

Idiopathic Sudden Sensorineural Hearing Loss

Idiopathic sudden sensorineural hearing loss (iSSNHL) refers to a sudden hearing loss of unknown cause with an onset of less than 72 hours. It typically affects only one side. It most commonly presents between the ages of 43 and 53 years with equal sex distribution. Some patients can also experience dizziness with iSSNHL, which can be present in up to 50% of patients.

The likelihood of hearing recovery has been reported to vary based on severity of hearing loss at the time of presentation. Those with milder forms of hearing loss have a higher chance of recovery. Approximately 1% of cases with sudden sensorineural hearing loss are due to another identifiable cause such as a benign tumor called a vestibular schwannoma or demyelinating disease, which can be detected on MRI.

iSSNHL is often accompanied by symptoms of ear fullness/pressure as well as tinnitus or ringing. A complete hearing test is needed for definitive diagnosis.

The current standard treatment for iSSNHL is a tapered course of oral corticosteroids. Studies have shown that the ideal window for steroid treatment is within 4 weeks of hearing loss onset.

Some patients cannot take oral steroids due to other medical reasons. In these cases, we can consider steroid injections into the middle ear. Studies have shown that these steroid injections can be just as effective as oral steroid treatment. These injections can be performed in the office and are repeated every 3-4 days. A total of 3 to 4 treatments are typically administered.

Other therapies for iSSNHL have been studied such as antiviral therapy, inhalation vasodilators, herbal remedies, and hyperbaric oxygen. However, adequately powered randomized clinical trials are lacking to support their efficacy.