

# How the VA Rates Vertigo and Meniere's Disease

Regulatory Source: 38 CFR § 4.87 – Diagnostic Codes 6204 (Vertigo) & 6205 (Meniere's)

VA Source: <https://ecfr.gov>

## Summary:

Vertigo and Meniere's Disease are rated based on severity, frequency, and how much they affect hearing and balance. Ratings go higher when episodes are constant and include gait disturbance or hearing loss.

## VA Rating Table:

Rating	Explanation
10%	Occasional dizziness or vertigo, mild imbalance, no hearing loss. Attacks do not interfere with work or routine daily tasks.
30%	Dizziness with occasional staggering or imbalance. May cause brief interruptions to mobility or work.
60%	Vertigo episodes with hearing loss and cerebellar gait (unsteady, swaying walk). Intermittent but significant disruption of function.
100%	Constant staggering, hearing impairment, and balance loss. Near-continuous vertigo interfering with all activity. Often due to advanced Meniere's disease.

## Required Evidence:

- ENT or neurologist diagnosis of vertigo, vestibular disorder, or Meniere's disease
- Dizziness logs, hearing test results, and balance assessments
- C&P; exam documenting gait instability or frequency of attacks
- Functional reports describing safety, fall risk, and daily activity
- Optional: audiologist or balance therapy records

## Pro Tip:

Vertigo ratings increase with hearing loss and balance issues. If you've fallen, report it. Keep a log of dizziness and symptoms over time—it's crucial for higher ratings.