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The location of tympanic membrane perforation and hearing loss

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Perforations of the tympanic membrane (TM) can result from trauma, middle-ear disease, or the treatment of middle-ear disease. I aim to assess the level of hearing loss in different sizes and sites of TM perforation in patients undergoing myringoplasty or tympanoplasty and to correlate the size and site of TM perforation. Records from 128 patients who had undergone tympanoplasty or myringoplasty at our clinic between August 2008 and November 2012 were examined retrospectively for this study. For evaluating the TM, the site of the perforation was classified as the following divisions: 3 quadrants (Anterior, Posterior and Central). Audiometric evaluation was performed using a clinical audiometer calibrated according to ISO standard. Hearing level was measured as the mean air conduction and mean air-bone gap (ABG) threshold at 500, 1000, 2000, and 3000 Hz and, we also categorized the frequencies as low frequency (250, 500, 1000) and high frequency (2000, 3000, 4000, 6000) to analyze the hearing in detail. We categorized the location of TM perforation simply as anterior 56 (43.8%), posterior 42 (32.8%) and central 30 (23.4%) based on the relation of the center of the perforation with the line extending from the malleus handle. According to the mean ABG among the groups, ANOVA analysis revealed that, they have significant difference ($p=0.008$). Categories of the hearing loss was classified as low frequency (250, 500, 1000 Hz) and high frequency (2000, 3000, 4000, 6000 Hz). We found that the posterior perforation in TM showed increasing air conduction and ABG at low frequency hearing level ($p=0.023$, $p=0.072$).

Biography

Hoseok Lee completed MD from Bucheon St. Mary's Hospital, Catholic University College of Medicine. He is working in Otolaryngology and Head and Neck Surgery department as an Otolaryngology Clinical Fellow.

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