
Sudden Sensorineural Hearing loss Information:

You have come with what is known as a Sudden Sensorineural Hearing Loss (SSNHL), or nerve deafness in the ear.

This condition occurs in 5 to 20 people per 100,000 of the population.

Many different factors have been linked to this condition.

It can sometimes follow a recent upper respiratory tract infection, can be caused by lack of blood supply to the hearing nerve and can be due to your own immune system attacking the hearing nerve. In most instances a cause is not found. Rarely, sudden hearing loss can be caused by a benign growth on the nerve of hearing, known as an acoustic neuroma. For this reason all patients with SSNHL are advised to have an MRI head scan if they have ongoing hearing asymmetry. Acoustic neuromas are generally treated with surgery, although if very small they may require monitoring only.

Hearing improves on its own in up to half of those affected with SSNHL, although recovery may not be complete. These patients often don't need an MRI.

Steroid (prednisolone) tablets are prescribed for **7** days in order to assist the body in its recovery phase, except where other medical problems prohibit the use of these medications.

These medicines can affect blood pressure, blood sugar levels, cause heartburn and mood changes, and affect the blood supply to the artery of bone in the leg very rarely. This is why we do not recommend long term use.

You will have a hearing test again in a week or so to check your progress. Notification of the MRI date (which will be for 1-4 weeks time) will come in the mail or by phone from the radiology service. After the scan, a further audiogram and review appointment will be made so that the results can be discussed. If the MRI scan is clear there should be no further need for clinic appointments.

If the hearing loss doesn't improve you may wish to consider trial of hearing aids to assist you with your daily communication. Any of the numerous audiology providers in town can assist you with this if you choose.

This can be a conventional aid vs a Bone Anchored Hearing Aid (BAHA). We recommend a trial of aid prior to any purchase to ensure it is useful. An audiology list of providers can be provided at reception.