

## Hope lost and found My struggle with Ménière's disease

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**L**EANING NAUSEOUS AGAINST THE WALL as the room swam round me, I wondered how much longer I could live like this – unable to work or do normal tasks. What hope had my children with a father so strangely disabled?

Supported by the government in 1991 to study aircraft engineering, a bright future was opening before me. After successfully completing my course, I began work in 1996 as a technician on Royal Air Force of Oman (RAFO) helicopters and was especially excited to test the aircraft in flight with the pilots.

In 2004, I had the privilege to be sent to the UK for a helicopter maintenance course. As we landed in London, I suddenly felt dizzy and was sick, having to rest on the plane before disembarking. The doctors over there gave me hydrochlorothiazide tablets (Dyazide, Maxzide). I had no further problems either during the 6 months course or on return to Oman in 2005.

In both 2006 and 2007, I had two similar events to the one at the airport in London, but more serious: a feeling of pressure in my body, sweating, extreme dizziness, vomiting, and severe pain in my ears. Each 'attack' lasted 30 to 60 minutes. As I was then working for RAFO in Salalah, I was cared for by their medical centre. Routine tests did not reveal any abnormalities. Accordingly, the attacks were attributed to stress and fatigue as I was often working 7am to midnight on new aircraft. My work pressure further increased in 2007 when I began a BSc. Mechanical Engineering course at Dhofar University. I would study at the university from

8–12, work 1–7pm and then study late into the night or even early morning. This may have further aggravated my problem.

In 2008, the attacks became more frequent and much more severe lasting for 2–3 days each time. I was admitted to Sultan Qaboos Hospital in Salalah for 4 days, but although no evident abnormality was noted, I was given indefinite sick leave as I was no longer fit to work. During this period, I began feeling down and started to lose hope for my future. I could no longer study or do the work I loved and feared for my family's future. My condition rendered even self-care difficult; for example I had to sit like a small child to take a shower.

Transferred to Muscat, the Air Force Hospital's ENT department found I had severe hearing loss in my left ear, the nerve from my left cochlea being dysfunctional. This was attributed to working in the high noise environment of helicopter maintenance. I was referred to Sultan Qaboos University Hospital (SQUH) in Muscat for magnetic resonance imaging (MRI) and an audiogram which led to the same diagnosis of noise related hearing loss; however, the doctors were perplexed by my symptoms. Subsequent results of more advanced electrocochleography and electronystagmography tests conducted at a private clinic suggested that I suffered from Ménière's disease, a disorder of the inner ear which often manifests as pain in both ears, tinnitus, vertigo and nausea.

With a clear diagnosis of Ménière's, the doctors proposed possible treatment. I could undergo decompression or an injection to reduce the fluid in my inner ear and maybe also have an

operation, but this could mean I would lose the hearing in my right ear as well. The SQUH consultant suggested that before undergoing any of this risky treatment, it would be good to try gentler self-care and he suggested I explore the various Ménière's disease websites.<sup>1-8</sup>

The diagnosis and this suggestion were a turning point in my struggle both with the disease and with the constant anxiety that I felt. The websites had lots of information about the disease and forums where sufferers from many parts of the world could share their experiences.

I began to put into practice the some of the suggestions I gathered from the websites. For a start, I gave up my studies. Then I radically changed my diet: less rice, no red meat, no oil, no added sugar or salt and lots of salads, vegetables and fruit. I walked 2–3 km a day or ran 1–2 km and ensured I had a minimum of 8 hours sleep. This regime, together with a new medicine, Betaserc (betahistine dihydrochloride), significantly reduced my symptoms to the surprise of my ENT specialists. From mid 2009, with their agreement, I began to reduce the medication gradually over 3 months from 3 tablets a day to none. I had the occasional attack, but only lasting 1–2 minutes and these had completely ceased by January 2010.

Another key part of my treatment, suggested by an American 'web friend' was to restore my self-confidence and prepare myself for an eventual return to work by undertaking some social activity. I spent a rewarding 3 months as volunteer teaching English to 25 children. It was an excellent way to forget my own problems as I interacted with these poor children.

In early 2010, I went to see the RAFO Director

of Engineering to ask to return to work. I am now employed as a teacher at RAFO's Technical Training School in Salalah teaching 3–4 courses per year to new aircraft technicians using dummy aircraft.

What is my conclusion from my 6 years experience with Ménière's disease? I think it's important to be your own physician to educate yourself and to learn from the experience of others in order to get well. I am trying to educate others in Oman about the disease and would like to create a website in Arabic. My ENT specialists call on me to advise other sufferers and I was recently very pleased to help someone in the Ministry of Defense to recover from the disease. I now have hope for a bright future for me and my family.

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