Assessment of impact of chronic otitis media with effusion

on auditory skills development using A to Z program in

preschool children

Sherif Guindi (1), Dalia Osman(2) and Somaya Mahmoud(3)

(1)Professor of Otolaryngology, Faculty of medicine, Fayoum University.

(2) Professor of Phoniatrics, Faculty of medicine, Cairo University.(3)Demonstrator of Phoniatrics, Faculty of medicine, Fayoum University.

Corresponding author: Prof. Dr. Sherif Guindi

E-mail address: <u>ssg03@fayoum.edu.eg</u>

Tel: 01223165487

Abstract

Key wards: Otitis media- Effusionauditory skills- preschool children-A to Z – hearing intervention program.

Background: otitis media is with effusion one of the commonest childhood diseases, and it gains the attention among phoniatricians and speech and language pathologists out of its impact on language development, and phonological awareness.

Objectives: the purpose of the study is to assess the impact of chronic otitis media with effusion on the auditory skills development in the preschool children using A to Z program.

Methods: This study was carried on 70 children, divided into 2 groups, subjected to the designed auditory assessment sheet, including: screening of language development and phonology, medical history of previous medications, and previous surgeries, recent audiological assessment, and tympanometry and auditory skills assessment and scoring using A to Z program.

Results: The main presenting symptom is multiple phonological errors. All of the auditory skills are affected with variant degrees; the least affected is auditory detection, and the mostly affected is psychoacoustic features. The phonological awareness, word discrimination, and identification are also highly affected. The factor of increasing distance in general, has a great impact on the patients' performance.

Conclusion: OME during early childhood has a strong impact on auditory skills development, mainly presenting as phonological awareness disorders, and learning disabilities. Early diagnosis, intervention and speech rehabilitation is highly recommended.

Introduction:

Hearing is one of the major senses, and it is important for auditory warning and communication. It is a conscious process of vibrations perceived as sounds. In order to do this, the appropriate signal must reach, and be processed in the higher parts of the brain (**Alberti, 2001**).

The middle ear in many circumstances is a remarkable organ where tympanic membrane (TM), ossicular chain and inner ear represent a highly complex sound pressure wave receiver, whose dynamics are unmatched by any other sensorv (Luers organ and Hüttenbrink, 2015). Bluestone said that, despite the great advances in public health, and medical care, chronic otitis media is still prevalent around the world. It is most common in developing countries, and in certain high risk populations in developed nations.

There has been much concern over studying the possible effects of middle ear disease on learning in general, and language development in particular. It is important to mention that, the number and duration of attacks, the severity of the hearing loss, and the distinction between unilateral and bilateral disease have a great role (Hall and Hill, 1990).

Patients and methods:

The aim of this study is to assess the effect of chronic otitis media with effusion with duration of 3 months or more on the development of auditory skills in preschool children aged from 3 to 6 years old, which will be reflected latterly on their language development, and their educational performance to highlight the importance of treatment, and resolving of this condition as early as possible. All of the 70 children, divided on 2 groups, were subjected to the designed auditory assessment sheet including, assessment of language development and phonology, history of previous medications and surgeries, recent audiological assessment, and auditory skills assessment and scoring at different distances.

Results:

 Table (1): Frequency of referral complaint among cases.

Variables	Medica	l history
(n=35)	Number	%
Type of complaint		
Phonological error and poor speech intelligibility	24	68.6%
Poor scholastic achievement	3	8.6%



Fig. (1) Frequency of referral complaint among cases

Phonological error

Mixed 🖬

Poor scholastic achievement

Tal	ble	(2)): (Com	parisons	of	the so	ound	local	ization	score	in	different	study	group)S.
_		<u> </u>				-									B - v - r	

Variables	Cases (1	n=35)	Control	(n=35)	P-value ^a	Sig.
	Mean	SD	Mean	SD		~-8.
Localization (0.5 m)	14	1.3	14.9	0.5	<0.001	HS
Localization (0.75 m)	13.5	2.6	14.9	0.5	0.002	HS
Localization (1.5 m)	<u>12.9</u>	<u>2.1</u>	14.9	0.5	<0.001	HS
P-value ^b (sig.)	0.01	(S)	1(N	S)		

This table illustrates that, there was statistically significant difference between study groups, as regards sound localization score at 0.5, 0.75, and 1.5 meter with **low** mean among cases. Also, there was statistically significant **decrease** in localization score with increasing distance among cases, but no statistical significance change in control group.



