

Outcome of cochlear implantation in children with cochlear implantation

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To the Editor,

We read with interest the article titled “Outcome of cochlear implantation in children with cochlear malformations” by Bille et al. [1], whose work evaluated the outcome of cochlear implantation (CI) in children with inner ear malformation (dysplastic group) at least 3 years after CI. In this article, the authors compared the category of auditory performance (CAP) and speech intelligibility rating (SIR) tests scores of the dysplastic group with those of a control group without inner ear malformation (non-dysplastic group); they found no statistical significance regarding CAP and SIR scores between the two groups.

In our cochlear implant group, we also observed similar results, as in 3 years time after CI, our dysplastic group performed as well as their matched counterparts of non-dysplastic group (SPSS, non-parametric Mann–Whitney test, *t* Student). In our previous study [2], we demonstrated that 24 months after CI, the same dysplastic group achieved significantly poorer scores in speech perception and production tests compared with the non-dysplastic group. However, during the transition from the 24 to 36 months post-CI, both groups improved their performance reaching the maximum scores in these tests, with the dysplastic group exhibiting a remarkable progress [Wilcoxon Signed Ranks Paired Test, Mann–Whitney test, Asymp.

Sig. (2-tailed), Exact Sig. (1-tailed)]. The above results, in agreement with Bille et al. study, indicated that children with inner ear malformation over time perform equally to children without inner ear malformation, but at a slower rate of improvement; this is in accordance with Eisenman et al.’s [3] observation that children with malformed cochlea improved more slowly than did their matched control subjects. Therefore, parents should be aware of the time needed for their children to achieve the best performance after CI of the malformed cochlea and actively support this long effort.

References

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