

overblocked in most cannulas compared to the manufacturer's recommendation, despite the ISO-compliant trachea model. Ultimately, it cannot be guaranteed that there will be no leakage around the cuff if the two cannulas are sealed and filled according to the manufacturer's instructions.

#### Aerodigestive tract/Laryngology/ Phoniatrics: Phoniatrics

### Acoustic parameters of the voice children with bilateral sensorineural hearing loss

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**Introduction** Nowadays, the incidence of hearing loss in children has increased worldwide. Children with hearing loss are more likely to suffer from voice and speech problems than children with normal hearing. The reason for this is that hearing impaired children cannot control their own voice because there is no returning hearing connection. Currently, the voice is not the main goal of speech therapy in the rehabilitation of hearing-impaired children, but its disorders can have a negative impact on speech intelligibility and threaten social isolation.

**Methods** 100 subjects with a diagnosis of bilateral sensorineural hearing loss of varying severity at the age of 5 to 13 years were examined. The subjects were divided into three age groups: group I: 5-7 years, group II: 8-10 years, group III: 11-13 years. The acoustic analysis was carried out with the help of the program "LingWaves" 2.5.

**Results** It was found that the base frequencies (F0) at 3-4 degrees of hearing impairment 239.78 Hz (95% CI 228.6 – 250.95) (p < 0.05) was shifted towards the low frequencies. The average value of jitters ranged from 0.06 - 13.89. This figure decreased with increasing age of children. We found statistically significant differences in jitter based on the gender of the patients (p = 0.032). The maximum phonation time increases with age.

**Conclusion** The established acoustic parameters for the voice of children with chronic bilateral sensorineural hearing loss at this age are reliable and can be used as criteria for the diagnosis of disorders of the speech apparatus and as an indication for the correction of the vocal apparatus with the help of speech therapy exercises.

# Treatment of vocal fold Nodules: Transnasal steroid injection versus Microlaryngoscopic Phonomicrosurgery

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**Objectives** The aim of the present study was to compare treatment outcomes of vocal fold steroid injection (VFSI) and surgery in patients with vocal fold (VFNs) in terms of lesion regression, subjective, and objective voice parameters. **Methods** This bicenter interventional study was conducted on 32 patients with VFNs, in the age range of 16 – 63 years. Sixteen patients underwent transnasal VFSI under local anesthesia (the injection group), and 16 underwent surgical excision of the nodules under general anesthesia (the surgery group). Prior to intervention and at the follow-up visit, participants were subjected to



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