Fig. (2) Comparison of localization score at different distances among groups

Table (3):	Comparison	of "leve	el 3''	discrimination	of	speech	"Ling"	sounds
among stud	y groups.							

Level 3 speech discrimination	Case (n=3	es 35)	Cont (n=:	t rol 35)	p-value ^a	Sig.
	Mean	SD	Mean	SD		
/∫ /-/s/ & /s/-/s/						
0.75 m	3.5	0.6	4.7	0.5	<0.001	HS

1.5 m	3.3	0.7	4.9	0.2	<0.001	HS
p-value ^b (sig.)	0.02	(S)	0.03	(S)		
/ʃ /-/s/ & /ʃ/-/ʃ/						
0.75 m	3.2	0.7	4.9	0.2	<0.001	HS
1.5 m	3	0.7	5	0	<0.001	HS
P-value b (sig.)	0.02	(S)	0.8(NS)			

Table (3) illustrates that, there was statistically significant difference with **low** mean speech sounds discrimination score among cases with p-value < 0.05 at 0.75 meter.

Table (4): Comparison	of discrimination	of speech	sounds a	t different	distances
among cases.					

Variables	At 0.7	5 m	At 1.	5 m	p-value	Sig.
	Mean	SD	Mean	SD		C
/m/-/t/ & /t/-/t/	4.4	0.6	4.2	0.6	0.03	S
/b/-/w/ & /w/-/w/	4	0.6	3.7	0.7	0.002	HS
/t/-/d/ & /t/-/t/	3.2	0.7	2.9	0.8	0.02	S
s - z & z - z	3.1	0.7	2.7	0.9	0.006	HS
/l/-/r/ & /l/-/l/	3.5	0.8	3.3	0.8	0.07	NS
/k/-/k/ & /k/-/g/	3.1	0.8	2.7	1	0.004	HS
/x/-/Y/ & / Y/-/ Y/	2.9	0.8	2.6	0.9	0.001	HS
/k/-/q/ & /q/-/q/	2.9	0.9	2.9	0.9	0.5	NS
/b/-/d/ & /d/-/d/	3.5	0.7	3.2	0.6	0.003	HS
/m/-/n/ & /m/-/m/	3.9	0.8	3.7	0.8	0.01	S
/k/-/t/ & /t/-/t/	3.1	0.8	2.9	0.8	0.01	S

Table (4) illustrates that, there was statistically significant **decrease** in mean speech sounds discrimination score with increaseing distance as (/m/-/t/) & (/b/-/w/) & (/t/-/d/) & (/s/-/z/) & (/k/-/g/) & (/x/-/V/) & (b/-/d/) & (m/-/n/) among cases with p-value < 0.05.

But, there was no statistically significant difference in discrimination of (/l/-/r/) & (/k/-/q/) speech sounds scores among cases with p-value> 0.05.

Variables	At 0.7	At 0.75 m A		5 m	р-	Sig.
	Mean	SD	Mean	SD	value	
شط _ بط & بط _ بط	4.9	0.3	4.7	0.6	0.03	S
توت _ توت & توت _ بوت	3.6	1	3.4	0.9	0.1	NS
نار – جار & جار – جار	4.2	0.7	3.9	0.9	0.02	S
نحلة _ نخلة & نخلة _ نخلة	4.5	0.7	4.2	0.7	0.004	HS
خس _ خط & خس _ خس	4.5	0.7	4.2	0.8	0.008	HS
عش _ عیش & عش عش	3.6	0.8	3.5	0.9	0.1	NS
شطة _ شطة & شنطة _ شطة	3.2	0.9	2.9	1	0.03	S
بطن _ بطن & بط _ بطن	2.9	1	2.8	1.1	0.3	NS

Table (5):	Comparison	of	Arabic	words	discrimination	at	different	distances
among case	es.							

