

DESCRIPTION

Inflammation of the labyrinth (fluid-filled canals and sacs) in the inner ear. The labyrinth contains the vestibular system, which controls a person's balance and eye movement. It also contains the cochlea, which controls the hearing. Labyrinthitis may affect one or both ears. It can affect all ages, including children.

FREQUENT SIGNS AND SYMPTOMS

- Vertigo. A sensation that you or your surroundings are spinning around.
- Involuntary eye movement.
- Ringing in the ear (tinnitus).
- Hearing loss (one or both ears; may be mild or severe).
- Nausea and vomiting.
- Loss of balance (may fall toward the affected side).
- Feeling of fullness in the ears.

CAUSES

The exact cause of the inflammation is sometimes unknown or unclear. It may result from an infection or trauma. The whole inner ear is about the size of a dime, so inflammation often affects both hearing and balance.

RISK INCREASES WITH

- Bacterial infection in the middle ear.
- Cholesteatoma (a type of cyst in the middle ear).
- Stress or fatigue.
- Smoking.
- Use of some prescription or nonprescription drugs.
- Upper respiratory viral infection
- Head Injury.
- Allergies or family history of allergies.
- Excess alcohol use.
- Heart, brain, or blood vessel disease.

PREVENTIVE MEASURES

- Obtain prompt medical care for ear infections.
- Don't take medications that make you dizzy.

EXPECTED OUTCOMES

The disorder usually resolves on its own in 1 to 6 weeks. Treatment may help relieve symptoms. Some mild vertigo symptoms may continue for several months.

POSSIBLE COMPLICATIONS

- Injuries from falls that occur due to vertigo.
- Permanent hearing loss on the affected side (rare).

GENERAL MEASURES

- Your health care provider will do an exam of the ears and your eye movement. Your head and body may be placed or moved in different positions to help determine what movements bring on the symptoms. You may be asked to walk so your balance can be checked. Medical tests may include hearing tests and others as needed to determine underlying disorder.
- Treatment includes steps to treat any underlying disorder, rest, and medications for symptoms if needed.
- Surgical removal of cholesteatoma (an infected collection of debris in the middle ear) and drainage of infected areas may be needed.

MEDICATIONS

Your healthcare provider may prescribe:

- Antinausea medications (oral or suppositories).
- Antibiotics for bacterial infection.

Your doctor also recommends the following over-the-counter medications. These medications may offer significant symptom relief:

- For fever or pain use acetaminophen or ibuprofen.
(Acetaminophen and ibuprofen may also be alternated every 3 hours for persistent fever or pain.)
- Antihistamine
- Decongestants

- ↳ Unless your doctor tells you differently, always finish the full course of your antibiotic prescription, even if you start to feel better.
- ↳ Antibiotics may interfere with the effectiveness of birth control pills. Use an alternative method of contraception for the remainder of the month after finishing your antibiotic prescription.

ACTIVITY

Keep the head as still as possible. Rest in bed until vertigo stops. Then resume normal activities gradually. Avoid activities such as driving, climbing, or working around dangerous machinery until symptoms clear up.

SEEK MEDICAL ATTENTION IF

- Decreased hearing occurs in either ear.
- You experience convulsions or fainting.
- New, unexplained symptoms develop.
- You experience persistent vomiting.
- You develop a fever.