

An analysis of Menieres Disease according to Chinese medicine models

Menieres disease affects one in a thousand of the population and is equally common in both sexes. It usually affects the age group from 30 to 60 years. It is characterised (Tortora 1993) pathologically by an increased amount of endolymph that enlarges the membranous labyrinth of the ear. The symptoms are fluctuating hearing loss (due to distortion of the basal membrane of the cochlea), attacks of vertigo and roaring tinnitus. Over a period of years there may be almost total destruction of hearing. According to Davidson (1995) the clinical features rarely start before middle age. The patient gets repeated attacks of severe vertigo, nausea, hyperacusia and vomiting which is associated with deafness (especially with deafness to low and medium frequencies) and tinnitus. Some acute attacks may be heralded by discomfort in one ear and also increasing deafness and tinnitus. The attack may last several hours or a day and the patient suffers from vomiting, prostration, pallor, nystagmus (a rapid involuntary movement of the eyeballs) and occasionally fainting. Deafness and tinnitus continues between attacks.

The western medical treatment is bed rest with vestibular sedatives during acute attack. Drugs to stop vertigo and vomiting are often prescribed. Diuretics to remove water from the body with the aim of decreasing the elevated endolymphatic fluid pressure are often given. Vasodilators are sometimes given as a prophylaxis. If attacks become too much then surgery to drain the endolymph is given but this is usually only if the other ear is not affected. Diet is also important and this involves reducing fluid intake, reducing cholesterol level, stopping alcohol and eliminating salt from the diet. The stopping of coffee and cigarettes is also helpful as they constrict the blood vessels.

According to Kuang (1991) the aetiology may be a) due to disturbance of water and salt metabolism, b) mechanical blockage of the inner ear cochlea and endolymphatic duct, c) disturbances of vasomotor function within the labyrinth, d) allergy and e) psycho-somatic factors. The cause is not really known.

Other factors according to Chell (1997) which have been linked with Menieres disease are :- tension and anxiety, a high salt intake which is probably due to increased fluid retention, pre- menstrual attacks which are probably due to fluid retention, head injury severe enough to cause concussion, syphilis, high cholesterol levels, allergies. There is a direct link with migraine in 30% of recorded cases.

Glandular or hormonal imbalance (including hypothyroidism), dietary factors of chocolate, dairy products, alcohol and wheat. High doses of aspirin (14 to 16 tablets per day) can cause ringing in the ears which is cleared by simply removing the aspirin.

Maciocia (1994) states that the symptoms of dizziness according to the "Simple Questions" relates it to Liver Wind: "Wind causes dizziness and it pertains to the Liver". The "Spiritual Axis" says that dizziness is due to Qi not reaching the head and also to deficiency of the Sea of Marrow. Zhu Dan Xi in " Essential Methods of Dian Xi " relates dizziness to Phlegm. Zhang Jing Yue in his book " The Complete Book of Jing Yue" says that dizziness is due to deficiency. From this there can be concluded that there are several different syndromes that can account for the symptoms and signs of Menieres disease. These will now be discussed along with the aetiology, pathology and treatment.

For ease of discussion they are divided into the following groups :-

- 1) Phlegm and Damp in the Head
- 2) Liver Yang Rising
- 3) Qi and Blood deficiency
- 4) Kidney deficiency

a) Phlegm and Damp in the Head

The main syndrome to attribute to this is Retention of Phlegm Damp in the Middle Jiao.

Symptoms and signs - coughing with copious phlegm, vomiting frothy phlegm (more in the mornings), sluggishness. Other symptoms are discomfort of the epigastrium with fullness and nausea, intermittent pains, dizziness, heavy head and body, poor appetite, loose stools, no thirst and pulse slippery and full, tongue with white greasy coat, tongue body swollen, pale and toothmarked.

Aetiology Chronic Spleen Qi Xu or Long term invasion by Cold and Damp which weakens the Spleen and Stomach

Pathology of this syndrome is that there is Spleen Qi Xu (or even Yang Xu) in which the Spleen is not performing its function of transforming and transporting fluids properly leading to an accumulation which produces Damp. This Damp over time or under the influence of heat condenses forming Phlegm. The Phlegm and Damp prevents the Stomach's action of descending Qi from functioning properly and so nausea and even vomiting may occur. The Phlegm and Damp also stops the clear Yang from rising to the head causing muzzy head, dizziness and even vertigo when very severe.

