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Vestibular Neuronitis

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Vestibular neuronitis is a disorder characterized by a sudden severe attack of vertigo (a false sensation of moving or spinning) caused by inflammation of the vestibular nerve, the branch of the 8th cranial nerve that helps control balance.

Vestibular neuronitis is probably caused by a virus.

Symptoms

Vestibular neuronitis may occur as a single, isolated attack of severe **vertigo** lasting 7 to 10 days, but many people have additional attacks of milder vertigo for several weeks thereafter. The first attack of vertigo is usually the most severe. Vertigo is a false sensation that people, their surroundings, or both are moving or spinning. Most people describe this unpleasant feeling as "dizziness," although people often also use the word "dizzy" for other sensations, such as being light-headed.

The attack of vertigo is accompanied by nausea, vomiting, and nystagmus (a rapid jerking movement of the eyes in one direction alternating with a slower drift back to the original position). The vertigo is severe at first, and gradually subsides over the course of several days, with residual imbalance lasting up to several months. People do not have tinnitus (ringing in the ears), and hearing is usually not affected.

Diagnosis

- Hearing tests
- Tests for nystagmus
- Gadolinium-enhanced magnetic resonance imaging (MRI)

The diagnosis involves hearing tests and **tests for nystagmus**, which help doctors diagnose the cause of vertigo.

Gadolinium-enhanced MRI of the head should be done to make sure the symptoms are not caused

by another disorder, such as a tumor.

Treatment

- Drugs such as meclizine or lorazepam to relieve vertigo
- Drugs such as prochlorperazine to relieve vomiting
- Sometimes corticosteroid drugs such as prednisone
- Intravenous fluids if vomiting persists
- Physical therapy

Treatment of vertigo is done only to relieve the symptoms it causes and consists of drugs such as meclizine, lorazepam, or scopolamine. Nausea and vomiting may be relieved by pills or suppositories containing the drug prochlorperazine. These drugs should only be used for a short amount of time, because prolonged use may actually lengthen the duration of symptoms, particularly in older people. Additionally, corticosteroids are used briefly. If vomiting continues for a long time, a person may need to be given fluids and electrolytes by vein (intravenously).

Although the vertigo subsides relatively quickly (over the course of several days), a feeling of dizziness may last for up to several weeks to months. During this time, doctors encourage people to stay active. A specialized form of physical therapy, called vestibular therapy, may be helpful.



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