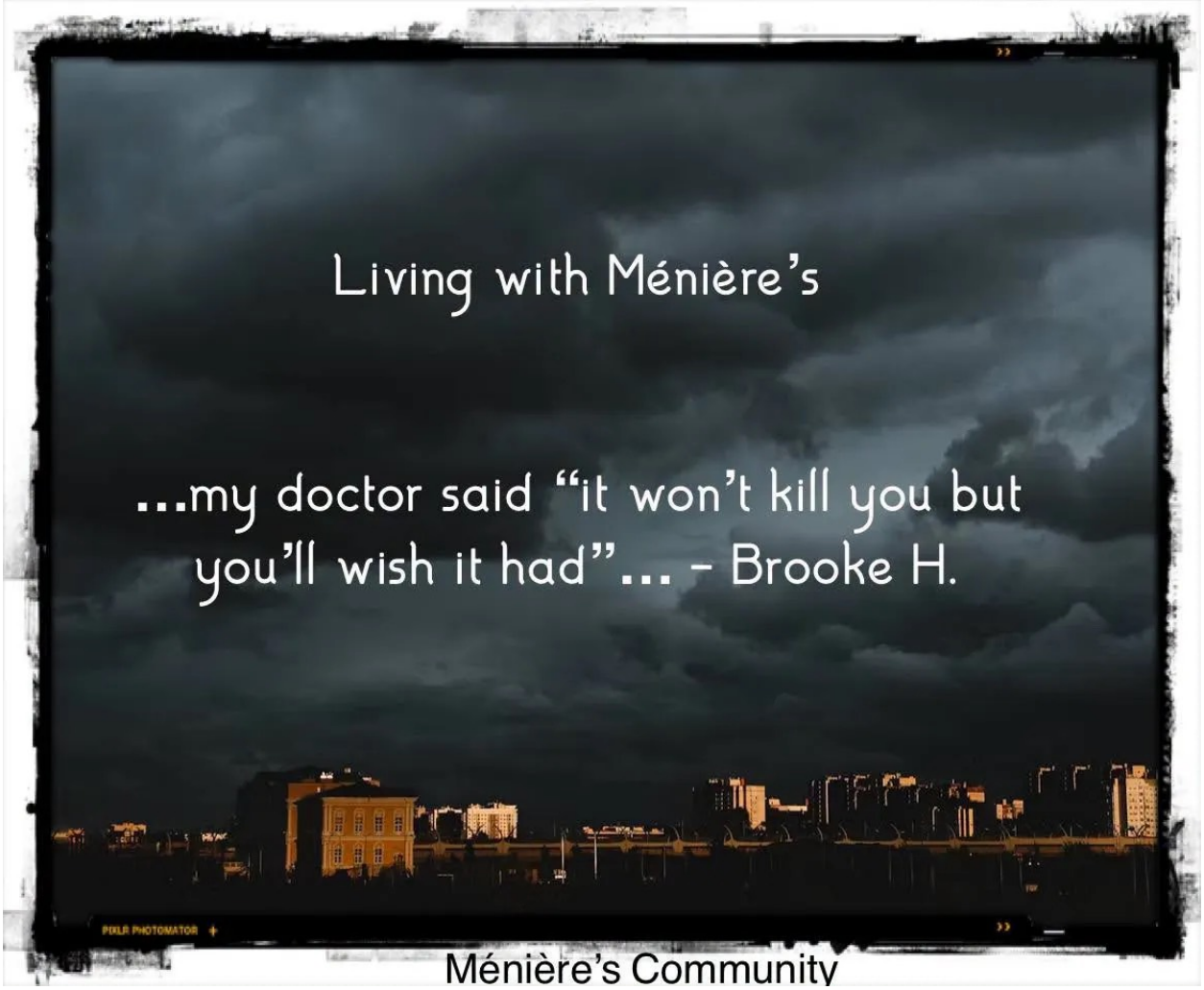


Part 20

How Ménière’s Affects People by Age

By

Mark McGee



Ménière's Community

I've heard or read the same comment from several medical specialists who understand the impact Ménière's has on people's lives. 'It won't kill you, but you'll wish it had.' Another one I've heard from doctors is that Ménière's is the worst disease they know of that doesn't kill you. Ménière's is tough, but don't lose hope — don't give up — keep fighting.

