



ORIGINAL ARTICLE

Sudden Hearing Loss: National Survey in Spain[☆]



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Received 17 December 2014; accepted 25 March 2015

KEYWORDS

Sudden deafness;
Diagnostic criteria;
Treatment;
Survey

Abstract

Introduction: The objective of our study was to identify the diagnostic and therapeutic approaches in the different ENT Departments of Spain with respect to sudden deafness. We wanted to establish a basis to help to create a new nation-wide consensus, unifying treatment, diagnostic and follow-up criteria for this disease.

Methods: We carried out an anonymous Internet survey, addressing Spanish ENT doctors nationwide (n=2029), gathering in 33 questions different aspects about diagnostic criteria, additional tests, treatment procedures and prognostic factors in sudden deafness, according to the different protocols and experience of the participants in the survey.

Results: A total of 293 Spanish ENT doctors (14%) took part anonymously. In relation to diagnostic criteria, the most noteworthy was the requisite of a confirmed neurosensorial loss (91.1%) followed by "initiated in less than three days" (75%) and 3 consecutive frequencies affected (76.4%). More than half of the participants requested an MRI of the IAC/CPA (68.7%) and 88.2% used gadolinium in this test. The prognostic factor most frequently considered was delay in commencement of treatment onset (84.8%).

As far as treatment of primary cases, most of the responders agreed on the use of corticosteroids (99.7%). Oral administration was the most widely used (66%), followed by intravenous (29.6%) and intratympanic (1.4%) administration. Ninety-two percent had not had any major complications with systemic steroids. Intratympanic treatments were used by 70% of responders for rescue in failure.

[☆] Please cite this article as: Amarillo E, Hernández-García E, Herrera M, García Berrocal JR, García Arumí A, Durio E, et al. Sordera súbita: encuesta nacional en España. Acta Otorrinolaringol Esp. 2016;67:59–65.

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PALABRAS CLAVE

Sordera súbita;
Criterios
diagnósticos;
Tratamiento;
Encuesta

Conclusions: In Spain there is currently a significant disparity of concepts regarding the diagnosis of sudden deafness, and more agreement as to using steroids as their treatment. This highlights the need to implement measures to promote a better approach, which would be homogeneous and consensual, to this condition.

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Sordera súbita: encuesta nacional en España**Resumen**

Introducción: El objetivo de nuestro estudio es identificar las actitudes diagnósticas y terapéuticas que se llevan a cabo en los diferentes servicios de otorrinolaringología (tanto del ámbito privado como público) en España con respecto a la sordera súbita. Esto permitirá establecer una base que ayude a generar un nuevo consenso a nivel nacional, unificando criterios para el tratamiento, diagnóstico y seguimiento de esta patología.

Material y métodos: Se realizó una encuesta anónima por Internet, dirigida a otorrinolaringólogos españoles a nivel nacional (n=2.029 especialistas afiliados a la SEORL), recopilando en 33 preguntas diferentes aspectos en relación a los criterios diagnósticos, pruebas complementarias, pautas de tratamiento y factores pronósticos en la sordera súbita, según los diferentes protocolos instaurados y experiencia de los participantes en la encuesta.

Resultados: Participaron 293 otorrinolaringólogos españoles de forma anónima (14% del total). Respecto a criterios diagnósticos, destaca el requerimiento de confirmar una hipoacusia neurosensorial (91,1%), de inicio en menos de tres días (75%) y afectación de tres frecuencias consecutivas (76,4%). Más de la mitad de los participantes solicitan resonancia magnética de CAI/APC (68,7%), y el 88,2% utiliza contraste con gadolinio en esta prueba. El factor pronóstico que se consideró con mayor frecuencia en la encuesta fue la demora hasta inicio del tratamiento con un 84,8%. Respecto al tratamiento empleado en casos primarios, la gran mayoría de los encuestados (99,7%) coinciden en la administración de corticoides. La vía oral es la más utilizada (66%), seguida de la administración intravenosa (29,6%), e intratimpánica (1,4%). El 92% no han tenido complicaciones mayores con el tratamiento corticoide sistémico. La vía intratimpánica es empleada en un 70% como rescate en fracasos.

Conclusiones: En España, existe actualmente una importante disparidad en el uso de los medios diagnósticos en la sordera súbita y un mayor acuerdo en el uso de corticoides como su tratamiento. Sería necesario implementar medidas que permitan un mejor abordaje, homogéneo y consensuado de esta patología.

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Introduction

The consensus on sudden idiopathic hearing loss (SIHL) which was published in 2011,¹ considered as such sensorineural or perceptive hearing loss of sudden onset, in under 72 h, with a loss of more than 30 dB, on at least three consecutive frequencies of tonal audiometry, with no other previous ear related history. This concept is shared by other consensuses and recently published clinical guidelines, such as the American clinical practice guidelines,² or the recently updated German guidelines.³

However, not all authors share this notion, which results in differences in epidemiology, and not everywhere is there the same knowledge or dissemination of knowledge between healthcare professionals and the general population.^{1,4} Thus, in Japan, which has a multicentre database with more

than 4753 patients with SIHL, according to a study published in 2014,⁵ the incidence of this disorder affects 60 patients per 100 000 inhabitants per year. Yet, this incidence is lower in the United States, where there are an estimated 27 cases per 100 000 inhabitants per year, although this can reach 77 cases per 100 000 inhabitants in patients aged over 65.⁶ To date there is no data with respect to Spain.

These differences are even more marked in terms of diagnostic approach and therapeutic protocol. This has been well reflected in various surveys published on the most routine medical guidelines between ENT specialists of various countries such as the United Kingdom⁷ and the United States.⁸ As a response to the most accepted aetiology, which is the immunologic theory,⁹ although corticosteroids are the most accepted therapy, the administration route, type of corticosteroid, dose and pattern of

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