

Sudden Hearing Loss (SSNHL)

NICE NG98 (2018) | NICE QS185 (2019) | ENT UK

■ 999: Possible Stroke or Serious Cause

- Sudden hearing loss with facial weakness, slurred speech, or arm weakness: possible stroke. Use FAST.
- Bilateral sudden hearing loss is rare and requires immediate specialist assessment: call 999 if also dizzy or with neurological symptoms
- Sudden hearing loss following a head injury

■ URGENT: Same-Day ENT or GP Referral

- Any sudden hearing loss (over 3 days or less) within the past 30 days: seen by ENT within 24 hours (NICE NG98)
- Sudden loss more than 30 days ago: urgent ENT referral, seen within 2 weeks
- No improvement despite attempted wax treatment: do not continue. Refer same day.
- Sudden loss with tinnitus, aural fullness, or dizziness: refer same day
- Vesicles in or around the ear with facial weakness or hearing loss: possible Ramsay Hunt syndrome. Same-day assessment required.
- Do NOT offer further ear drops and a review appointment: this can close the 72-hour steroid window.

SUDDEN: Quick Assessment Framework

S	Sudden onset?	Developed over 3 days or less, or noticed on waking? Sudden onset defines this emergency regardless of severity.
U	Unilateral?	One ear only? Treat as SSNHL until specialist assessment proves otherwise. Bilateral sudden loss is rare and requires immediate assessment.
D	Days since onset?	Within 30 days: ENT within 24 hours. Over 30 days: urgent ENT within 2 weeks. Refer today either way.
D	Discharge or pain?	No pain, no discharge, no response to drops: points away from wax or infection. Refer, do not treat.
E	ENT now, not next week	Steroids within 72 hours give the best recovery chance. Beyond 2 weeks: unlikely to help.
N	Neurological symptoms?	Facial weakness, slurred speech, arm weakness, double vision, difficulty swallowing, or severe vertigo with sudden hearing loss: call 999.

✓ EAR DROPS ARE APPROPRIATE ONLY IF...

- Wax is visible and is clearly the cause of gradual hearing reduction
- Hearing loss developed gradually during a cold, with no sudden onset and no tinnitus
- Both ears are affected symmetrically with a clear conductive explanation
- If any doubt exists: refer rather than treat

Treatment window: Steroids are most effective when started as early as possible, ideally within 72 hours of onset. Prompt ENT assessment is therefore critical: the pharmacist's role is to recognise the emergency and get the patient seen the same day.