I write from personal experience. I've been dealing with some aspect of this disease for 20 years and there have been days when I felt like Ménière's had finally beaten me. Years and years of fighting a chronic disease like Ménière's takes a toll on your body, mind, and emotions. So, when I say 'don't lose hope, don't give up, keep fighting,' I share that knowing there will be times YOU JUST WANT IT TO STOP.

Age and Your Future with Ménière's

So, let's learn about how your age at diagnosis might affect your future. There are differences between being diagnosed with Ménière's at a young age and at an older age.

I will share links to the medical sites I used in researching the 'age' issue at the end of this newsletter. Some of them include:

- The National Institute on Deafness and Other Communication Disorders
- The National Library of Medicine
- The Cleveland Clinic
- The Mayo Clinic
- Johns Hopkins Medicine
- The American Academy of Otolaryngology–Head and Neck Surgery (AAO-HNS)
- The Hearing Health Foundation
- The American Hearing Research Foundation

So, let's begin at the beginning.

Early Onset Ménière’s



“Classical Ménière's disease is rarely found in children and literature regarding it is scarce. In general, the frequency of Ménière's disease in children is only 0.4-7.0 per cent of that in adults ... In conclusion, Ménière's disease in children rarely develops and may have characteristics of high tone loss in initial audiograms.” NIH

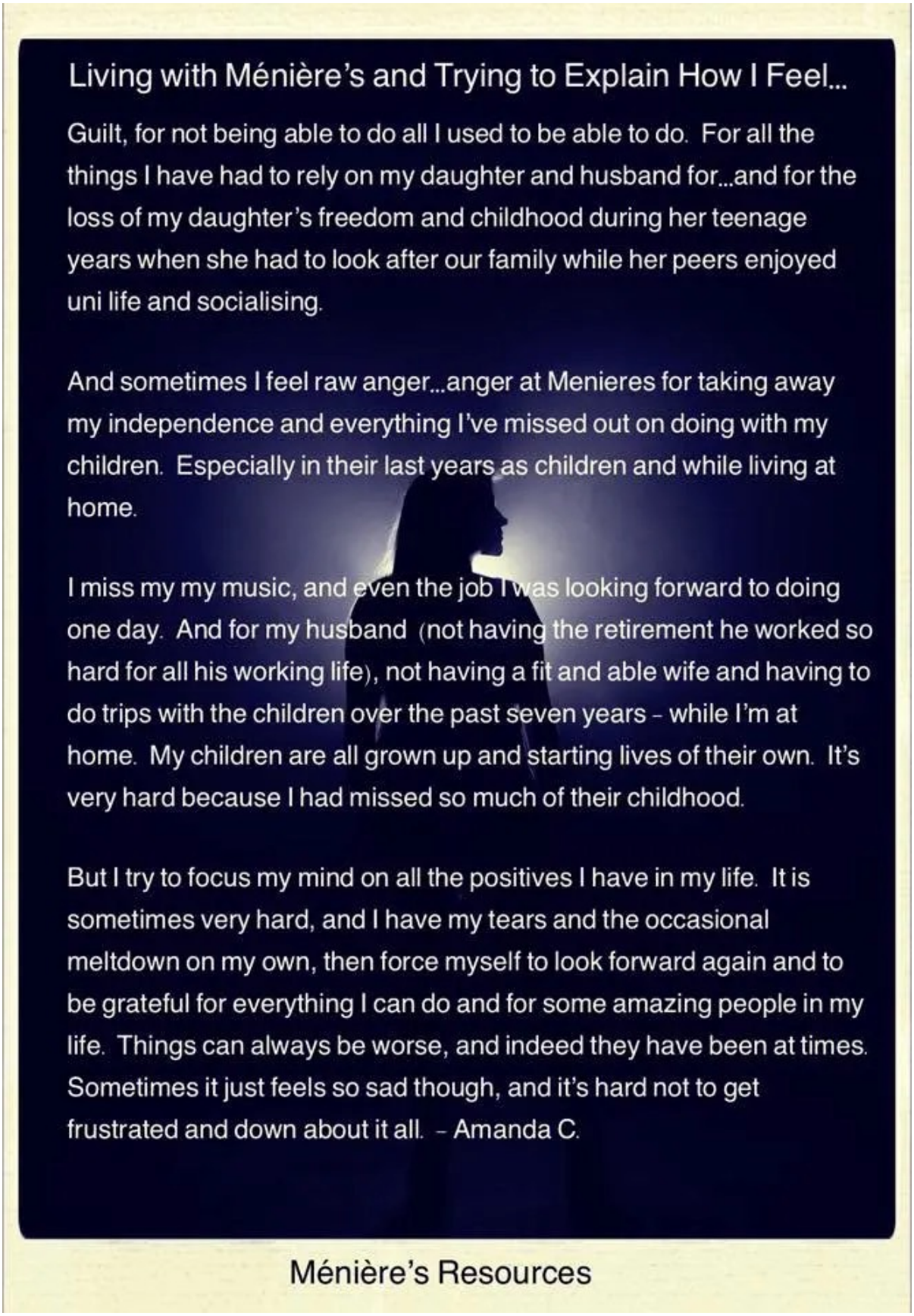
Childhood Ménière's is rare, but it can be a challenge for parents and teachers as well as the child.

