

## MENIERE'S DISEASE

All Classes  
(Updated 11/29/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p><b>A.</b> Previously reviewed and warned by the FAA.</p>	<p>If the AME can determine there have been no further symptoms or episodes of vertigo:</p> <p><b>Note:</b> The medical certificate should not be issued for any class until condition is fully resolved and reviewed by the FAA.</p> <p>Pilot duties must be discontinued while symptomatic or on medication for vertigo.</p>	<div style="background-color: #008000; color: white; text-align: center; padding: 5px;"><b>ISSUE</b></div> <p>If continued <b>asymptomatic</b>, annotate this information in Block 60.</p> <p>If return of symptoms, DEFER and submit the most recent ENT evaluation.</p>
<p><b>B.</b> The FIRST time the condition is reported to the FAA.</p>	<p>After a recovery period of <b>six (6) months</b> showing:</p> <ul style="list-style-type: none"> <li>Control of vertigo;</li> <li>No further vertiginous attacks: AND</li> <li>Hearing remains within standards.</li> </ul> <p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> <li>Current (performed within the past 90 days), detailed clinical <b>otolaryngologist</b> (ENT) evaluation and progress note that documents sustained control and no recurrence of symptoms. It must address if active disease exists. If in remission, when did remission commence.</li> <li>Current (performed within the past 90 days) clinical audiogram with Air-Conduction/Bone-Conduction (AC/BC) and Speech Discrimination (SD).</li> <li>Typed personal statement describing the history of the condition. It must include: <ul style="list-style-type: none"> <li>If there is any family history;</li> <li>If single side or bilateral;</li> <li>Episodes of hearing loss over the last year;</li> </ul> </li> </ol>	<div style="background-color: #ff0000; color: white; text-align: center; padding: 5px;"><b>DEFER</b></div> <p>Submit the information to the FAA for a possible Special Issuance.</p> <p><b>Follow up Issuance</b> Will be per the Authorization Letter</p>

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	<ul style="list-style-type: none"> <li>• The number of attacks;</li> <li>• A description of the severity of the attacks with type of symptoms;</li> <li>• Any history of migraine or drop attacks (collapsing suddenly without fainting);</li> <li>• Medication used for control/treatment given;</li> <li>• Any surgery;</li> <li>• Success of control (e.g., How often do you have a recurrence? When was most recent episode?); and</li> <li>• Therapy/medication used for control.</li> </ul> <p>4. Additional tests such as (ECOG, VEMP, MRI with Gadolinium of the cerebellopontine angle [CPA], etc.) performed as clinically indicated.</p> <p>5. All treatment records associated with diagnosis.</p> <p><b>Note:</b> Pilot and safety related duties (SRD) duties must be discontinued while on medication for vertigo. 14 CFR 61.53 applies.</p> <p>Medication: Betahistine (Serc, Beta-Serc) is <b>NOT</b> allowed.</p>	
<p><b>C.</b> With associated hearing loss.</p>	<p>If there is associated hearing loss, the individual should be evaluated to determine if they meet hearing standards.</p> <p>See <a href="#">Item 49. Hearing</a>.</p>	<p><b>DEFER</b></p> <p>Submit the information to the FAA</p>