Treatment principle is to clear Phlegm and tonify Spleen Qi. Regulate Qi in the channels of the ear.

Points REN12 - Tonifies Spleen, harmonises Stomach, resolves Damp and Phlegm and regulates Stomach Qi.

ST40 - Resolve Damp and Phlegm.

SP9 and SP3 - Tonifies Spleen Qi and Yang and Resolves internal and external Damp.

ST8 - Clears head from dizziness from Damp and Phlegm.

SI19, SJ17 and anmian - Benefits the ears.

Even technique

The second syndrome is Invisible Phlegm (due to Spleen Qi Xu) plus Liver Yang Rising/Fire/ Wind. This is a combination of the basis of the last syndrome and the next category of Liver Yang Rising. The key symptoms are dizziness, heavy head with Liver signs of irritability and heat. Other signs and symptoms are headaches, poor concentration, nausea, poor appetite, abdominal distension, aggravation, pulse wiry, slippery and tongue greasy coat. In severe cases windstroke, tremors, collapse etc. may occur.

Pathology of the formation of the Phlegm is the same as above but the rising to the head is due to being carried up by the Liver Yang Rising. Liver Fire and Liver Wind can also take the Phlegm upwards and will be covered in the next section.

Treatment principle would be to resolve phlegm, subdue Liver Yang rising or clear Liver Fire or subdue Liver Wind.

Points would be REN12, ST40, SP3, plus points to resolve the Liver Yang rising or clear Liver Fire or subdue Liver Wind which will be covered in the next section.

These two syndromes both explain the dizziness and vertigo symptoms of Menieres disease. Although there tends not to be so much tinnitus, the Phlegm can block the channels of the ears causing intermittent tinnitus and deafness.

b) Liver Yang Rising

There are several syndromes to consider here :-

Liver Yin Xu and or Kidney Yin Xu with Liver Yang Rising. (Liver Blood Xu can also lead to Liver Yang Rising) (Xu and Shi mixed syndrome)

Signs and symptoms of this are for the Liver Yang Rising :-

Headache on the temples, eyes or lateral side of head, tinnitus, deafness, dizziness, dry mouth and throat, insomnia, irritability, shouting in anger, feeling worked up, tongue red, especially on the sides, pulse wiry.

If with Liver Yin Xu there will be additional symptoms of dry eyes, blurred vision, floaters, stiffness, numbness and cramps in the muscles, scanty menstruation or amenorrhoea, 5 palm heat, malar flush, dry mouth and throat, constipation, dry stools, Tongue red (especially sides), possibly peeled, possibly thin and dry, pulse choppy, thin, wiry, maybe rapid.

If with Liver Blood Xu there will be symptoms similar to the Liver Yin Xu except without the heat symptoms and dry eyes and the additional symptoms of brittle nails, dull complexion, pale lips and a pulse of choppy or thready and a tongue being pale. If with Kidney Yin Xu there will be additional symptoms of nightsweats, dry mouth or thirst at night, dark scanty urine, lumbar pain and weakness, tinnitus, deafness, vertigo, insomnia, constipation, 5 palm heat, restlessness, forgetfulness, nocturnal emissions, tongue red thin coat or no coat (possibly peeled) cracked, pulse floating-empty rapid or thready and rapid.

Aetiology for Liver Yin Xu is chronic emotional problems such as anger and resentment. Poor diet with too much greasy, hot foods and alcohol. Lack of blood nourishing foods or cold, rich foods and irregular eating which damages the Spleen which may lead to the formation of Phlegm which may rise upwards carried by the Yang energy. Kidney Yin Xu can also lead to Liver Yin Xu and the aetiology for this is busy lifestyle, chronic stress and anxiety, long term illness and over work. If Liver Blood Xu this will be discussed in section c).

Pathology This is a mixed condition of a deficiency (Yin Xu or Blood Xu) which leads to an excess of the Yang rising. The Yin is unable to contain the Yang which rises up to the head. The long term emotional problems leads to Liver Qi stagnation. This then produces heat or even Fire which depletes Liver Yin causing an excess of Yang.

Treatment principle for Liver and or Kidney Yin Xu with Liver Yang Rising is tonify Yin, subdue Liver Yang Rising, soothe the Liver and regulate the Qi in the channels of the ear. If more Liver Blood Xu then there would be nourish Blood rather than tonify Yin.

