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Association between vocal symptoms reported with video laryngoscopy in teachers of basic educationAlessandra Regina Brito¹, Celmo Celeno Porto², Neuza Josina Sales³, Ikaro Daniel de Carvalho Barreto⁴, Pedro Ivo Machado P. de Araújo⁵¹Federal University of Goiás, Brazil

Objective: To characterize the sociodemographic profile of Basic Education teachers and analyze associations between vocal symptoms reported in perception protocols with videolaryngoscopy. **Methods:** A descriptive, cross-sectional study with 107 female teachers, aged 40-49 years, working in seven public schools in Goiânia, Goiás, Brazil. The interviews were applied to sociodemographic aspects, perception protocols through the Voice Disorder Screening Index, Participation in Voice Profile and Activities, and videolaryngoscopy exam. **Results:** The calculation of the sample was performed by descriptive analysis, bivariate and odds ratio. In the sample 72 (67%) of the teachers were elementary school teachers, 23 (21%) Infant and Child Education, 12 (11%) in Special Education. 33 (31%) described working time between 1-10 years, 46 (43%) between 11-20 years and 28 (26%) between 20 years. For the shift, 56 (52%) worked in one period, 46 (43%) in both periods and 5 (5%) in three periods. The prevalence of female teachers with vocal symptoms reported 82 (77%) and laryngeal changes for videolaryngoscopy 44 (41%). There was a significant difference between the symptoms of hoarseness ($p = 0.005$), loss of voice ($p = 0.042$) and breakdown of voice ($p = 0.002$) in relation to videolaryngoscopy. Vocal fatigue was the symptom most reported by female teachers, with 21%. There was no significant association between sociodemographic data and laryngeal changes. **Conclusion:** There was a significant association between hoarseness with vocal symptoms, loss of voice, and break or failure of voice, referred by female teachers with laryngeal alterations associated with videolaryngoscopy. The study showed female teachers with associations between vocal symptoms reported in the protocols and changes in videolaryngoscopy, female teachers with vocal symptoms reported in the protocols, without changes in the videolaryngoscopy tests, as well as female teachers without vocal symptoms, but with changes in the videolaryngoscopy tests. The clinic is important at all times for an interdisciplinary treatment.

Biography

Dr. Alessandra Regina Brito done her Master in Environmental Sciences and Health (PUC / 2007), PhD in Health Sciences (FM / UFG / 2015). Specialist in the areas of Orofacial Motricity, Voice, Family Health Strategy (NASF), Collective Health and Labor Speech-Language Pathology. Postgraduate teaching: Teaching and Research Methodology (CEPAE / UFG), Epidemiology (IPTSP / UFG), Worker's Health (FEN / UFG) and Mental Health (FEN / UFG). (IPTSP / UFG / 2011), Technical Course on Multi-Media Didactics (IFG / 2013), Phonoaudiology Graduation (PUC / 2013-2015) and coordination in Collective Health (PUC), (IPTSP / UFG), Health of the Worker (FEN / UFG) and Health Situation Analysis (IPTSP / UFG), researcher in the Health Sciences graduate program (FM / UFG). Lines of research: Public Health, Epidemiology, Voice, Worker's Health, Collective Health, Speech-Language Pathology, Education, Communication and Distance Education. (ADHOC / CEP / Goiânia Emergency Hospital / SES 2009), Speech Therapist of the Reference Center on Occupational Health (CEREST / SMS / 2006-2012), Volunteer at Hospital das Clínicas (UFG- 2015 -2017), Head and Neck and Otolaryngology outpatient clinic. Clinical speech therapist and Director in Vocare Speech Therapy, with advice and advice in Human Communication.

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