

Does early identification of children with otitis media with effusion can prevent difficulties in language development?

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Introduction:

Otitis media with effusion (OME) is a common condition across the world with a high prevalence in infants and young children, with almost 80–90% of all children experiencing at least a single episode before the age of 1 year. Ear and hearing problems caused by otitis media (OM) are also highly prevalent. Despite this, it is often asymptomatic and difficult to identify in early stages.

The association between otitis media and developmental problems is hypothesized to be linked to the hearing loss that accompanies the bouts of otitis media.

Objectives:

The main goal of this presentation is to contribute to empower the need for a early identification of children with OME with empirical data of linguistic characterization of children with OME, testing the impact of age of emergence of OME.

Methods:

A sample of 9 children aged 4;7 to 6;4 was gathered: a control group (CG) (n = 3); two experimental groups with OME (G1: OME during the first year of life (n = 3); G2: OME after 3;0 (n = 3)). All children belonged to the same socio-economic status and lived in the same geographic area.

To further characterize the sample, three different assessments were performed to each children: a medical assessment by an otorhinolaryngologist; an audiological assessment by an audiologist and a speech and language assessment by the investigator which is also a Speech Therapist.

Results:

A mild and intermittent hearing loss was identified in the two experimental groups (G1=32,5dB; G2=29,7dB) and no hearing loss was detected in the control group.

G1 shows a deficit in linguistic development. G2 matches the control group (mastery of all structures tested). Lexical knowledge is the only non affected component in G1.

Conclusions:

Early OME episodes have a negative effect on linguistic development and can be diagnose early in children's life. It's important to provide an early therapeutic intervention (in children with an early history of OME) in order to achieve a good academic progress.

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