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Course: Audiologia
Curricular Unity: Audiologia Clínica II
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Edição 11/2019
16 may 2019



Introduction

A hearing loss not detected and corrected early may lead to troubling changes, compromising the overall learning process of the child. As such, immediate intervention in children with hearing loss has a higher probability of optimizing the language, literacy, academic performance and emotional and social development.

Objective

To identify early audiological alterations in children so they can be forwarded to a paediatrician or a family doctor.

Results

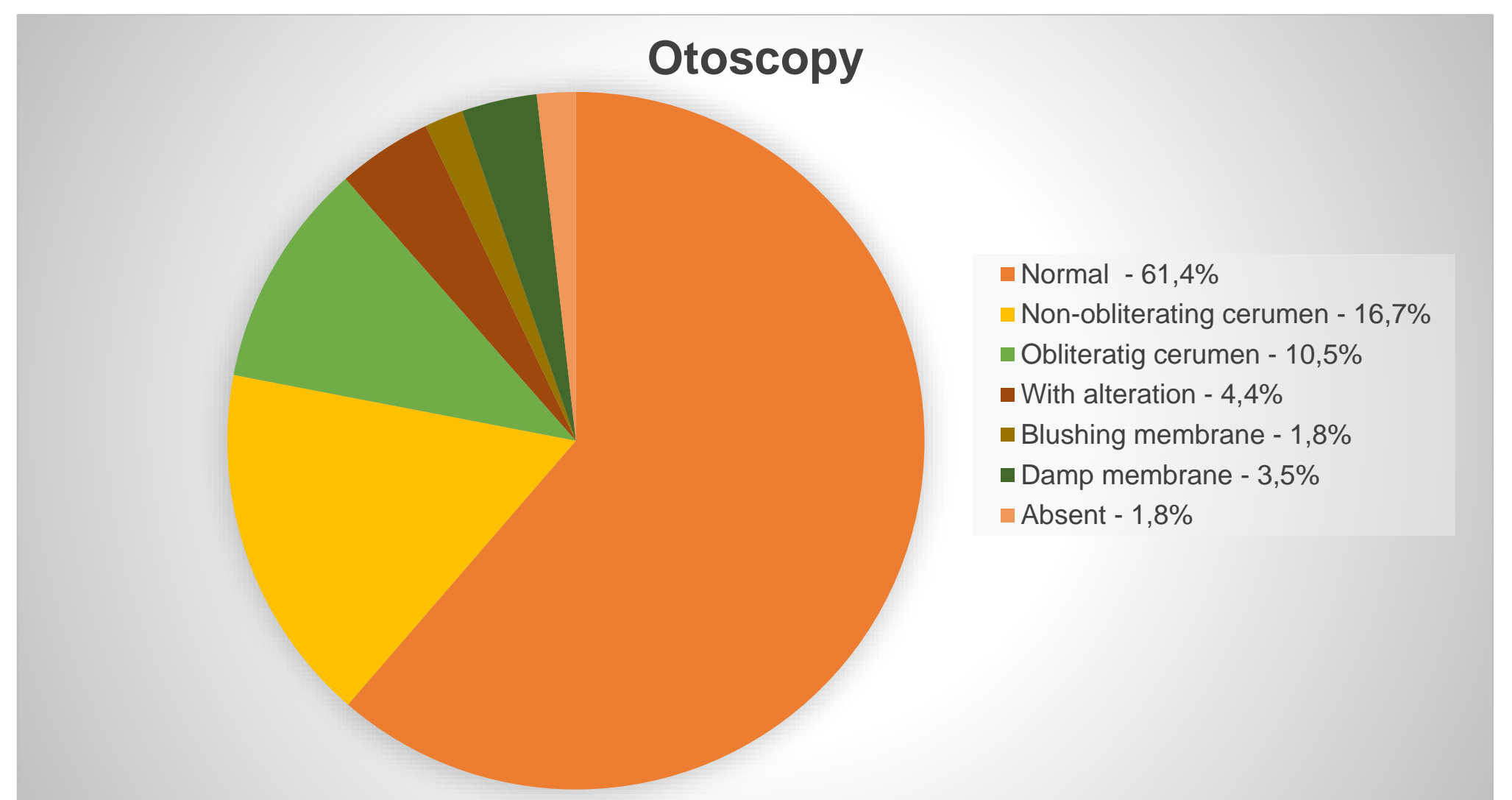
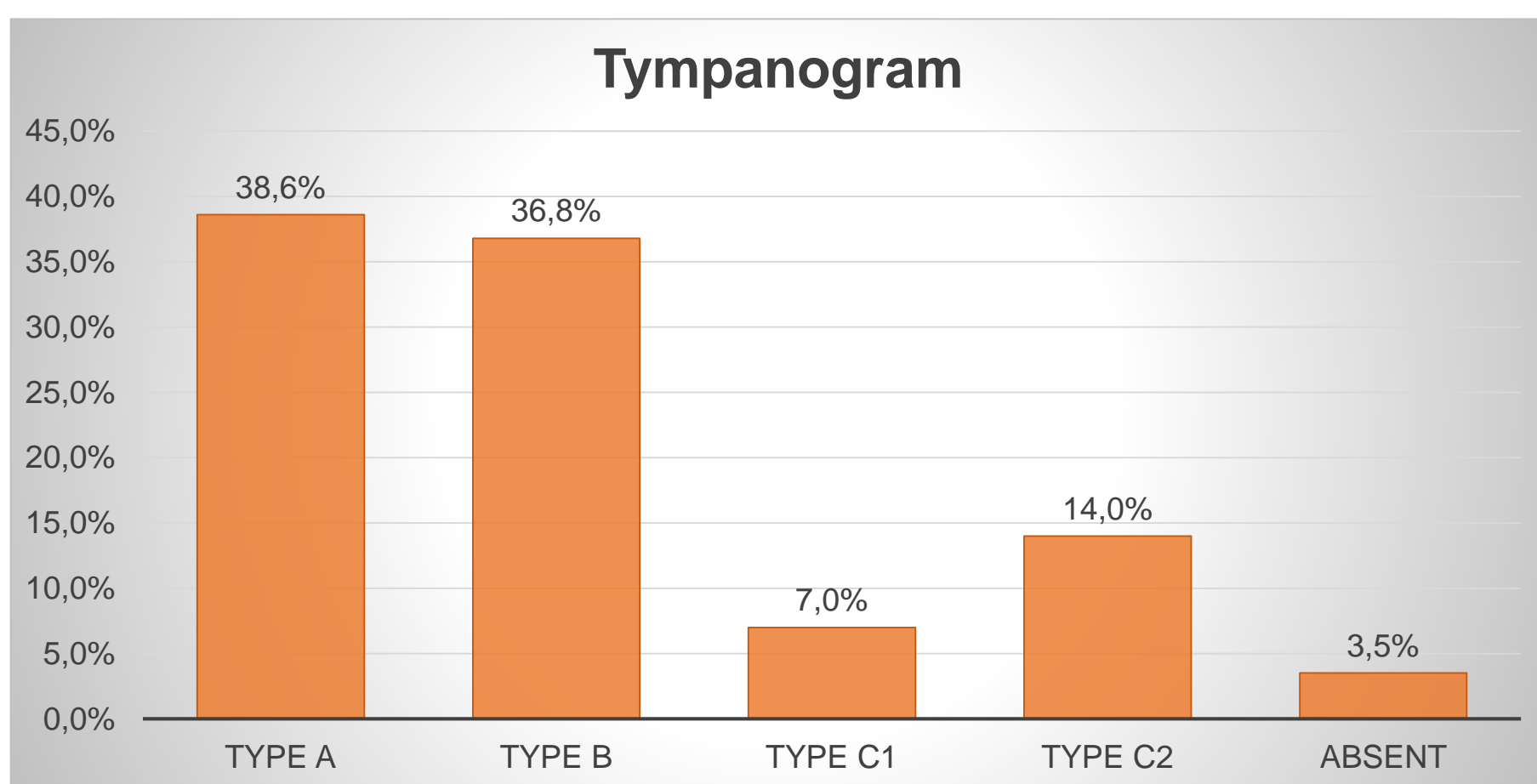
61,4% of children didn't have altered otoscopies. Relating to the audiograms, 52,6% were normal. The most common type of hearing loss was conduction hearing loss. In regards to the tympanograms, 38,6% were type A, 36,8% were type B, 7% type C1 and 14% type C2. Lastly, 24,6% of otoemissions were normal. A variant number of children did not make the exams above.

