
Labyrinthitis and vestibular neuritis

Summary

- Vestibular neuritis and labyrinthitis are disorders that result in inflammation of the inner ear and the nerve connecting the inner ear to the brain.
 - The most common causes of vestibular neuritis and labyrinthitis are viral infections.
 - The infections that cause vestibular neuritis and labyrinthitis may resolve without treatment within a few weeks.
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Vestibular neuritis (or vestibular neuronitis) and labyrinthitis are disorders that result in inflammation of the inner ear and the nerve connecting the inner ear to the brain. Generally caused by a viral infection, they cause vertigo (usually experienced as a spinning sensation), dizziness, imbalance, unsteadiness and sometimes problems with vision or hearing.

In a healthy balance system, the brain combines messages sent by the balance control systems in both ears, but if one side is affected, the messages from that side are distorted, causing symptoms of dizziness and vertigo.

Symptoms of labyrinthitis and vestibular neuritis

Symptoms of vestibular neuritis include a sudden onset of a constant, intense spinning sensation that is usually disabling and requires bed rest. It is often also linked with nausea, vomiting, unsteadiness, imbalance, difficulty with vision and the inability to concentrate.

While neuritis affects only the inner ear balance apparatus, labyrinthitis also affects the inner ear hearing apparatus and the cochlear nerve, which transmits hearing information. This means that labyrinthitis may cause hearing loss or ringing in the ears (tinnitus).

Causes of labyrinthitis and vestibular neuritis

The most common causes of vestibular neuritis and labyrinthitis are viral infections, often resulting from a systemic virus such as influenza ('the flu') or the herpes viruses, which cause chickenpox, shingles and cold sores. Bacterial labyrinthitis can start from an untreated middle ear infection, or in rare cases, as a result of meningitis.

The infections that cause vestibular neuritis and labyrinthitis may resolve without treatment within a few weeks. However, if the inner ear is permanently damaged by the infection and the brain does not adequately compensate, symptoms can develop into chronic dizziness, fatigue, disorientation, as well as tinnitus and hearing loss (if labyrinthitis is the cause).

Diagnosis of labyrinthitis and vestibular neuritis

Your condition can be diagnosed based on your medical history, answers to questions about the initial onset of the symptoms and your current symptoms, a physical examination and possibly the results of tests carried out by an audiologist, including a hearing test.

Treatment for labyrinthitis and vestibular neuritis

The treatment of labyrinthitis depends on the likely cause. If symptoms persist, a specialist physiotherapist can use vestibular rehabilitation exercises to retrain the brain to interpret the distorted balance messages being transmitted from the damaged inner ear.

Vestibular neuritis can be treated with corticosteroids (a type of anti-inflammatory medication) in the early stages, and, if necessary, with medication to reduce nausea and vertigo.

Self-care at home for labyrinthitis and vestibular neuritis

If your treatment involves vestibular rehabilitation exercises, it is important to continue the exercises at home for as long as you are advised to by your specialist or balance physiotherapist.

It is vital to keep moving, despite dizziness or imbalance, even though sitting or lying may be more comfortable. The aim is to return to your previous activity, work or sport, which helps you adapt to the symptoms and allows your balance system to function normally.

Where to get help

- Your doctor
- Balance and Hearing Centre Tel. 9662 2221

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