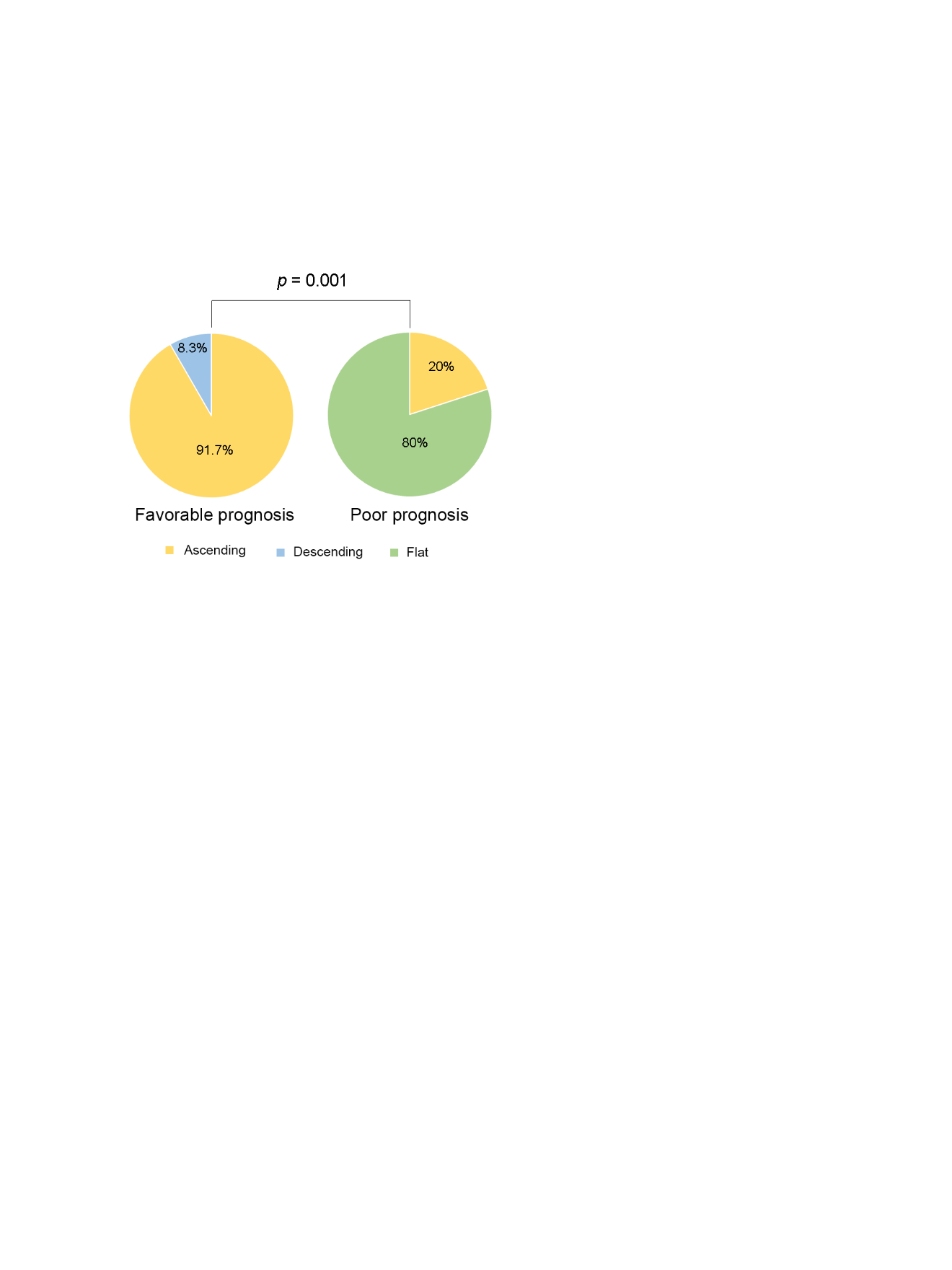
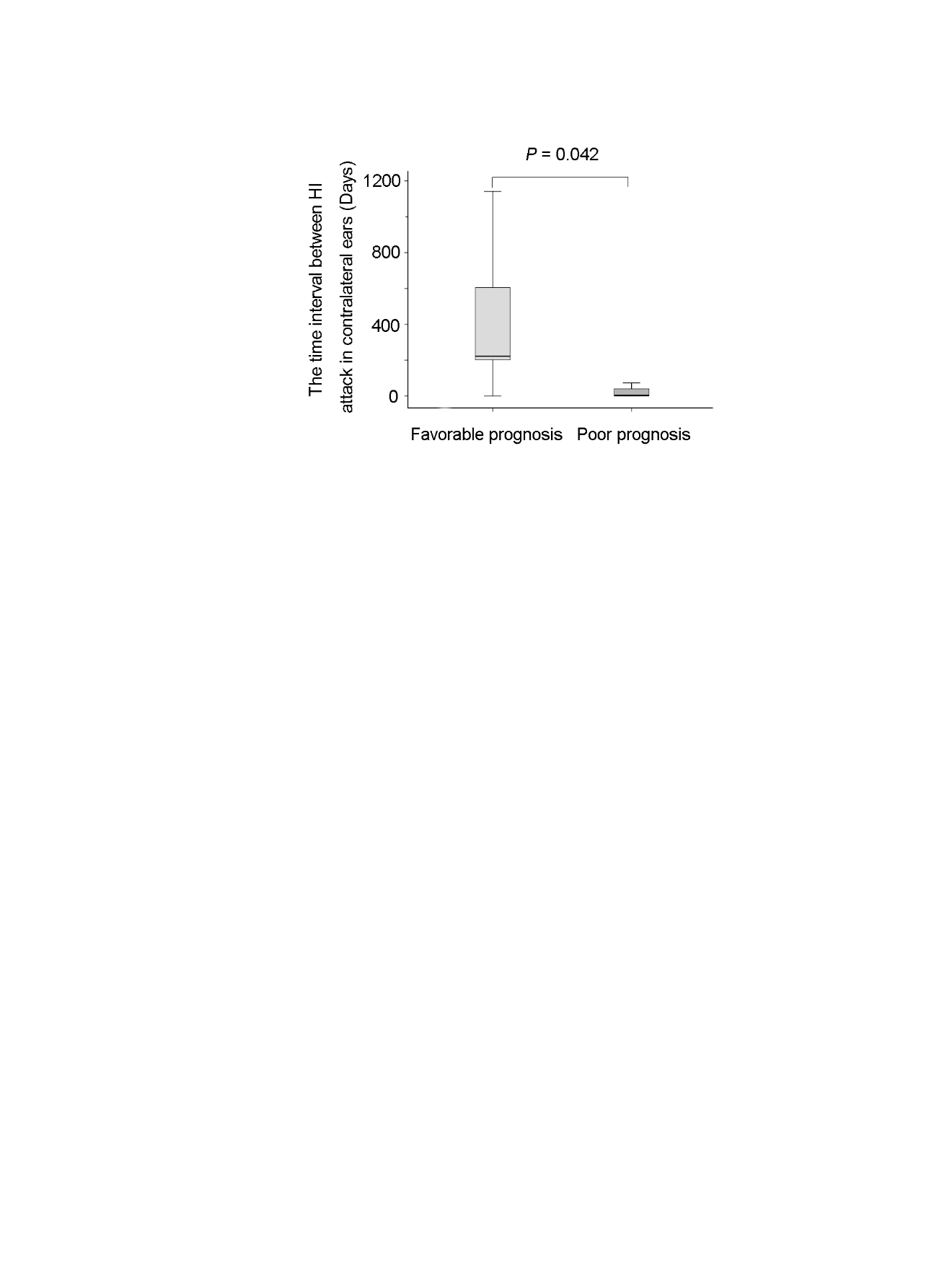
|  |  |
| --- | --- |
| **Table S1.** Patient characteristics (*n* = 11, a total of 22 ears) | |
| **Variable** | **Mean ± SD (range) or *n* (%)** |
| Age, years | 40.6 ± 16.5 (19–75) |
| Gender |  |
| Male | 4 (36%) |
| Female | 7 (64%) |
| Pretreatment hearing grade |  |
| Average threshold value ≤ 25 dB HL | 7 (32%) |
| Average threshold value 26–45 dB HL | 7 (32%) |
| Average threshold value 46–75 dB HL | 6 (27%) |
| Average threshold value 76–90 dB HL | 2 (9%) |
| Average threshold value > 90 dB HL | 0 (0%) |
| Pattern of HI |  |
| Ascending (250, 500, 1000, and 2000 Hz) | 13 (59%) |
| Descending (4000 and 8000 Hz) | 1 (4.5%) |
| Flat | 8 (36.4%) |
| Associated symptoms |  |
| Tinnitus | 18 (82%) |
| Aural fullness | 12 (54.5%) |
| Dizziness | 18 (82%) |
| Meeting the diagnostic criteria for bilateral MD |  |
| Yes | 10 (45.5%) |
| No | 12 (54.5%) |
| Treatment |  |
| Without treatment | 1 (4.5%) |
| Oral steroid | 17 (77.3%) |
| Oral steroid + IT | 4 (18.2%) |
| Response to steroid treatment |  |
| Response; time to response, days | 16 (72.7%); 8.9 ± 10.3 (2–48) |
| No response | 2 (9.1%) |
| Deterioration | 4 (18.2%) |
| Level of hearing recovery |  |
| CR | 12 (54.5%) |
| PR | 2 (9.1%) |
| SI | 2 (9.1%) |
| NI | 4 (18.2%) |
| NS | 2 (9.1%) |
| Duration of follow-up, months | 30.6 ± 31.4 (2–101) |
