Vestibular schwannoma hearing loss

- Pathogenic Variants and Allele Loss of the NF2 and LZTR1 Gene in Sporadic Vestibular Schwannoma
- Unmasking vestibular schwannoma: A series of unusual cases
- High de novo mutation rate in Iranian NF2-related schwannomatosis patients with a report of a novel NF2 mutation
- Temporal Bone Magnetic Resonance Imaging in Sudden Sensorineural Hearing Loss: Low Frequency Versus Other Types
- Inner Ear Signal Abnormalities of Adjacent Intracranial Lipochoristoma
- Correlating audiological results with location of intracochlear schwannoma assessed by routine and Hydrops MRI
- Brain structural alterations in vestibular schwannoma beyond tinnitus and hearing loss
- A small vestibular schwannoma with preoperative facial palsy treated via retrolabyrinthine approach

The hearing loss associated with vestibular schwannoma can be gradual or sudden and can range from mild to severe. In some cases, it may also be accompanied by tinnitus (ringing in the ears) or a feeling of fullness in the affected ear. The severity of hearing loss may depend on the size and location of the tumor, as well as the length of time it has been present.

A progressive decline in unilateral hearing is the most common symptom that leads to the diagnosis of a vestibular schwannoma.

The tumor can produce hearing loss through either direct progressive injury to the cochlear nerve (slowly progressive sensorineural hearing loss) or interruption of cochlear blood supply (sudden and fluctuating hearing losses).

A significant number of individuals with vestibular schwannomas have a reduction in speech discrimination disproportionate to the reduction in the hearing threshold (pure-tone average). This is consistent with direct injury to the cranial nerve. However, many patients with smaller vestibular schwannomas have normal or near-normal hearing based on speech discrimination scores. There is no strict relationship between the size of the tumor and the quality of the residual hearing. Hearing loss associated with vestibular schwannoma can be sudden or fluctuating in 5–15% of patients. Such hearing loss, usually referred to as “sudden deafness”, may improve spontaneously or in response to corticosteroid therapy.

Three to five percent of patients with vestibular schwannoma have normal hearing at the time of diagnosis.