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CONTACT: Shanna Swendson Office: 214/688-3404 Home: 214/513-0413

****UT Southwestern program catches hearing problems in newborns

DALLAS -- Early identification of hearing loss in children improves their chances of developing normal speech and language. In a program developed by the Department of Otorhinolaryngology at The University of Texas Southwestern Medical Center at Dallas, hearing loss is being identified before some newborns even leave the hospital.

"Most of the infants in the special care nursery at Parkland Memorial Hospital are at risk for hearing loss," UT Southwestern audiologist Wende Yellin said. But Parkland has so many births that the audiologists were unable to screen them all. So Yellin and fellow audiologist Faith Wurm sought volunteers, and the National Council of Jewish Women took on the hearing screening as a project. Trained and supervised volunteers screen babies in the nursery, leaving the audiologists time to work with infants who don't pass the hearing screening.

Infants are screened using a test called auditory brainstem response audiometry. It does not require a behavioral response from the infant. A machine filters ongoing EEG activity to measure response to clicking sounds. If further testing is indicated, an audiologist performs a diagnostic evaluation to identify the degree and type of hearing loss. So a physician can provide medical intervention before the baby leaves the hospital. If a permanent hearing loss is identified, the school district is notified because the baby is eligible for infant stimulation programs as well as hearing aids.

Yellin would like to test all infants before they leave the hospital, but testing the special care infants is especially crucial, she said. Risk factors for hearing loss in newborns include a family

history of hearing loss, congenital infections associated with hearing loss, craniofacial anomalies, birth weight under 3.3 pounds, medications harmful to the ears, bacterial meningitish and prolonged mechanically assisted breathing.

Parents should watch how their infant responds to sound, the audiologist said, since hearing problems also may develop after birth because of illnesses such as meningitis and measles or head injuries. By 3 months an infant should startle at loud sounds, stir when noises are made and show recognition of a parent's voice. By 6 months, a baby should look toward sound, respond to its mother's voice and turn when its name is called. A one-year-old should understand common words like "no" and "bye-bye" and should look around when hearing new sounds.

Yellin urged parents who think their children may have hearing problems to get them tested right away. "Since children are in the process of learning speech and language, even a mild hearing loss can cause problems," she said. Children cannot 'fill in' what they are missing like adults can."

Before auditory brain stem response testing, hearing loss usually wasn't detected until a child was around three and still wasn't talking. Detecting hearing loss early allows children to receive optimum care and improve language development.

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NOTE: The University of Texas Southwestern Medical Center at Dallas comprises Southwestern Medical School, Southwestern Graduate School of Biomedical Sciences and Southwestern Allied Health Sciences School.