

Clinical severity staging system may aid treatment selection for Meniere disease

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A three-factor, composite clinical severity staging system can optimize

treatment selection for the management of Meniere disease, according to a study published online Aug. 25 in *Otolaryngology—Head and Neck Surgery*.

Brevin J. Miller, from Washington University in St. Louis, and colleagues sought to identify clinically [important factors](#) associated with conservative treatment response in Meniere disease and to develop a composite clinical severity staging system. Seventy-eight patients were enrolled in the study.

The researchers found that 63 percent of patients were responsive to conservative therapies. Higher proportions of no or mild vertigo (24 percent) and none or mild comorbidity (27 percent) and a lower proportion of hearing loss (19 percent) were seen among responsive versus unresponsive patients. A three-stage system that consolidated these factors demonstrated a treatment response gradient ranging from 100 percent for stage 1 (11 patients), 64 percent for stage 2 (56 patients), and 18 percent for stage 3 (11 [patients](#)).

"A composite clinical severity staging system including these three factors can be used to optimize [treatment selection](#) and promote patient-centered management of Meniere's disease," the authors write.

One author reported being a consultant for Cochlear Ltd.

More information: Brevin J. Miller et al, Identifying Predictors of Treatment Response in Meniere's Disease: A Clinical Severity Staging System, *Otolaryngology—Head and Neck Surgery* (2023). [DOI: 10.1002/ohn.486](#)

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