I have known young adults who have either experienced 'symptoms' similar to Ménière's (e.g. tinnitus, dizziness, fatigue) or were actually diagnosed with the disease. One young person I know was seriously concerned about whether he should marry and have children. He was distraught about what decades of life with Ménière's would be like for him and his family.

Some clinicians refer to this as 'early onset' Ménière's (before the age of 45). They say younger adults can have a 'greater psychosocial burden' and often report a higher incidence of tinnitus and vertigo — often triggered by fatigue. Many doctors believe their symptoms are impacted more by the psychological stress, so they recommend younger patients get more rest to achieve a type of 'remission.' Younger patients often experience more depression, anxiety, and fatigue than older patients.

> "Early-onset patients have a higher incidence of tinnitus and are more prone to experience vertigo bouts brought on by fatigue." National Library of Medicine

I feel a deep compassion for younger people who have Ménière's — especially those who are married and raising children. Many share their struggles in Ménière's forums. Some have had to quit their jobs because of the illness. Many have problems doing what would seem easy tasks to people without Ménière's, including raising their children. It's tough, but I encourage them to not give up — do the best you can and keep going.


Living with Ménière's and Trying to Explain How I Feel...
Guilt, for not being able to do all I used to be able to do. For all the things I have had to rely on my daughter and husband for...and for the loss of my daughter's freedom and childhood during her teenage years when she had to look after our family while her peers enjoyed uni life and socialising.
And sometimes I feel raw anger...anger at Menieres for taking away my independence and everything I've missed out on doing with my children. Especially in their last years as children and while living at home.
I miss my my music, and even the job I was looking forward to doing one day. And for my husband (not having the retirement he worked so hard for all his working life), not having a fit and able wife and having to do trips with the children over the past seven years - while I'm at home. My children are all grown up and starting lives of their own. It's very hard because I had missed so much of their childhood.
But I try to focus my mind on all the positives I have in my life. It is sometimes very hard, and I have my tears and the occasional meltdown on my own, then force myself to look forward again and to be grateful for everything I can do and for some amazing people in my life. Things can always be worse, and indeed they have been at times. Sometimes it just feels so sad though, and it's hard not to get frustrated and down about it all. - Amanda C.
Ménière's Resources

If you or someone you know is concerned about this, here's some information that may help:

> "Ménière disease is rare in pediatric populations, with fewer than 3% of cases occurring before age 18 years. Then increases with age, rising from 61 per 100,000 among individuals aged 18 to 34 years to 440 per 100,000 among those aged 65 years or older. The mean age at diagnosis ranges from approximately 49 to 60 years." National Library of Medicine

> "The incidence of Ménière's disease is estimated to be about 1-2 people per 1000, although this figure depends upon a number of factors, such as the diagnostic criteria used to define the disease. MD is most commonly diagnosed in people aged between 40-60 years of age, although individuals from 20 onwards may be affected. It is rarely, though occasionally reported in children. Males and females appear to show a similar incidence of Ménière's." Brain Foundation

