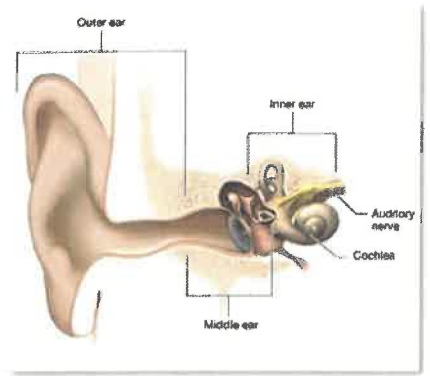


# Sudden Deafness

Sudden Deafness (SD), also known as Sudden Sensorineural Hearing Loss, is an unexplained, rapid loss of hearing. Experts estimate that SD strikes one person per 5,000 every year, typically adults in their 40s and 50s. The actual number of new cases of SD each year could be much higher because the condition often goes undiagnosed. Nine out of 10 people who experience SD typically only lose hearing in one ear. It is considered a medical emergency.



## How is SD diagnosed?

A doctor can determine if a person has experienced SD by conducting a hearing test. If a loss of 30 or more decibels (measure of sound) is discovered across three connected frequencies, SD is diagnosed. As an example, a hearing loss of 30 decibels would make conversational speech sound more like a whisper.

## What are the warning signs?

SD can happen all at once or over a period of several days. Many people notice it when they wake up in the morning. Others first notice it when they try to use the deafened ear, such as when making a phone call. Still others notice a loud “pop” just before their hearing disappears. People with SD often experience dizziness or a ringing in their ears, or both.

## What causes SD?

Although there are innumerable possible causes of SD, it is rare for a specific cause to be precisely identified. Only 10 to 15 percent of those with SD have an identifiable cause. Normally, diagnosis is based on the patient’s medical history.

Possible causes include:

- ◆ Infectious diseases
- ◆ Trauma (e.g. head injury)
- ◆ Autoimmune diseases
- ◆ Inner ear tumor (acoustic neuroma)
- ◆ Blood circulation problems
- ◆ Toxic causes (e.g. snake bites)
- ◆ Ototoxic drugs (harmful to ears)
- ◆ Neurologic diseases and disorders (e.g. Multiple Sclerosis)
- ◆ Disorders of the inner ear (e.g. Meniere’s disease)

## Are there treatment options?

People who experience SD should seek immediate medical attention. The critical issue with prognosis is catching the hearing loss quickly, typically within 48 hours of onset. Delaying the SD diagnosis and treatment may decrease the effectiveness of treatment.

Treatment options are available and typically based on whether or not a specific cause for the SD is identified.

The most common therapy for SD, especially for cases with an unknown origin, is treatment with corticosteroids, administered orally as a pill or directly to the ear via injection through the eardrum.

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Steroid treatments reduce inflammation, decrease swelling and help the body fight illness.

Additional treatments may be needed if an actual underlying cause is identified.

## Will I recover my hearing?

About half of people with SD will recover some or all of their hearing spontaneously, usually within one to two weeks from onset.

If you do not improve with treatment, an MRI is usually indicated to evaluate for an inner ear tumor on the affected side.

## Online Resources

The National Institute on Deafness and Other Communication Disorders (NIDCD) maintains a directory of organizations that can answer questions and provide printed or electronic information about SD.

Please visit [www.nidcd.nih.gov/directory](http://www.nidcd.nih.gov/directory) for more information