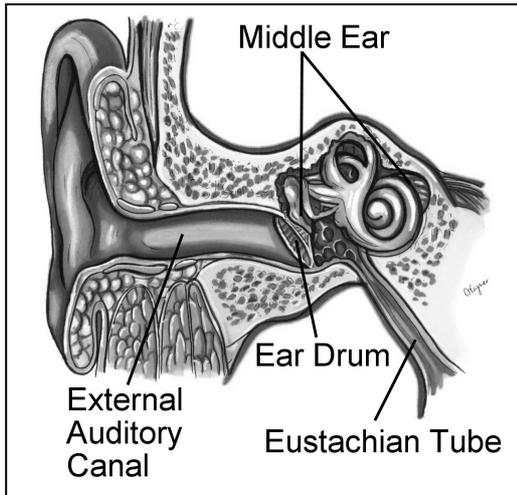


# Sudden sensorineural hearing loss



Sudden loss of hearing in the hearing nerve (sensorineural) is relatively uncommon (5-30 per 100,000 people per year). It is defined as a reduction in inner ear hearing over a period of hours to days. This may be associated with vertigo (dizziness) or tinnitus (ringing noise in the ears). It is diagnosed both by basic bedside tests your surgeon can do and by a formal hearing test performed by an audiologist. There are many theories about what causes the hearing loss. Some causes can be diagnosed with blood tests or imaging studies but often no cause is found.

The degree of hearing impairment can vary from mild to a complete hearing loss. Whatever the cause, you may suddenly notice that you have difficulty understanding people or the TV especially when there is background noise. The changes causing this take place in the *cochlea*, a cavity in the inner ear. This contains many tiny hairs, which convert sound vibrations into electrical impulses, which are interpreted by your brain. The hairs are damaged by inflammation, a lack of blood supply or infection, usually viral, and cannot be surgically regenerated. However if the problem is detected early enough (usually within 4 weeks) then treatment may reduce the degree of long-term damage to these hairs.

## HELPFUL INVESTIGATIONS

An audiogram can assess how bad the hearing loss is and whether one or both ears are affected. It can also track your hearing over time to see if treatment has been effective.

A MRI or CT will look at the structures of the ear, particularly the hearing nerve, and determine if your hearing loss is caused by a non-cancerous growth (rare).

Blood tests – some people will have blood test looking for infections that may cause hearing loss, such as syphilis.

## TREATMENT

If detected within a few weeks of the onset of hearing loss then a short course of tablet steroids (prednisolone) can reduce the severity of the long-term hearing loss. These are generally safe medications when used for short periods of time but some people may suffer side effects. Common side effects are, indigestion, reduced sleep ability if the tablet is taken at night, dizziness if doses are missed. As this medication is a form of a natural hormone that your body makes, your body will not make its own hormone during the time you are taking the steroid tablet. This means if you are taking the tablet for more than 14 days your surgeon may suggest reducing the dose slowly out of your body over a few days, to allow your body to recommence making its own version of this hormone.

## GENERAL INSTRUCTIONS FOR THE HEARING IMPAIRED

- Protect your ears from noise damage. Use ear plugs (ideally custom moulded available from an audiologist) and earmuffs (better sound protection).
- Position yourself to hear: face the person speaking to you.
- Turn off background noise: turn off the TV and choose quiet settings.

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- Ask others to speak clearly or repeat themselves if necessary.
- Watch for clues: watch the speaker;s lips, face and hands.



## HEARING AIDS

- IF your hearing does not return completely to normal then hearing aids can be very helpful in reducing the impact that the hearing loss has on your functioning. Ideally, obtain a hearing aid from a local audiologist that you can visit easily if you have problems with the aid. Australian hearing can provide a cost free hearing aid to pensioners. Better hearing Victoria ([www.betterhearing.org.au](http://www.betterhearing.org.au)) has some reconditioned aids for low income individuals.
- Assistive listening devices can link your hearing aid into the TV or telephone to help you.
- Do not wear hearing aids in the shower or while swimming.
- Keep hearing aid dry, clean, and away from chemicals, including hair care products.
- Cochlear implants may be considered for individuals whose hearing impairment is severe (eg cannot use the telephone despite a well fitted hearing aid).

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