

Sudden Sensorineural Hearing Loss (SSNHL)

What is Sudden Sensorineural Hearing Loss?

SSNHL is a loss of hearing of at least 30 decibels (dB) within a 72 hour period. It is a relatively rare disorder that affects about 66,000 people in the US each year. Most patients experience tinnitus (ringing or buzzing sounds) as well as feeling like their ear is “blocked”, “plugged”, “full”, or “muffled.” Some patients may experience dizziness (vertigo).

What causes SSNHL?

This type of hearing loss involves the inner ear and hearing nerves. SSNHL is not related to ear wax, fluid behind the ears, problems with the eardrum, or disruption of the bones of the middle ear. Only a formal hearing test (audiogram) can tell the difference. In most cases there is no clear explanation for the hearing loss. At times there is a lack of blood supply to the inner ear. Often it is a result of inflammation in the inner ear, which may be caused by a viral infection. Your doctor may recommend that you have a magnetic resonance imaging (MRI) scan of the ear to rule out other causes of one-sided hearing loss.

When should I seek medical attention?

It is important to seek medical attention as quickly as possible if you notice a sudden hearing loss. Treatment is most effective if it is started as soon as you experience the hearing loss.

Will my hearing come back?

About one third of patients will recover all of their hearing. Another third will have some or partial hearing improvement, and others will have no improvement, or restoration of their hearing loss. The more severe the initial hearing loss, the less likely that hearing will be restored. Follow up hearing tests will measure your response to treatment. If your hearing is not recovered a hearing aid might be recommended.

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How is SSNHL treated?

The most common treatments are oral steroids (prednisone). Alternatively, steroid liquid can be delivered through the ear drum by an ear, nose and throat doctor. This procedure is called, “intratympanic steroid injection.” At times the steroid injection is given if there is no improvement after completing a course of the oral steroid treatment. Both treatments may be given at the same time in more severe cases. Treatment for SSNHL will not necessarily improve your hearing. Some patients’ hearing will improve without any treatment.

Are there side effects to treatment?

Side effects vary depending upon which treatment is used. They may include increased anxiety, pain, dizziness, elevated blood sugar, elevated blood pressure, depression, or insomnia. Discuss possible side effects with your doctor.

What can I expect?

Sudden hearing loss can be frightening, and may result in embarrassment, frustration, anxiety, loneliness, social isolation, and depression. Individual or group counseling can be helpful. Follow up audiologic tests should be done within six months of initial diagnosis of SSNHL.