

ABSTRACT**PROFILE OF CORTICOSTEROID USE IN SUDDEN
SENSORINEURAL HEARING LOSS (SSNHL) PATIENTS
WITH DIABETES MELLITUS****(Study at Otorhinolaryngology Head and Neck Surgery Clinic
of Dr. Soetomo Hospital, Surabaya)**

Dyoko Gumilang Sudibyo

SSNHL is a condition of decreased sensitivity and hearing threshold of more than 30 dB which occurs in three consecutive audiometric frequencies and lasts for 72 hours or less. The main therapy is corticosteroids. However, corticosteroids have a systemic effect of increased blood sugar levels. The purpose of this study is to analyze the profile of corticosteroid use in SSNHL patients with diabetes mellitus (a type of drug, route of use, dosage, frequency of use, duration of administration, and the tapering off pattern) and to analyze the effectiveness of corticosteroid therapy in patients. This research is an observational study using retrospective data, which is analyzing therapeutic data patterns of SSNHL patients with diabetes mellitus in the Medical Record of Dr. Soetomo Hospital, Surabaya with minimum sampel is 30 during the period of 1 January 2013 to 31 December 2019 (7 years).

Methylprednisolone is the most commonly used in oral and intra-tympanic routes. The maximum oral dose is 48 mg/day with a frequency of once a day for 2-6 weeks. The tapering off pattern of methylprednisolone which is often used starts from 48 mg/day and the dose is reduced by 8 mg every 3 days. Intra tympanic dose is 2-3 times a week for 2 weeks (62.5 mg/mL). The maximum dose of prednisone is 60 mg/day. All patients had an average improved hearing threshold of 9.8 dB. There was only a patient (3%) who completely recovered using oral and intra-tympanic methylprednisolone therapy.

Keywords : Sudden Sensorineural Hearing Loss, Diabetes Mellitus, Corticosteroid, Methylprednisolone, Prednisone