Methodology

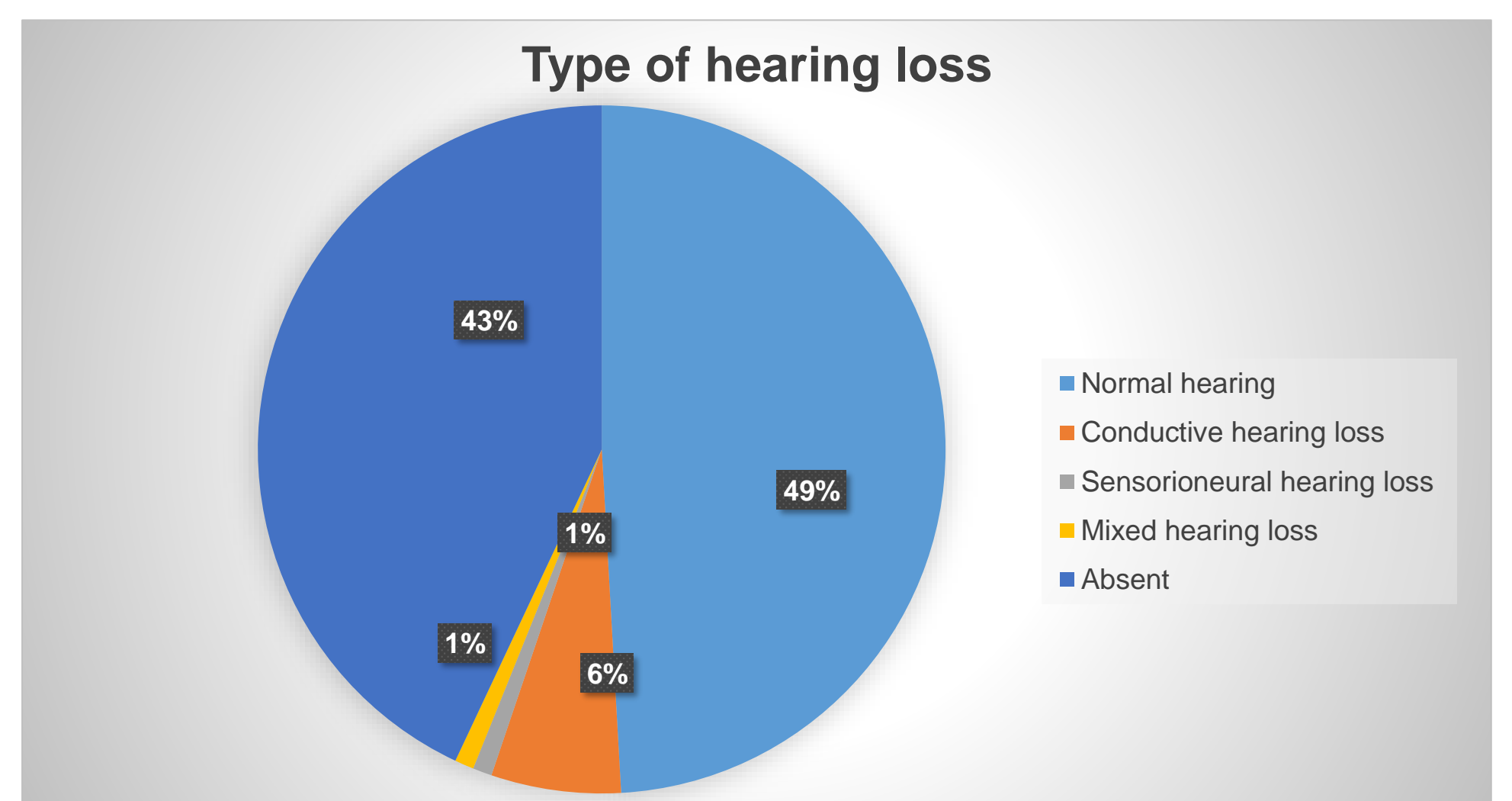
The audiological evaluation was made with data from 57 children with ages between 2 and 9 years-old, the majority of these being female (50,9%). The data was collected in ESTESC during the years of 2014 and 2015. The evaluation consisted of otoscopy; tympanogram; reflexes both ipsi and contralateral; tonal, vocal and free field audiogram; acoustic otoemissions by distortion products.

Results

Audiogram			
		Frequency	Percent
Valid	Normal Hearing	60	52,6
	Slight Degree	27	23,7
	Mild Degree Type I	4	3,5
	Total	91	79,8
Missing		23	20,2
Total		114	100



Otoacoustic Emissions			
		Frequency	Percent
Valid	Normal	28	24,6
	Changed	7	6,1
	Total	35	30,7
Missing		79	69,3
Total		114	100



Conclusion

With basis on the results gathered, 35,1% of children had normal audiological exams and 61,4% had alterations. 47,4% of children were recommended to do a new audiological evaluation to check the increase or regression of the alterations encountered.