Table 54: Clinical evidence profile: First-line treatment – steroid (oral/IV) plus antiviral (oral/IV) versus steroid (oral/IV) [prednisolone oral or hydrocortisone IV]

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Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Steroid plus antiviral	Steroid	Relative (95% CI)	Absolute		•
PTA Final score (follow-up 6 weeks; Better indicated by lower values)												
1	randomised trials	- ,	no serious inconsistency	no serious indirectness	serious²	none	39	29	-	MD 6.4 higher (9 lower to 21.8 higher)	⊕OOO VERY LOW	CRITICAL
Recovery - within 10 dB of non-affected ear (follow-up 6 weeks)												
	randomised trials	- ,	no serious inconsistency		very serious²	none	15/39 (38.5%)	48.3%	RR 0.8 (0.46 to 1.38)	97 fewer per 1000 (from 261 fewer to 184 more)	⊕OOO VERY LOW	CRITICAL
Improvement (follow-up 6 weeks)												
	randomised trials	- ,	no serious inconsistency		very serious²	none	23/29 (79.3%)	77.4%	RR 1.02 (0.79 to 1.34)	15 more per 1000 (from 163 fewer to 263 more)	⊕OOO VERY LOW	CRITICAL
Mean speech discrimination (% words successfully discriminated) (follow-up 6 weeks; Better indicated by lower values)												

		- <i>J</i>		no serious indirectness	serious ²	none	39	29	-	MD 4.6 higher (15.51 lower to 24.71 higher)	⊕OOO VERY LOW	CRITICAL
Adverse events (follow-up 7 days)												
		- ,			very serious²	none	2/21 (9.5%)	27.3%	RR 0.35 (0.08 to 1.54)	177 fewer per 1000 (from 251 fewer to 147 more)	⊕OOO VERY LOW	IMPORTANT

¹ Downgraded by 1 increment if the majority of the evidence was at high risk of bias, and downgraded by 2 increments if the majority of the evidence was at very high risk of bias. ² Downgraded by 1 increment if the confidence interval crossed one MID or by 2 increments if the confidence interval crossed both MIDs.