Points LIV3 - subdues Liver Yang
GB20 - subdue Liver Yang

SP6 - Nourishes Kidney Yin, nourishes Blood and Yin

KID3 - tonifies Kidneys

LIV8 - tonifies Liver Yin (or in the case of Blood Xu nourish Liver Blood)

SJ17, SI19 and anmian - benefits the ears

Liver Wind from Liver Yang Rising (Xu and Shi mixed syndrome).

Symptom and signs :- Dizziness, vertigo, headache, tinnitus, tremor, tic, shaking of head, heat in upper part of body, pulse floating and empty or wiry thready and rapid, tongue red, peeled and deviated. This condition can lead to stroke.

Aetiology Factors leading to Liver Yin Xu and Liver Yang Rising as already stated.

Factors leading to Liver Fire such as alcohol, smoking and spicy food.

Pathology Liver Yin Xu causes Liver Yang rising which generates Wind. This is a mixed Xu and Shi condition.

Treatment principle nourish Liver Yin, subdue Liver Yang, subdue Wind.

Points as for Liver Yin Xu with Liver Yang Rising

Liver Fire Blazing (Shi condition).

Signs and symptoms are irritability, outbursts of anger, red face and eyes, tinnitus and deafness (both sudden onset or episodic and often triggered by emotional upset), dizziness, headache on temple or in eye (usually intense and throbbing), thirst, bitter taste (usually continuous or when angry), constipation with dry stools, dream disturbed sleep, nosebleed, blood in stools, coughing blood, pulse wiry, rapid, tongue red body, redder on sides, dry, yellow coat.

Aetiology 1) Excessive consumption of alcohol, fried foods and meat (especially lamb and beef) which helps to form heat in the Liver.

2) Long standing anger, resentment, frustration etc., which leads to Qi stagnation which produces heat.

Pathology This is full heat in the Liver. The heat rises and produces symptoms in the head and eyes especially in the Liver and Gall Bladder channels. The heat also leads to the constipation, bitter taste in the mouth and dark scanty urine. The heat may cause heat in the blood which leads to bleeding.

Treatment principle is to sedate Liver and clear Fire.

Points:- LIV2 to clear Liver Fire

Liver 3 sedates Liver

GB20 clears Liver Fire and subdues ascending Liver Qi

DU20 (needled backwards) Sinks Liver Fire

Local points for the ears as above.

Use reducing or even technique.

All of these syndromes cause movement upwards either by the Yang rising or heat rising (Full or empty) or by Wind. These are all slightly different in their presentation but all contain dizziness, tinnitus and deafness (except Wind) to some degree and also tend to be sudden attacks. The pattern manifesting relies upon the underlying deficiency or excess of the patients constitution. The more common presentation of Menieres disease tends to be more due to the Xu conditions allowing the Yang energy to rise.

c) Qi and Blood deficiency

This a combined condition of Spleen Qi Xu plus Liver Blood Xu.

Signs and symptoms are loose stools, poor appetite, bloat, loose stools, dizziness, aching and cramping in the muscles, numbness or tingling in the limbs, blurred vision, tiredness, sallow complexion, pulse choppy and thready, tongue pale especially the sides or slightly orange sides or wet sides

When these two syndromes combine then the main symptom to be like Menieres disease is the dizziness which tends to be less severe than with the Liver Yang

Rising syndromes. Damp formed by the Spleen Qi Xu can also lead to a muzzy head.

Aetiology Eating irregularly, too much cold, raw, dairy foods, not enough Blood nourishing foods or warm foods. Over working, chronic worry or anxiety.

Pathology The Spleen is responsible for the transformation of food into Gu Qi. The Gu Qi is used to make Blood which the Liver stores. If this function is not working then there will not be not enough Blood produced.

Treatment principle Tonify both Liver Blood and Spleen Qi , nourish Blood.

Points ST36 -strengthens Stomach and Spleen, Tonifies Qi and Blood

SP6 - Strengthen the Spleen, promotes Qi and Blood.

REN4 - nourishes Blood and Yin

REN6 - tonifies Qi

DU20 - raises clear Yang to the head

LIV3 - tonifies Liver Blood.

Reinforcing

d) Kidney deficiency

The symptoms of dizziness and tinnitus can occur with both Kidney Yin Xu and Yang Xu and so this is probably due to a lack of Kidney essence as this is failing to nourish the brain and Marrow. This results in a deficiency of the sea of marrow and the main symptom of this is the dizziness. Kidney essence deficiency occurs with a deficiency of either Kidney Yin or Yang and sometime both. I will describe both Kidney Yin and Yang Xu signs and symptoms but it should be borne in mind that these can combine in the following combinations Spleen and Kidney Yang Xu, Kidney and Heart Yin Xu and Kidney, Heart and Liver Yin Xu but produce the Menieres symptoms although the main symptoms still come from the Kidney Xu.

