



Dr. Gilchrist

Sudden Sensorineal Hearing Loss (SSNHL) A Medical Emergency

Sudden loss of hearing due to an inner ear event is by no means unusual. It is important to suspect the diagnosis as soon as possible. Early treatment improves the chance of recovery. Treatment delayed by one, two or more weeks may doom the patient to permanent and possibly profound hearing loss in the affected ear.

Pointers that may lead the primary care or emergency room physician to suspect the diagnosis are as follows:

- Sudden hearing loss occurring over seconds, minutes or hours
- Associated tinnitus
- Associated dizziness
- An ear drum that can be at least partially visualized and is unremarkable
- A tuning fork placed over the forehead and the vertex tends to be heard better in the opposite ear, (the Weber test),
- Clinical testing of hearing suggests a loss in the suspect ear
- Pain or discomfort is generally absent

Early referral for audiology to confirm (or refute) the diagnosis can lead to treatment with high dosage steroids. We believe this improves the likelihood of recovery. If the patient is seen within the first day or two anti-viral drugs may be useful. Subsequent investigations may reveal underlying pathology although all too often the etiology remains obscure. Frequently the patients have been in relatively good health until the onset of symptoms. Critical evaluation of the ear drum should reduce erroneous diagnoses of otitis media. If in doubt about the diagnosis we suggest early referral.

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