SACIG SINGLE-SIDED DEAFNESS & COCHLEAR IMPLANTATION GUIDELINES: A SUMMARY

BENEFITS OF CI AS TREATMENT OPTION FOR SSD:

- Restoring access to binaural cues imperative for speech perception in noise
- Restoring access to binaural cues that underpin sound localization which reduces difficulty with identifying the location of sound sources
- Improved hearing-specific quality of life
- Improvements on health-related quality of life as measured by the Health Utilities Index Mark 3
- Reduced difficulty in navigating everyday environments
- Tinnitus relief
- Safe and effective treatment for SSD
- The abnormal auditory and maladaptive cross-modal reorganization of the central auditory system, caused by acquired unilateral deafness can be reversed following cochlear implantation
- Evidence of daily use of the device also proves the functional success of cochlear implant treatment for individuals with SSD

IMPORTANT MEDICAL CONSIDERATIONS:

 Performance of MRI with contrast & High Resolution CT scan is the single most important examination due to the high incidence of congenital abnormalities.

IMPORTANT AUDIOLOGICAL CONSIDERATIONS:

- Different treatment options available for SSD: Hearing aid fitting, CROS-fitting, Bone-anchored hearing aids, Cochlear Implants & no treatment.
- Patient should be trial fitted with all possible treatment options to determine the best treatment option.
- Assess: Speech understanding in quiet; Speech understanding in noise; Sound localization; Quality of life (QoL); Tinnitus reduction.
- Both subjective (questionnaires) & objective (audiological testing) should be performed.

IMPORTANT AUDITORY REHABILITATION (AR) CONSIDERATIONS:

- Benefits of AR in adults & children: improvements in speech perception in quiet & noise; speech perception over distances; sound localization; awareness of environmental sounds; music perception & overall quality of life.
- Time required to reach optimal outcomes: Patients with SSD should receive up to 12 months of audiological rehabilitation before optimal outcomes can be measured. This aspect is important to cover in counseling of patients with SSD and the parents of children with SSD