Kidney Yin Xu

Signs and Symptoms - nightsweats, sore lumbar region, dizziness, tinnitus, vertigo, deafness, dry mouth and throat at night, 5 palm heat, nocturnal emissions, forgetfulness, dark scanty urine, constipation, pulse floating-empty, rapid or thready and rapid, tongue red tongue body, thin coating or no coating (maybe peeled), cracks.

Aetiology Febrile disease, prolonged loss of blood, over use of hot herbs, drugs, alcohol, smoking, hectic lifestyle, overwork, chronic stress, chronic illness, excessive sex, recurrent back sprain.

Pathology Yin fails to produce enough marrow and so tinnitus, poor memory, dizziness and vertigo ensue. Kidney Yin Xu produces empty heat. Kidneys support the back and so if they are weak then lumbar pain will develop.

Treatment principle Nourish Kidney Yin

Points

KID6 - nourishes Kidney Yin

REN4 - nourishes Yin and Jing and tonifies the Kidneys

LU7 + KID6 opens the Ren Mai to tonify Yin

KID 3 tonifies the Kidneys

SP6 - tonifies Kidney and Liver Yin

Kidney Yang Xu

Signs and Symptoms - chilliness of lumbar region and knees, sore back and knees, infertility, impotence, premature ejaculation, frequent clear copious urination or scanty clear urination, poor appetite, loose stools, oedema of legs, lack of willpower, pulse deep, weak, tongue pale, swollen and wet. If severe then as the Kidney essence is affected then tinnitus and dizziness will be present.

Aetiology Chronic illness, excessive sex, retention of Damp, general old age.

Pathology Internal colds symptoms are due to the Yang Xu. Weakness of back and knees are due to Kidney Xu. Kidney Yang transforms and warms fluids and will lead to swelling of tongue and legs and abundant urination but if not enough Yang it will fail to move urine and it will be scanty. Sexual function if not warmed will result in the sexual problems. As Kidney Yang is the source of all Yang it will not warm the Spleen and so Spleen Yang Xu symptoms will present.

Treatment principle Warm and tonify Kidney Yang. Tonify Ming Men

Points

KID7 and BL23 tonifies Kidney Yang.

KID3 tonifies Kidneys

DU4 tonifies Fire of Ming men

BL52 tonifies Kidney Yang especially the will power aspect.

SI3 + BL62 opens the DU channel and tonifies Kidney Yang and nourishes Marrow and the brain

Reinforcing and moxa should be used

With both the Kidney Yin and Yang the sea of marrow needs to be nourished so GB 39 to nourish marrow and clear dizziness from the Kidney deficiency.

DU20 raises Qi to the brain and nourish Marrow.

Literature review

Xu (1987) has done a study over a period of 18 years of 75 patients with Menieres syndrome. They used as main points Yintang, P6 and Anmian and for patients with severe tinnitus and deafness SI19 and GB20. The treatment was daily for 10 sessions. Of the 75 cases 29 were cured (symptoms cleared) no further episode for one year. 25 were markedly effective (symptoms markedly relieved) and no re-occurrence within one year. 16 showed milder symptoms. 5 cases showed no improvement. This paper was quite brief and did not give details of the effectiveness of the treatment for patients who have had the disease for different lengths of time or for severity which is a shame because otherwise it is quite an interesting study. In

the case study given it also mentions the use of drugs which is not mentioned elsewhere which may cloud the issue slightly.

Dai (1993) took 23 patients suffering from vertigo, 18 of which were so severe that they could not stand. Ear shenmen was needled bilaterally with stimulating then connected to an electro-acupuncture machine where continuous wave current was passed for 30 minutes. During this time moxa is applied at DU20. This treatment was done daily for a maximum of 6 treatments. 16 were cured with follow up one year later. 4 cases achieved excellent which was all symptoms disappeared, only occasional dizziness on follow up one year later but no tinnitus. 3 cases were improved. A study on 5 cases showed that there was an improved blood supply to the brain.

