's disease (MD). And the sudden, recurrent vertigo of MD can be an added danger for those patients already at risk for falls.

In a study of 103 patients with MD (73 patients aged < 65 years and 30 patients aged > 65 years), researchers found that MD was more aggressive in the group of older patients. Compared with the younger patients, older patients also had a higher rate of vertigo spells and a faster evolution toward a "flat" audiometric threshold, with higher values of hearing loss on the af-

fected side. The researchers, from the San Raffaele University, Milan, Italy, note that no other data, as far as they know, have been published on that faster evolution of MD.

Moreover, the elderly patients had 3 times more Tumarkin attacks (11 [~36%] vs 7 [10%] in the younger patients). Tumarkin attacks (or "drop attacks") are an unnerving, even frightening, inner feeling of tilting or falling. The patient, in trying to maintain balance, may fall uncontrollably, without warning. The researchers say the episodes may be linked to a lower compliance of otolithic structures to hydrops in de novo patients. Or it may be linked to brief periods of ischemia or vasospasm of the anterior vestibular artery.

Many theories have proposed

a pathophysiology of MD, including autoimmune disease, but 1 link that seems to be definite is migraine: Roughly half of MD patients have migraines, much higher than the estimated 10% in the general population. Still, the etiology of MD is a "puzzling dilemma," the researchers say, but they note some clinical differences in older patients. For instance, they found a lower rate of positivity for autoantibodies, lifetime history of migraine, and familiar history of recurrent vertigo. These findings, they suggest, plus the presence of a higher rate of microischemic lesions, may point to a mechanism related to vascular disorder.

Source: Teggi R, Meli A, Trimarchi M, LiraLuce F, Bussi M. *J Aging Res.* 2012. doi:10.1155/2012/421596.