



I suffer momentary deafness when I sit up in bed. Is it serious?



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Mind Your Body

By Dr David Lau

Q: I am a 66-year-old man. A decade ago, I suffered sudden hearing loss followed by tinnitus (ringing in the ear) in my left ear.

My ear, nose and throat (ENT) specialist could not confirm whether this was due to a viral infection, a previous diagnosis of Meniere's disease (a kind of hearing loss with symptoms such as dizzy spells and momentary deafness) or if it was idiopathic, meaning there is no known cause. My left ear then became totally deaf.

I am now bothered by a new symptom which began more than a year ago. On certain days, when I sit up on the bed after waking up, my right ear feels a rhythmic sensation of fullness, alternating with split-second deafness which coincides exactly with my heartbeat.

This sensation continues until I lie back in bed, only to return when I sit up again. This process is repeated several times before the sensation finally goes away. Recently, it happens even when I am not in bed.

Reducing salt intake seems to reduce the frequency of this symptom but I am afraid a salt-free diet may have unintended consequences on my health.

I am certain I do not have pulsatile tinnitus (ringing in the ears at the same rate as the heartbeat) because what I hear is not internal noise. Please help.

A: Given the sensation of ear fullness and fluctuating hearing loss, and the history of sudden hearing loss in the other ear 10 years ago, Meniere's syndrome or delayed endolymphatic hydrops is a possible diagnosis for your condition.

Endolymphatic hydrops is the increase in the amount of fluid in the inner ear, resulting in an increase in the fluid pressure in the inner ear.

This is called Meniere's disease or idiopathic endolymphatic hydrops when there is no identifiable cause.

Normally, with this diagnosis, we would expect tinnitus and vertigo (giddiness) too, although these symptoms are not always present.

Reducing salt intake can help lower fluid pressure in the inner ear. So the improvement of your symptoms with a low-salt diet also supports the diagnosis.

But more importantly, it is not possible to confirm the diagnosis from the history alone. I would recommend an ENT assessment, especially if your last one was done some years ago.

A hearing test will help determine if there is a problem with your hearing nerve.

If so, a magnetic resonance imaging scan may be necessary to produce an image of the nerve and rule out a nerve tumour.

A range of blood tests may also be needed to look for causes, including auto-immune diseases, in which the body reacts against itself.

It is unlikely that reducing salt in the diet will cause unintended health consequences, as it is difficult to eliminate salt completely. Indeed, if it is helping, I would recommend that you continue to keep the salt content of your diet low.

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