METHODS

This project is embedded in the SeaSHeL national prospective cohort study (Mandavia et al. 2020) 5. Patients were recruited from 76 NHS sites in England and Wales.

Participants completed the Hearing Handicap Inventory for Adults/Elderly (HHIA/HHIE), depending on their age, and the Health Utilities Index Mark 3 (HUI-3). Both questionnaires were filled out when they were first seen by the ENT services and at a follow-up date.

RESULTS

HHIA group (<65 years)

At the initial presentation 81% of patients had some level of hearing handicap, and this decreased to 58% at follow-up. The majority (43%) reported significant/severe handicap during the first visit but at follow-up most patients had no hearing handicap (43%).

The change in questionnaire score was found to be statistically significant (p<0.05).

HHIE group (>65 years)

Initially 75% of patients had some level of handicap, and this decreased to 63% at follow-up.

The mean coefficient score increased from 0.73 to 0.86 (range: 0-1) in the two visits. This was found to be statistically significant (p<0.05).

CONCLUSIONS

- SSNHL has a negative impact on patients’ QoL, in line with similar studies 2 3 4
- A significant improvement was recorded in patients under 65
- Due to limitations like treatment not included, COVID-19 and small sample size, more research on the topic is required in the future