



Figure 2: Pure tone audiometry after 3 weeks, showing hearing within normal limits.

CONCLUSION

Our patient did not presented with hearing loss or any other symptom of inner ear involvement like giddiness or tinnitus. Etiopathogenesis of sensorineural hearing loss in our case is still unclear as we could not locate any etiology though patient gave history of trauma. The most probable cause in our case is concussion and oedema of inner ear mainly cochlea. Further it also emphasizes the importance of thorough clinical examination including tuning fork tests in all cases of trauma as the patient presented only with blocking sensation in right earbut was diagnosed on the basis of history, tuning fork test and pure tone audiometry. Treatment with oral, intravenous and intratympanic steroids reverted his hearing back to normal and the patient is on follow up till now.

Since this is a single case report, we will have to wait for further research in this area.

REFERENCES

1. Segal S, Eviatar E, Berenholz L, Kessler A, Shlamkovitch N. Dynamics of sensorineural hearing loss after head trauma. *OtolNeurotol* 2002; 23: 312-5.
2. Grove W.E, Skull fractures involving the ear. *Laryngoscope* 1939; 69: 833-870.
3. Uffenorde W: Histologishe Befunde. *Beiter Z AnatphysiolPatholTherapOhrens* 1924; 21: 282-285
4. Gurdijan ES: Studies on Acute cranial and intracranial injuries. *AnnSurg* 1933 : 327-367.
5. Podoshin L., Fradis M: Hearing loss after Head Injury. *Archotolaryngol* 1975; 101: 15- 18
6. M.R.Abd AL-HADY .O Shehata et al. *The Journal of Laryngology and Otology* Vol 104 December 1990: 927-936
7. Harold F.Schuknecht and Roderick C.Davison,, Deafness and Vertigo from Head Injury, *AMA Archives of Otolaryngology* 1956: 513-528
8. Ulug T, Ulubil SA. Contralateral labyrinthine concussion in temporal bone fractures. *J Otolaryngol* 2006; 35: 380-3.
9. Wilson WR, Byl FM, Laird N. 1980. The efficacy of steroids in the treatment of idiopathic sudden hearing loss. A double-blind clinical study. *Arch Otolaryngol* 106: 772-6
10. Wei BP, Muribu S, O’Leary S. Steroids for idiopathic sudden sensorineural hearing loss. *Cochrane Database Syst Rev.* Jan 25 2006; CD003998.
11. Ho HG, Lin HC, Shu MT, Yang CC, Tsai HT. Effectiveness of intratympanic dexamethasone injection in sudden deafness patients as salvage treatment. *Laryngoscope.* Jul 2004; 114(7): 1184-9.
12. Gouveris H, Selivanova O, Mann W. Intratympanic dexamethasone with hyaluronic acid in the treatment of idiopathic sudden sensorineural hearing loss after failure of intravenous steroid and vasoactive therapy. *EurArchOtolaryngol.* Feb 2005; 262(2): 131-4.
13. Rauch SD, Halpin CF, Antonelli PJ, Babu S, Carey JP, et al. 2011. Oral vs intratympanic corticosteroid therapy for idiopathic sudden sensorineural hearing loss: a randomized trial. *JAMA : the journal of the American Medical Association* 305: 2071-9
14. Battaglia A, Burchette R, Cueva R. 2008. Combination therapy (intratympanic dexamethasone + high-dose prednisone taper) for the treatment of idiopathic sudden sensorineural hearing loss. *Otology & neurotology : official publication of the American Otological Society, American Neurotology Society [and] European Academy of Otolology and Neurotology* 29: 453-60