



## Acoustic neuroma quality of life: are we missing the point?

Robert W. Foley<sup>1</sup>

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Lodder et al. in a recent cross-sectional study in the UK identified no differences in QOL outcomes in 359 patients, at short- and long-term follow-up, regardless of their treatment strategy [1]. Lodder et al. neatly summarise the literature comparing QOL outcomes by treatment strategy, showcasing the fact that little to no difference has been found on a recurring basis. The authors highlight in the conclusion that the respondents to their study were members of the British Acoustic Neuroma Association, and also that the “mean QOL score in the present study was lower than that reported by previous authors”, and yet there is no proposed intervention for these patients.

Quality of life (QOL) has clearly become a very important ingredient in the management of acoustic neuroma patients. Acoustic neuroma patients have been demonstrated to have lower QOL scores [2, 3] and lower emotional intelligence scores [4] in comparison to age- and sex-matched controls. There has been a veritable explosion of papers examining QOL in acoustic neuroma patients, to compare treatment strategies, to predict those patients with poor outcomes or to provide data for the counselling of patients. Are we missing the vital message from these numerous QOL studies in acoustic neuroma populations? The message being that *there are significant numbers of acoustic neuroma patients with poor QOL outcomes*. We must address these patients on an individual basis.

The conversation needs to change from one of ‘which treatment strategy impacts QOL more?’, and move towards one in which we recognise the potential for a profound QOL impact in each individual patient. A systematic assessment of QOL must be undertaken at diagnosis and at regular intervals throughout a patient’s management, so that those patients with poor QOL outcomes can be directed towards the help they need.

The National Institute for Health and Care Excellence in the UK does not recommend quality-of-life assessment in all patients with acoustic neuroma. Although, the National UK Audit of Acoustic Neuroma does include a section for the PANQOL score, like many other databases this is currently incompletely reported. The recent guidelines from the Congress of Neurological Surgeons provide a comprehensive review of the literature and offer guidance on a large variety of issues in the management of acoustic neuroma patients [5]. While the authors include QOL as an outcome measure, it is not stated, simply, that quality-of-life assessment should be undertaken in all patients with a diagnosis of acoustic neuroma.

The point, therefore, is not that there is no difference in QOL comparing treatment strategies, but rather there are significant proportion of acoustic neuroma patients with poor outcomes and each patient’s quality of life must be actively assessed.

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### Compliance with ethical standards

**Conflict of interest** The author declares that he has no conflict of interest.

### References

1. Lodder WL, van der Laan BFAM., Lesser TH, Leong SC (2018) The impact of acoustic neuroma on long-term quality-of-life outcomes in the United Kingdom. *Eur Arch Oto-Rhino-Laryngol* 275:709–717
2. da Cruz MJ, Moffat DA, Hardy DG (2000) Postoperative quality of life in vestibular schwannoma patients measured by the SF36 Health Questionnaire. *Laryngoscope* 110:151–155
3. Shaffer BT, Cohen MS, Bigelow DC, Ruckenstein MJ (2010) Validation of a disease-specific quality-of-life instrument for acoustic neuroma: the Penn Acoustic Neuroma Quality-of-Life Scale. *Laryngoscope* 120:1646–1654
4. van Leeuwen BM, Borst JM, Putter H, Jansen JC, van der Mey AGL, Kaptein AA (2014) Emotional intelligence in association

✉ Robert W. Foley  
robert.foley.2@ucdconnect.ie

<sup>1</sup> Addenbrooke’s Hospital, Cambridge University Hospitals  
NHS Foundation Trust, Cambridge, UK

with quality of life in patients recently diagnosed with vestibular schwannoma. *Otol Neurotol* 35:1650–1657

5. Olson JJ, Kalkanis SN, Ryken TC (2018) Congress of neurological surgeons systematic review and evidence-based guidelines on the treatment of adults with vestibular schwannomas: executive summary. *Neurosurgery* 82:129–134