Some acoustic schwannoma has SSNHL as initial symptoms and CNS lesions were sometimes found incidentally in SSNHL patients. Until recently, ABR testing was considered the most sensitive modality for the detection of even small tumors, with detection rates of 95% to 100%. However, actually, sensitivity of ABR (determined interaural latency of wave V) detecting schwannoma in SSNHL patients was just 72.2% in our study. So it is insufficient to depend on ABR entirely to find the cause of hearing loss.

Recently, as a result of the increasing widespread use of MRI, more patients with acoustic schwannoma than expected have been detected among those with SSNHL. Because gadolinium contrast MRI is sensitive and specific for detection of acoustic schwannoma or other CNS lesion. Consequently, MRI would seem to be mandatory in all cases of SSNHL.