Jia (1993) did a review paper on the applications of acupuncture in various ENT problems. He cited that Menieres was treated in 294 cases with success. He goes on to explain that in an acupuncture group of 39 patients the following points were

administered daily for 2 to 3 sessions when relief from symptoms was obtained and then it was on alternate days for a further week :- Taiyang, GB20, DU20, DU23, ST36, LIV3 and if bad vomiting P6. A drug treated group was also run at the same time. It was found that the effectivity rate was 74.4% for the acupuncture group and 48.6% for the drug group. Unfortunately, there are no details of how the effectivity is measured, any details about how the patients were chosen and no references supplied. He also cites later in the paper that moxibustion treatment for Menieres has had a cure rate of 83% and a 'total effective rate of 99.5%', again there were no details .

Chell (1997) did a N=1 study on a patient who had according to his diagnosis Phlegm and Dampness in the Middle Jiao with underlying Qi and Blood deficiency. Points used were ST36", ST40", P6". SJ17, SI19, GB20, anmian on affected side. Logs were kept of how many waking hours she experienced symptoms and audiometry tests were performed. He had some encouraging results but this as he stated was on only one person.

With the first three of these papers they recommend points which help the condition but they do not take into account the specific pattern of the individual. If taken from a very general point of view in the Xu paper the points used seem to be mainly to clear the manifestations e.g. P6 for nausea, Yintang for calming. With the Dai paper this is perhaps more for the Qi and Blood deficiency as the use of moxa raises clear Yang to the head. With the Jia paper the largest combination of points were used which appear to be more with subduing Liver Yang rising. As there are several conditions which can cause Menieres disease this broad spectrum use of points does not take into account the holistic view of acupuncture and may also explain why there are some failures. Most of the papers do not go into enough detail to explain if patients had had a Chinese medicine diagnosis perhaps this should take place and then the patients put into groups and the points specific for that pattern used on them. With the Chell paper this was specific points for one patient and it showed encouraging results.

In Kuang's book he believes that vertigo is the result of the retention of phlegm due to the deficiency of Liver or Kidney or deficiency of the Spleen and Heart or the

stagnation of Phlegm Fire or Phlegm Damp and he recommends a variety of points depending upon the patients condition. With ear acupuncture he gives two sets of points to use alternately, set A Liver, Kidney, Subcortex, Vertigo point, set B Occipital, Heart, Spleen and Vertigo point. Other points that may be added according to the patients pattern are Bladder, Sympathetic, Gallbladder, Shenmen (for sedation), Stomach (vomiting and nausea) and internal ear (deafness and tinnitus). For body acupuncture he recommends, set A :- P6, GB20, Vertigo point which is 1.5 inches above the ear apex. Set B :- ST8, ST36, BL2. Additional points may be used for deafness and tinnitus are set A :- GB12, SJ20, SJ21, SJ5, set B SJ17, GB5, BL23 and SI19 or GB2.

In Acupuncture a Comprehensive Text aural vertigo is due to Phlegm and Dampness obstructing the middle jiao and stopping the 'cleansing' Yang Qi from rising to the mouth, nose, ears and eyes. Also it can be due to Kidney Yin Xu which causes Liver Yang Rising which also causes Wind. With the Phlegm and Dampness there is nausea and vomiting and with the Kidney Yin Xu there is dizziness, tinnitus, headache and blurred vision. Points recommended are GB20, LIV3, to clear Wind. SJ17, SI19, clears the channels round the ear. P6 for descending stomach Qi and preventing vomiting. Supplementary points of ST36 and LI12 for dampness by

strengthening Stomach and Spleen and KID3 (tonifies Kidneys) and Anmian (calms the Shen) for the Kidney Yin Xu and Liver Yang rising. For ear acupuncture :- Heart, Shenmen, Sympathetic, Kidney, Endocrine, Adrenal, Forehead and Occiput are recommended, 2 to 4 points to be used in a session.

From my own observations I have seen two patients with Meniere's one of which had the retention of Phlegm in the middle jiao and underlying Kidney Yin Xu with Liver Yang Rising. The other had Spleen Yang Xu, Liver Blood Xu, underlying Kidney deficiency and was on a very strict diet without dairy, wheat or salt. Both suffered from tinnitus, deafness and dizziness to different degrees

As can be seen from the syndromes discussed above that the main categories for the signs and symptoms of Menieres disease are due to Phlegm and Dampness, Liver Yang Rising and Kidney deficiency. Often there are combinations of these categories with additions of others such as Qi and Blood deficiency. Each patient needs to be looked at as an individual so that treatment can be tailored to them and if this is done then acupuncture can be an effective form of treatment for a very unpleasant and disabling disease.

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