Title STAPRISH: A randomised controlled trial of STeroid Administration Routes For Idiopathic Sudden sensorineural Hearing loss Primary Objectives: To establish the relative effects of oral, intratympanic, or combined oral and intratympanic steroids on hearing recovery in Idiopathic sudden sensorineural hearing loss (ISSNHL), when used as first line management. Secondry Objectives: To complete a health economic assessment of the different routes of steroid administration. To use participant submitted data to explore the trajectory to hearing recovery. Economic Aims and Objectives: To is the steriod as the first line of treatment for ISSNHL. Exploratory Objectives To improve the early Identification of ISSNHL in primary care. A pragmatic, multicentre, assessor-blinded, parallel, three-arm intervention, superiority, randomised controlled trial (1:11) with an internal pilot. Participant Population/ Sample Size and Sutting Inclusion Criteria Adults aged 18 years or over Diagnosis of new-onset ISSNHL sensorineural hearing loss of 30 decibels (dBHL) or greater occurring within a 3-day period and including 3 contiguous pure-tone frequencies (out of 0.5, 1.0, 2.0, 4.0 kilohertz (kHz)) confirmed with a pure tone audiogram. Onest of hearing loss will for weeks prior to randomisation English spoken as a first or second language Exclusion Criteria Identified cause for hearing loss (not idiopathic) e.g. Meniere's Bilateral ISSNHL		
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Interventions	 Oral steroid (Prednisolone) 1mg/Kg/day up to 60mg/day for 7 days; Or
	 Intratympanic steroid (Dexamethasone) three intratympanic injections 3.3mg/ml or 3.8mg/ml spaced 7±2 days apart; Or
	• Combined oral (Prednisolone) and intratympanic (Dexamethasone) steroid as described above, with the first intratympanic injection occurring within four days of starting oral steroids.
	All analysis will have the following two key group comparisons
	\circ intratympanic steroid versus oral steroid
	\circ combination oral and intratympanic steroids versus oral steroid
	Primary Outcome
	• The absolute improvement in pure tone audiogram average at 12-weeks following randomisation (calculated at 0.5, 1.0, 2.0 and 4.0 Kilohertz (kHz)
	Secondary Outcomes (all at 6 and 12 weeks from randomisation unless stated)
	Functional hearing:
	 Hearing related to speech: using The Speech, Spatial and Qualities of hearing scale (SSQ)
	 Absolute improvement in hearing threshold at six weeks (calculated at 0.5, 1.0, 2.0, 4.0 kHz)
	 Actual hearing thresholds at six and twelve weeks (calculated at 0.5, 1.0, 2.0, 4.0 kHz).
	\circ High frequency hearing threshold across 4.0, 6.0 and 8.0 kHz
Outcome Measures	 Recovery of speech perception: using Arthur Boothroyd (AB) word lists scored by phoneme
	 Extent of hearing recovery: using an established classification of recovery
	• Associated symptoms: dizziness and tinnitus (Vestibular Rehabilitation Benefit Questionnaire & Tinnitus Functional Index)
	Adverse Events
	Optional
	 Weekly online home hearing tests (speech and pure tone thresholds)
	Health Economic Assessment
	Health Utility Index 3 ICE non CABability measure for Adults
	 ICEpop CAPability measure for Adults Resource usage