Later Onset Ménière's

The peak onset of Ménière's disease is between the ages of 40 and 60. That fits for most of the people I know who have an MD diagnosis (including myself). Medical experts agree to some degree about what middle-aged adults can expect. They often experience the highest prevalence with symptoms starting in one ear and potentially spreading to the other ear:

> "A total of 11 studies met the inclusion criteria. For overall conversion risk, meta-analysis of the 9 relevant studies (n = 1583) yielded a risk of 13% (95% CI, 12–15%). Mean time to conversion was 8.2 years (95% CI, 5.9–10.6; I^2 = 46%), and a combined Kaplan-Meier analysis revealed a prolonged distribution of conversions including 10% that converted 20 years or later after initial diagnosis. Risk factors and audiometric data were sparsely reported, but there may be a correlation between conversion risk and first-sided ear surgery (protective), history of tympanic membrane perforation, and baseline hearing loss in the unaffected ear.

> There is a significant risk of conversion from unilateral to bilateral MD that must be taken into account when considering ablative treatment options, even late into its course. Further work will be required to better characterize risk/protective factors and audiometric trends." National Library of Medicine

Late onset of the disease occurs after the age of 55. I'm in that group.

> "In late-onset patients, vestibular endolymphatic hydrops are more severe, and the vertigo symptoms are more pronounced. Psychological factors are more closely related to the symptoms of vertigo in early-onset patients." National Library of Medicine

Elderly onset of the disease occurs after the age of 65. My mother and grandmother were in that group.

> "As a final consideration, MD in elderly patients may produce more disrupting results, since most of them present decreased postural and gait control due to a physiological reduction of the motor and sensorial

system. Functional balance in elderly subjects with chronic vestibular disorders is worsened when associated with aging, concurrent disorders, use of multiple medications, central vestibular syndromes, mobility, and gait impairments." National Library of Medicine

