Table 57: Clinical evidence profile: Steroid (IV) versus steroid (oral) [IV methylprednisolone followed by oral prednisolone versus oral prednisolone]

Table 37. Cimical evidence prome. Secrola (14) versus secrola (oral) [14 methylpream												-
Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	IV	Oral steroid	Relative (95% CI)	Absolute		
PTA improvement (follow-up 3 months; Better indicated by lower values)												
	randomised trials	- ,	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	29	31	-	MD 5.4 higher (12.35 lower to 23.15 higher)	⊕000 VERY LOW	CRITICAL
Recovery - Complete recovery: return to within 10 dB HL of the unaffected ear and recovery of WRS to within 5%-10% of the unaffected ear (follow-up 3 months)												
	randomised trials	,	no serious inconsistency	no serious indirectness	very serious <sup>2</sup>	none	7/29 (24.1%)		RR 1.25 (0.47 to 3.28)	48 more per 1000 (from 103 fewer to 442 more)	⊕000 VERY LOW	CRITICAL
Word recognition score % improvement (follow-up 3 months; Better indicated by lower values)												
	randomised trials	- ,	no serious inconsistency	no serious indirectness	serious <sup>2</sup>	none	29	31	-	MD 4.52 lower (25.69 lower to 16.65 higher)	⊕000 VERY LOW	CRITICAL
Adverse events or complications (follow-up 3 months)												
	randomised trials	serious <sup>1</sup>	no serious inconsistency	no serious indirectness	no serious imprecision	none	0/29 (0%)	0%	not pooled	not pooled	⊕⊕⊕O MODERATE	IMPORTANT

<sup>&</sup>lt;sup>1</sup> 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. <sup>2</sup> Downgraded by 1 increment if the confidence interval crossed one MID or by 2 increments if the confidence interval crossed both MIDs.