Table (5) illustrates that, there was statistically significant **decrease** in mean word discrimination scores with increasing distance

Table (6): Comparison of word identification (minimal pairs) at different distances among cases.

Variables	At 0.7.	5 m	At 1.5	m	p-value	Sig.
	Mean	SD	Mean	SD		

نار _ فار	4.9	0.4	4.8	0.4	0.4	NS
زيت _ بيت	4.8	0.5	4.7	0.6	0.1	NS
برج – درج	3.4	0.7	3.1	0.7	0.006	HS
توكة – شوكة	4.5	0.7	4.2	0.8	0.001	HS
شماعة – سماعة	3.7	0.9	3.4	1	0.01	S
مراية – ملاية	3.2	0.8	2.8	0.6	<0.001	HS
بیت ــ بیض	3	0.9	2.6	0.9	<0.001	HS

Table (6) illustrates that, there was statistically significant **decrease** in the mean of minimal pairs word identification score with **increasing** distance.

Disscussion

The phonological development in patients with OME is the most affected aspect of language and speech, receptively and expressively. In this study, (94.3%) of the cases were with phonological errors.

Only 22.9% of cases complained of previous AOM attacks, also, all of cases were not affected on the level of auditory detection with perfect response to any auditory stimulus with different frequencies. Those results may explain the silent nature of the disease, and its late discovery. The psychoacoustic features of sound included in this study, were loudness, duration, continuity, segmentation. All are negatively affected. They help in development of the the suprasegmental features, such as; stress, tone, rate or word juncture, extending over syllables, words and phrases, which is related to the prosody of speech to make it more meaningful and effective, clarifying the para-verbal aspects of the context, Also, it helps in the development of intact phonological production.

Shetty & Koonoor in (2016) held a study on Sensory deprivation, due to otitis media episodes in early childhood, which concluded that, finer aspect of speech processing skills are affected in children who had a history of OME at an earlier age and its effect

Page 123

persists at later age even though the audibility was within normal limit.

It is also noticed that, the most significant changes in speech sounds discrimination between cases and controls, were especially found in the sounds sharing in characters, as sounds with same frequencies, place of articulation, resonance and voicing, etc. These results were in accordance with the results of Margolis & nelson (1993) study on patients had AOM followed by conductive hearing loss. They assessed the hearing after the acute attack was resolved, and found that, the conductive element resulting in mild to moderate hearing with sloping curve towards the region of high frequency sounds. They also documented that; this effect may recover slowly, in up to six months duration.

Regarding Arabic words minimal pairs identification, 71.4 % of them was negatively affected, especially with the pairs, which had phonemes within the same frequency range on the level of near distance, and all of the minimal pairs were affected on the level of further distance. This gives an idea about learning and lexical difficulties, and poor performance of the child against noisy background.

Conclusion:

- All of the auditory functions are found to be affected, yet to variant degrees, nevertheless, the distance variable was found to be a very powerful variable.

- Phonemic perception, word discrimination and word identification were affected to a great extent, and they can accordingly have a negative influence on the learning and lexical abilities.

References:

Alberti, PW., (2001). The anatomy and physiology of the ear and hearing.

Bluestone, CD. & Klein, JO., (1998). Otitis Media in infants and Children, Philadelphia: 995. Adderson EE, "Preventing Otitis Media" Medical Approaches", Pediatric Annals; 27: i01-107.

Hall, B., Hill P., (1990). When does secretory otitis media affect language development? , Archives of Disease in Childhood, 61, 42-4.

Luers, Christoffer, J. & Hüttenbrink, K., (2015) "Surgical anatomy and pathology of the middle ear." Journal of anatomy, 228, no. 2: 338-353.

Margolis, R.H. & Nelson, D.A., (1993). Acute otitis media with transient sensorineural hearing Loss: A case study. *Arch Otolaryngol Head Neck Surg.*;119(6):682–686.

Shetty, S. H. & Koonoor, V., (2016).

Sensory deprivation due to otitis media episodes in early childhood and its effect at later age: A psychoacoustic and speech perception measure. International journal of pediatric otorhinolaryngology. Vol. 90, Pages 181-187.