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tante indicator to consider the differential diagnosis in patients with tinnitus and sensorial hearing loss. But always associated with a quality image evaluation, given the enormous possibility of other retrocochlear diseases.

9280. Possibilities of Intervention for the Treatment of Tinnitus: A Systematic Review

Cristian Valeria Melo Oliveira, Carlos Alberto Conceição Santana Júnior, Wanderson Santana Fraga, Scheila Farias de Paiva

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Introduction: Tinnitus, known in other countries as Acúfenos or “Tinnitus” (the latter is the most commonly used in English literature), is defined as an auditory sensation perceived by the individual that does not originate from the external environment, this definition is the most accepted among authors. There are several types of treatment for tinnitus, those aimed at reducing the intensity and those that aim to relieve the discomfort associated with this morbidity. **Objective:** Describe the types of treatments available for tinnitus in the literature. **Data Synthesis:** Systematic review of the literature with a bibliographic survey in the electronic databases LILACS, SciELO and Pubmed. Including Randomized Clinical Trial (RCT), prospective and retrospective study, experimental study and cohort study. For qualitative analysis was performed using the modified protocol Pithon et al (2015). To obtain the results, a simple random sample was used, whose sample error was 8% for crosses with a number greater than 900 articles. A total of 999 studies were found, with 17 being selected for analysis. **Conclusions:** It was concluded that the prevalence of tinnitus is increasing over the years, and the forms of treatment are selected according to each etiology, ranging from use of Individual Sound Amplification Apparatus (AASI), Medications, Acupuncture, Transcranial Magnetic Stimulation (rTMS), dental treatment for Temporomandibular Dysfunction (TMD), deactivation of myofascial trigger points, Vestibular Rehabilitation (RV) and Tinnitus Retraining Therapy (TRT) associated with Behavioral Cognitive Therapy (CBT) techniques.

Keywords: tinnitus; treatment; therapy; hearing; medicine.

9282. Pediatric Stroke: Electrophysiological and Behavioral Evaluation of Central Auditory Processing

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Introduction: Central auditory processing (CAP) refers to the efficiency and effectiveness with which the central nervous system uses auditory information and it may be altered in brain injuries, such as strokes. **Objective:** To analyze the findings of the electrophysiological and behavioral evaluations of CAP of children and adolescents diagnosed with stroke. **Methods:** Comparative cross-sectional study. The sample included individuals aged 7 to 18 years divided into two groups: study group (SG), composed of 19 children and adolescents with a diagnosis of stroke, and control group (CG), composed of 19 children and adolescents with typical development. The evaluation consisted of the following procedures: anamnesis, basic audiological evaluation, behavioral evaluation of the auditory processing disorder (Dichotic Digit Test–DD, Dichotic Consonant–vowel, Synthetic Sentence Identification/Pediatric Speech Intelligibility, Gaps in noise, Pitch Pattern Sequence, Masking Level Difference–MLD), and electrophysiological evaluation (P300 and MMN). **Results:** In the comparison between the

groups, a worse performance is observed for the SG in all the evaluated tests, behavioral and electrophysiological. In the behavioral evaluation of CAP, there was statistical difference for all tests, except for MLD and DD, binaural separation (on the left). In the electrophysiological evaluation, there was statistical difference in the latency of MMN and P300. No associations were found between the behavioral and electrophysiological findings and the location of the stroke and age group variables. **Conclusions:** Children and adolescents diagnosed with stroke present a worse performance in the electrophysiological and behavioral evaluations of CAP when compared to a control group.

Keywords: stroke; evoked potentials, auditory; auditory perceptual disorders.

9283. Domiciliary Follow-Up as a Prevention of Aggravation of Dysphagia

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Introduction: Dysphagia is a common swallowing disorder in patients with neurological diseases, like Parkinson's disease (PD); many require a follow-up as a prevention of the aggravation. Such diseases can seriously affect the patient, preventing him from going to health facilities. **Objectives:** This study aims to discuss the importance and effectiveness of home visits – which are usually performed by community health agents (CHA), linked to the Unified Health System – with focus on swallowing disorders in bedridden patients. **Resumed Report:** Theoretical observational study, following the assumptions of Primary Care, the prevalence of dysphagia in cases of neurological patients and the efficacy of exercises and proposed maneuvers. Complementing, we present a case report: patient M., 80 years old, diagnosed with PD. The speech-language pathology team at the health unit performed a domiciliary follow-up. The function of swallowing was evaluated and exercises (semi-occluded vocal tract and masticatory), maneuvers (chin tuck) and guidelines (cooking and consistency) were recommended. The group appropriated about the subject and reflected about this displacement of speech-language pathology in Primary Care. The guidelines and exercises recommended in the case of M. were beneficial to the patient, improving musculature and quality of swallowing; and to the family, who, through the guidelines, was able to offer new recipes to the patient. **Conclusions:** The study showed that home-based speech therapy with emphasis on dysphagia is an important measure for neurological patients and that CHA can be instructed to identify swallowing difficulties and needs during their visits.

Keywords: dysphagia; primary care; domiciliary follow-up.

9284. Audiological Findings of Wolfram Syndrome – Case Study

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Introduction: Wolfram syndrome is a genetic disorder which can be caused by autosomal recessive inheritance with mutations at the loci 4p16.1 (gene WFS1) or 4q22-24 (gene WFS2), or by non-Mendelian inheritance by mitochondrial DNA. The WFS1 gene encodes the wolfram protein, responsible for cell membrane integrity. The prevalence of the disease is estimated at 1:100000 to 1:770000. Clinical manifestations include diabetes mellitus and insipidus, op-