Introduction:

- Meniere’s disease classically affects middle aged adults and elderly.
- Presents with episodic triad of low frequency nerve deafness, tinnitus and vertiginous attacks (drop attacks).
- Proposed and most accepted theory of etiopathogenesis: endolymphatics hydrops which eventually leads to fibrosis of labyrinth.
- Vertiginous episodes are due to rupture of endolymphatic sac membrane which causes mixing of potassium rich endolymph with potassium poor perilymph.
- Influx of potassium causes depolarisation of vestibular nerve end thereby causing vertigo and nystagmus.

Treatment:

- Vestibular nerve section by Minimally Invasive Restrosigmoid Approach (MIRA) was done in both the patients.
- They were completely relieved of the symptoms within 1 week post-surgery and were started with vestibular rehabilitation therapy for 3 months.

Case presentation:

Case 1:
- 60 year old female.
- Known case of left Meniere’s disease for 3 years.
- No relief with medications.
- Increased intensity of symptoms for past 1 year.
- Offered the option of vestibular nerve section, which patient readily accepted.

Case 2:
- 70 years old male, known case of left Meniere’s disease.
- Had undergone endolymphatic sac surgery 9 years ago.
- Post-operatively he was asymptomatic until last year following which he developed incapacitating vertigo.
- Counselled for vestibular nerve section.

Investigations:

- Audiology: Low frequency sloping sensory neural deafness.
- Electronystagmography and Videonystagmography: Peripheral vestibular systemic lesion.
- ECOG: Mean SP/AP ratio was more than 0.45
- MRI brain with contrast: Normal
- MRA : Normal.

Conclusion:

- The main aim of vestibular nerve section is to relieve intractable and debilitating vestibular symptoms.
- Advantage of MIRA over other approaches is that hearing is preserved.
- Retrosigmoid approach provides a better exposure of VII and VIII nerve complex in Cerebello Pontine Angle.
- Considering high success rate, excellent access and low complication rate this can be the best modality in treating intractable Meniere’s disease in cases of failure of medical treatment.