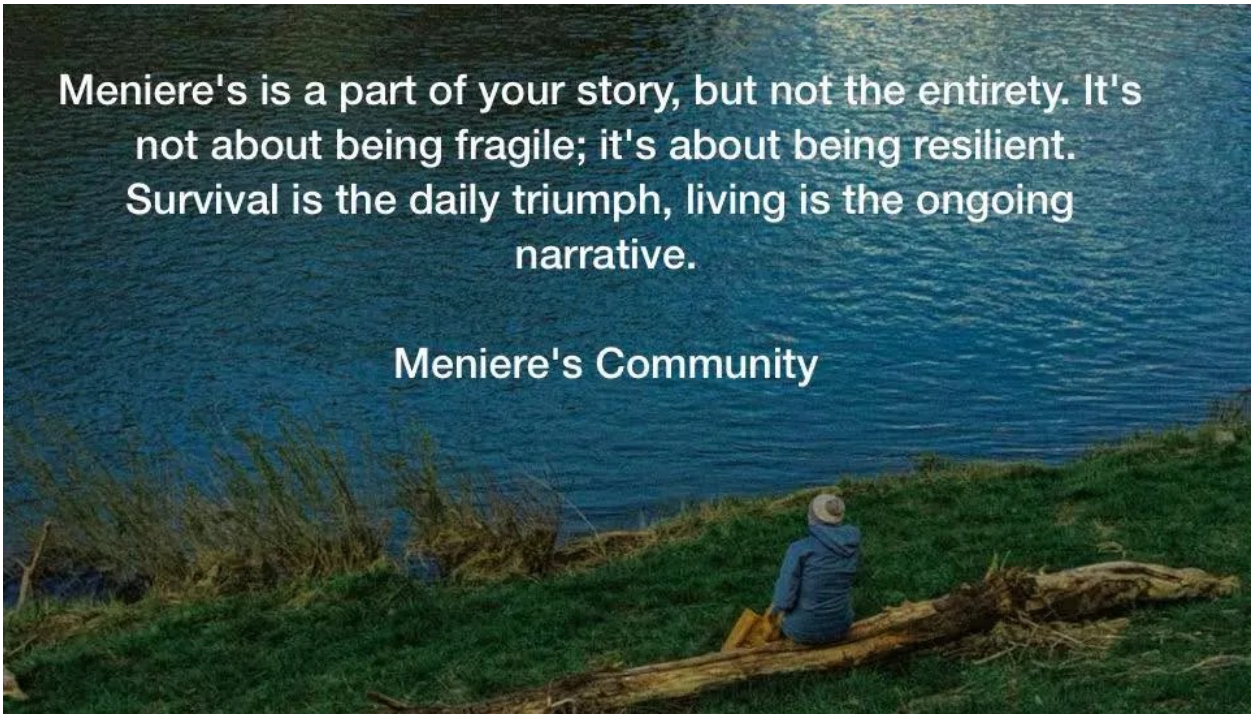
Age Concerns

Talk with your doctor about any concerns you have about your Ménière's diagnosis at your age. What can you expect? What are some of the best ways to deal with the disease as you age? Lifestyle changes? Rescue medicine? Surgery? What's best for you now? Also, how might your experience change as you get older? It's good to know as much as possible from the beginning.

Many Challenges

Each group has its own challenges. Vertigo, tinnitus, ear fullness, and hearing loss are a problem for all groups. That can be very difficult for younger people trying to work and raise a family. Many older people eventually get some relief from the vertigo, but the tradeoff is the risk of imbalance and drop attacks (Tumarkin otolithic crises). That's a big problem as many older people are already suffering from other physical problems that put them at greater risk for serious injuries from falls. Older patients are often counseled to beware of anything in their homes that would cause them to 'trip' and fall.

Whatever your age — whatever your challenge — please know that you are not alone. I know it sometimes feels that way, especially when family and friends don't understand what you face every hour of every day. Even though we (Ménière's sufferers) are a small group, we try to stay in touch personally and through Ménière's forums. Our goal is to help in any way we can because we understand the many challenges we all face.


Meniere's is a part of your story, but not the entirety. It's not about being fragile; it's about being resilient. Survival is the daily triumph, living is the ongoing narrative.
Meniere's Community

Medical Resource Websites

https://pmc.ncbi.nlm.nih.gov/articles/PMC3270408/

https://pmc.ncbi.nlm.nih.gov/articles/PMC4636025/

https://pmc.ncbi.nlm.nih.gov/articles/PMC9445754/

https://pmc.ncbi.nlm.nih.gov/articles/PMC12549249/

https://pmc.ncbi.nlm.nih.gov/articles/PMC12043491/

https://pmc.ncbi.nlm.nih.gov/articles/PMC13241994/

https://pubmed.ncbi.nlm.nih.gov/40602079/

https://pubmed.ncbi.nlm.nih.gov/40313610/

https://pmc.ncbi.nlm.nih.gov/articles/PMC12105955/

https://www.nidcd.nih.gov/health/menieres-disease

https://my.clevelandclinic.org/health/diseases/15167-menieres-disease

https://www.mayoclinic.org/diseases-conditions/menieres-disease/symptoms-causes/syc-20374910

https://www.hopkinsmedicine.org/health/conditions-and-diseases/menieres-disease

https://www.enthealth.org/conditions/menieres-disease/

https://hearinghealthfoundation.org/menieres-disease

https://www.american-hearing.org/disease/menieres-disease/

https://www.nidcd.nih.gov/sites/default/files/menieres-disease-en-2024.pdf

https://www.medicalnewstoday.com/articles/163888

https://brainfoundation.org.au/disorders/menieres-disease/

https://www.sciencedirect.com/topics/medicine-and-dentistry/menieres-disease

https://www.frontiersin.org/journals/neurology/articles/10.3389/fneur.2024.1496384/full

https://www.mdpi.com/2039-4349/12/1/3

https://pavilionhealthtoday.com/gm/meniere-s-disease-in-the-older-patient/

https://www.barrowneuro.org/condition/menieres-disease/

https://entokey.com/menieres-disease-in-the-elderly/

I would like to thank the Ménière's Community on Facebook for allowing me to use some of their 'memes' in my articles. I think you will find the comments from Community members helpful as you begin your journey with Ménière's. I also want to thank the many universities, clinics, hospitals, and vestibular organizations that have shared charts about the disease, its progress, and potential treatments.

Next Time

I'll share about 'Ménière's and the Elephant in the Room' in the next Ménière's Years newsletter.

I also recommend you read Neil Canham's 'Meniere's Without The Spin.'

"… rejoicing in hope, patient in tribulation, continuing steadfastly in prayer." Romans 12:12

Here's to hope!

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