

**PATIENT
INFORMATION
LEAFLET**

Enlarged Vestibular Aqueduct — What You Need to Know

Understanding your child's diagnosis and how to protect hearing.

What is an Enlarged Vestibular Aqueduct (EVA)?

An enlarged vestibular aqueduct (EVA) means a small bony channel deep inside the ear is wider than usual. It is something your child is almost always born with — not caused by anything you did. It is the most common inner-ear difference found on scans in children with hearing loss. The wider channel makes the inner ear sensitive to pressure changes and knocks on the head, which can affect hearing and, in some children, balance.

Most important: there is a lot we can do. Protecting hearing, fitting hearing aids early, and avoiding head injury make a real difference — and most children do well with the right support.

► How EVA Is Managed — What to Expect

Approach	What it means for you	What to expect
Regular monitoring	Hearing checks every few months	Changes are picked up early so support can be adjusted
Hearing aids	Fitted early to support speech and learning	A real improvement in hearing and communication
Cochlear implant	Considered for more severe hearing loss	Works very well in children with EVA — excellent results
Balance physiotherapy	If balance or movement is affected	Helps balance and confidence improve over time

► Your Action Plan — What to Do and What to Avoid

✓ DO — Things that help	✗ DON'T — Things to avoid
● Wear a helmet for cycling, skating and skiing.	● Play heavy contact sports such as rugby or boxing.
● Keep all hearing-check and follow-up appointments.	● Scuba dive — and take care flying with a cold.
● Tell your clinic straight away if hearing suddenly drops.	● Blow the nose forcefully or strain heavily.
● Treat ear and sinus infections promptly.	● Ignore a sudden change in hearing.
● Ask about extra hearing support at school.	● Worry that EVA was anyone's fault — it was not.

► Tests and What They Show

Test	What it is	Why it is done
Hearing tests	Painless checks, suitable even for babies	Measure hearing and track any change over time
CT or MRI scan	A detailed picture of the inner ear	Shows the widened channel and confirms EVA
Blood tests	Thyroid and genetic tests	Check for Pendred syndrome and the underlying cause

Contact Your Clinic Urgently If:

- Hearing suddenly drops or gets worse.
- There has been a significant head injury.
- New severe dizziness or unsteadiness develops.
- Sudden balance problems make standing unsafe.

Your Outlook — The Good News

- Early support makes a real difference.
- Hearing aids help speech and learning.
- Cochlear implants give excellent results in severe loss.
- Most children do well with the right care and monitoring.