

loss, 4 had mild CDHL secondary to OME and had bilateral grommet insertion for the condition; 1 had a profound unilateral SNHL. On average, children were sensitive to 6 identifiable sound stimuli at presentation (range 1–20). 82% complained of sensitivity to noise from household appliances. 60% had a background history of autistic spectrum disorder (ASD), followed by attention deficit hyperactivity disorder (ADHD) (8%) and other neurodevelopmental problems (3%). In 91%, management comprised behavioural therapy combined with provision of a sound-ball (Puretone relaxation therapy ball) for home use. Of these, 25% did not attend their first review. A further 25% were considered to have sufficient symptom improvement to permit discharge after a single clinic review. Only 2% of children required more than 3 review sessions before achieving resolution of symptoms. Only 1% were referred back to the service.

Conclusions: In our series hyperacusis is more common in boys and in children with ASD. A combined treatment approach with behavioural and a sound-ball therapy has a high success rate.

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Update in ossicular reconstruction: Ossicular Replacement Prostheses (ORP), bone cement and new assembly techniques (N673)

ID: 673.1

Adhesive Otitis Media and Ossiculoplasty

Presenting Author: **Kadir Serkan Orhan**

Kadir Serkan Orhan
Istanbul University

Learning Objectives: To present how to do glass ionomer in ossicular reconstruction.

Objective: Eustachian tube dysfunction may deteriorate physiology of middle ear pressure and ventilation that result in ear drum retraction. Cholesteatoma can develop from retraction pocket that may result in ossicular erosion. On the other hand, Ossicular erosion may result from prolonged contact between tympanic membrane and ossicular chain without active infection and cholesteatoma.

Long process of the incus, lenticular process and/or stapes superstructure can be effected and result in complete or partial ossicular discontinuity. In lenticular process erosion, bone cement can be used for reconstruction. Incus interposition, malleus-stapes bone cement or ossicular prosthesis are the reconstruction options in case of incus long process erosion.

Materials and Methods: Thirty patients whose underwent ossicular chain reconstruction with bone cement included in the study. Glass ionomer was used for reconstruction by otomicroscope or endoscope. We compared preoperative and postoperative audiogram findings.

Results: We found better result of ossicular reconstruction with glass ionomer in lenticular process erosion. Malleus-

stapes bone cement application or incus interposition can be performed in case of incus long process erosion.

Conclusion: Glass ionomer can be safely used for ossicular reconstruction in patient with adhesive otitis media that cause ossicular discontinuity.

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Surgical Anatomy-Endoscopic Approach

Presenting Author: **Ali Özdek**

Ali Özdek
private practice

Learning Objectives: Endoscopic ear surgery gained popularity in the last 10 years. Introduction of endoscopes in otologic surgery has several advantages. It allows fully transcanal surgery in many type of ear diseases. It allows better visualization of hidden areas in middle ear. It also helps better understanding of surgical anatomy of middle ear during education period. Although 3-dimensional anatomy is same in every type of surgery, endoscopic ear surgery needs being familiar to endoscopic view of middle ear. In this presentation endoscopic surgical anatomy will be discussed in details and endoscopic application of several ossiculoplasty techniques will be presented.

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Endoscopic Ear Surgery in Different Otologic Procedures

Presenting Author: **Yüksel Olgun**

Enis Alpin Güneri, Yüksel Olgun, Aslı Çakır,
Mehmet Durmuşoğlu, Pınar Tunçbilek

*Dokuz Eylül University School of Medicine
Department of Otorhinolaryngology*