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to identify sensory disorders that lead to such impairment. This study aims to demonstrate the importance of speech therapy assessment in cases of food selectivity in the ASD, aiming to identify impairments in sensitivity in speech organs, in order to promote a more appropriate therapeutic planning and referrals.

10592 Audiometric profile of open office workers and use of headphones

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Introduction: WHO (2021) estimates that one in every four people will have hearing problems by 2050 and calls attention to the need to reduce environmental noise and control the use of sound devices by young people. The modernization of work environments that now have no partitions, the open office, has brought as a consequence the increase in environmental noise, hindering work

Objectives: To characterize the audiometric profile, investigate the auditory effects and headphone use of open office workers.

that requires attention and concentration.

Methods: A descriptive, retrospective study, carried out from the analysis of the audiometries of workers aged between 18 and 40 years who work in an open office.

Results: 1502 audiometries were analyzed: 97.6%; presented hearing thresholds within normal limits, analyzed by isolated frequency considering the normal limit of 20 dBHL decreases to 87.18% due to hearing loss at 6KHz and 8KHz; 5.5% and 8.3% notches on the right and left ears. 69.5% used earphones and of these 62.2% at work, an average usage time of 2.23 hours/day.

Conclusion: The studied population is adult/young workers exposed in environments with different noise levels and the use of headphones that can cause damage to health. Preventive strategies are important to minimize harmful auditory behaviors, including the promotion of "safe listening." There is a consensus among scholars about the needs for educational programs to promote hearing health.

Keywords: noise, hearing loss, worker's health, work environment.

10595 Sentence recognition in noise - age influence

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Introduction: Increasing age is a factor related to hearing loss. Elderly people often complain of difficulty in understanding speech in a noisy environment.

Objectives: to verify the influence of age on the Noise Sentence Recognition Index (NSRI), and elderly people with and without hearing loss.

Methods: It was a cross-sectional, observational and descriptive study. The sample consisted of individuals aged at least 60 years. All were evaluated through anamnesis, otoscopy, pure tone audiometry and NRSI survey, with sentences and noise presented in free field. Based on the correct answers, the NRSI was calculated. Data were analyzed quantitatively, by calculating frequencies and correlations (Pearson's correlation coefficient). The sample calculation showed that 125 individuals would be needed.

Results: The sample consisted of 130 elderly, 112 female (86.2%). The mean age was 71.07 \pm 6.25 years. Regarding hearing, most had sensorineural hearing loss (75.4%), mild, moderate or restricted to high frequencies. The IRSR ranged between 15.60% and 100% (mean 57.50 \pm 18.40). There was a correlation between NRSI and age (r= -0.19; p= 0.023*).

 $\begin{tabular}{l} \textbf{Conclusion:} & \textbf{It was found that increasing age was determinant for the lowest NRSI.} \end{tabular}$

Keywords: elderly, hearing, speech perception.

10606 Correlation between age, physical exercise and memory

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Introduction: Memory difficulties are a frequent complaint in the aging population, especially with increasing age. Recent studies indicate that the practice of physical exercise may be related to better health in general, including cognitive aspects.

Objective: To verify the existence of a correlation between age, time of physical exercise and memory.

Methods: This is a cross-sectional study. Individuals who performed physical activity in a community center were evaluated. They were evaluated through anamnesis and Rivermead Battery Memory Test (RBMT). Data were evaluated in a descriptive quantitative way.

Results: 49 subjects were evaluated, being 43 (87.8%) female. Age ranged between 55 and 82 years (mean 69.20 \pm 6.04). Schooling (in years of study) was between 0 and 16 years (mean 8.84 \pm 3.77) and the time of physical exercise practice was 7.53 \pm 6.6 years (between less than 1 year and 30 years). The mean score on the RBMT was 18.67 \pm 3.23 points. There was a significant correlation between age and RBMT score (r=-0.29, p=0.04*). The time of physical activity practice was not correlated with the RBMT score (r=0.80, p=0.58).

Conclusion: In the evaluated sample, the result of the memory test was influenced by age, with no relationship with the practice of physical activity.

Keywords: aging, memory, exercise.

10608 Neonatal Hearing Screening (NHS) - portrait of identification, diagnosis and treatment in times of pandemic in a reference hospital for COVID-19

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Introduction: NHS aims to early identify hearing loss in newborns in order to minimize its effects.

Objectives: Reorganize the flow of care during the pandemic in the areas of identification, diagnosis and treatment.

Methods: Since the beginning of the pandemic, identification was maintained with rotation among the audiologists. Diagnosis was resumed in May/20 and treatment in July/20. Infants who required diagnosis were scheduled to undergo a medical consultation, electrophysiological assessment and referral for treatment or discharge in a single day.

Results: The period from March/20 to June/21 was considered. A total of 4747 tests were performed, 26.2% using automatic auditory evoked potential, 387 retests and 57 referrals for diagnosis. Of these, 41 babies (72%) attended, 35 with a risk indicator for hearing loss (RIDA). 52% of the exams were normal and the babies with RIDA are kept under follow-up, the others were discharged. Conductive impairment was observed in 28.5%, 2.5% due to malformation. Hearing loss was detected in 19.5% of cases, 2.5% without intervention so far, 5% with discharge without intervention due to the reduced survival prognosis and 12% referred for regulation who returned after 1 month for testing and adaptation of hearing aids. Babies who did not attend were contacted and rescheduled.

Conclusion: The reorganization of the flow of care reduced as much as possible the number of babies coming to the hospital. Maintaining NHS, as well as resuming diagnosis and treatment, were essential for us to avoid interrupting the program.

Keywords: hearing, neonatal screening, hearing loss.