| Time interval between attacks in both ears, days | 278 ± 377.1 (0–1141) |
| Presence of other immune-related disease |  |
| Yes | 2 (palindromic rheumatism, SLE) |
| No | 9 |
| SD, standard deviation; HL, hearing loss; HI, hearing impairment; IT, intratympanic steroid injection; SLE, systemic lupus erythematosus | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Table S2.** Receiver operating characteristic analysis of the proposed predictors | | | | | |
| Variable | Sensitivity (%) | Specificity (%) | AUC | 95%CI | P-value |
| Age below 40 | 66.7 | 80.0 | .733 | .516-.951 | .065 |
| Presence of bilateral MD | 75.0 | 90.0 | .825 | .640-1.000 | .010 |
| Less pretreatment HI | 91.7 | 70.0 | .808 | .610-1.000 | .015 |
| No other immune-related disease | 100.0 | 40.0 | .700 | .467-.933 | .114 |
| Response to steroids | 100.0 | 60.0 | .800 | .595-1.000 | .018 |
| Ascending HI | 91.7 | 80.0 | .858 | .683-1.000 | .005 |
|  | | | | | |



**Figure S1.** The ascending pattern was predominant in the favorable-prognosis group, whereas the flat pattern was predominant in the poor-prognosis group, with the difference being significant. Thus, an ascending audiogram was associated with higher probability of recovery than was a flat audiogram. In only one case was the audiogram descending; hence, no significant difference was noted.



**Figure S2.** A longer time interval between HI attacks in contralateral ears is associated with a better outcome.