UNIVERSAL VERSUS HIGH RISK NEONATAL HEARING SCREENING AND RELEVANCE TO REHAB AND COCHLEAR IMPLANT PROGRAMME

Siti Sabzah Mohd Hashim¹, Norzi Gazali²

1. Department of Otorhinolaryngology, Hospital Sultanah Bahiyah, Kedah
2. Department of Otorhinolaryngology, Hospital Sultanah Bahiyah, Kedah

WHO has defined Hearing Impairment as one of the major public Health and social problems and estimates that there are 250 million people worldwide who are deaf and have impaired hearing at birth (WHO report 2005). In Malaysia, The National Hearing Disorder survey 2005 displayed a prevalence of 17.4% with an estimated population of 3,962,879. In the Disease Burden Report 2000 (Ministry of Health Statistics based on the total DALY status and rank order) hearing related problems is one of the top ten reported diseases in Malaysia. Permanent Congenital Hearing Loss is one of the most frequent congenital abnormalities at birth. It is cited as 1-4 in 1000 live birth. Screening is therefore the avenue through which access to quality intervention is made available. Universal and High Risk Newborn hearing Screening (UNHS) has been introduced in many countries in order to allow early diagnosis and intervention to congenital hearing impairment. It has been proven worldwide in established studies that early intervention in hearing impairment children will improve language outcomes and subsequent school and occupational performance. Screening will ensure that the age of identification of hearing loss is reduced, age at intervention is lowered and the outcome of intervention is better. Implementation of hearing screening requires responses and collaboration from a myriads of diverse group; ORL, Paediatricians, Obstetricians, Family Physicians, Public Health Specialists, Geneticist, Administrators, Politicians, the Hearing Loss Communities and the General public. In the Ministry of Health Hospitals, Universal Hearing Screening (Screening all newborn) is long due. High risk hearing screening (hearing loss potential children with identified risk factors) is available in some hospitals. High risk Screening only support 50% of detection of overall congenital hearing loss in children. Screening programme is therefore a pressing need and relevant in the Malaysian Healthcare settings in order to support the existing hearing loss burden in Malaysia. This programme will provide positive impact to the outcome of the existing hearing rehabilitation services as well as the Cochlear Implant Programme in Malaysia.