

Joint Scientific Meeting of The Hong Kong College of Otorhinolaryngologists and  
The Hong Kong Society of Otorhinolaryngology, Head & Neck Surgery  
26 November 2006, Hong Kong

**Scientific Session**

**Adjudicators**

**Chairpersons: Dr. Hui Yau**

**Dr. Victor Abdullah**

**Opening remark                    4:00 – 4:05 pm**

**Dr. Herman Tang, President**

**Dr. Ho Fung**

**Dr. Ho Wai Kuen**

**Dr. Ng Siu Kwan**

**Introduction                    4:05 – 4:10 pm**

**Dr. Ng Kin Pong**

**Dr. Victor Won**

**Dr. Tong Fu Man (Chief)**

**Trainee Presentation**

**1. Dr. Chan, Anthony, PWH            4:10 pm**

**2. Dr. Ho, Yee Man Osan, PWH       4:25 pm**

**3. Dr. Brigitta Wong, QMH            4:40 pm**

## **A randomized controlled trial on intratympanic steroid treatment for sudden onset sensorineural hearing loss**

Dr. Anthony Chan; Prof. Michael Tong; Dr. Alex lee; Dr. Eddie Wong; Dr. SK Ng; Dr. Peter Ku;  
Dr. Victor Abdullah

Division of Otorhinolaryngology, Department of Surgery, The Chinese University of Hong Kong

### *Abstract*

Sudden onset sensorineural hearing loss is a common ENT problem. There are a variety of available treatments as there are different possible etiologies. Systemic steroid treatment has previously been shown to offer a successful rate of 70-80% but it comes along with its systemic side effects. The aim of this study is to assess the effectiveness of intratympanic steroid as a primary treatment modality for this clinical condition. Patients with an abrupt onset, in less than 24 hours, of unilateral sensorineural hearing loss within 2 weeks will be voluntarily recruited in our study. They are randomized into 2 groups, the oral steroid ones given prednisolone for 2 weeks; and the intratympanic steroid group given 3 injections of dexamethasone injections over 3 weeks. Recovery of hearing is monitored with serial pure tone audiogram. In 6 months times 13 patients were recruited and preliminary results showing comparable results between the two methods. Intratympanic steroid may be a good alternative treatment for patients, whom cannot tolerate the systemic steroid, suffered from sudden hearing loss.

## **Voice Disorder Among School Teachers – a Pilot Study**

Dr. Ho Yee Man

Institution: Prince of Wales Hospital

### *Objectives:*

To investigate the prevalence of voice disorder in school teachers and correlate vocal problems with different risk factors. Aim to arouse the awareness of teachers for the occupational hazard.

### *Methods:*

Teachers from one kindergarten, one primary school and one secondary school were recruited from Shatin. They were invited to our specialist clinic for filling a voice activity and participation profile questionnaire. Besides, they were interviewed by me or my colleagues for another questionnaire concerning throat symptoms and associated risk factors. It was followed by physical examination and tape recording of their voices for analysis by speech therapists.

### *Results:*

Total 44 (31 female and 13 male) teachers were recruited from the three schools. Over half of the teachers experienced multiple throat symptoms namely throat clearing, dry throat, sore throat, globus sensation, weak voice and hoarseness in the past one year. Physical examination found 8 out of 44 teachers (18.2%) had vocal cord nodules. Among the patients with voice disorder, 21 of them (47.7%) did not attend for any medical advice. For those attended medical opinion, 17 out of 44 (38.6%) seek opinion from general practitioners; 5 out of 44 (11.4%) consulted otorhinolaryngologists; 3 out of 44 (6.8%) seek opinion from traditional Chinese Medicine. For the treatment, 16 out of 44 (36.4%) were advised for voice rest; only one out of 44 (2.3%) had received speech therapy; 20 out of 44 (45.5%) had received oral medication and only one out of 44 (2.3%) had been operated for the vocal cord pathology. In view of the small subject number, we could not find out any correlation of vocal cord pathology with different risk factors. However, all of the subjects are interested in joining health walk concerning voice hygiene.

### *Conclusion:*

We found that 18.2% of the school teachers had an organic voice disorder and the figure is comparable to foreign studies.

## **The additional effect of Telfast D compared to Telfast in the treatment of dust mite allergic rhinitis**

Dr. Birgitta Wong

Department of ENT, Queen Mary Hospital

### *Objective:*

To evaluate the additional effect of Telfast D (60mg Fexofenadine + 120mg pseudoephedrine) compared to Telfast (120mg Fexofenadine) in the treatment of Perennial allergic rhinitis.

### *Method:*

This was a single-centre, randomized, double-blinded, 2-treatment, 2-period crossover study conducted between September 2003 to September 2005 at Queen Mary Hospital. Patients had to be 18 year-old or above, with more than 2 years history of rhinitis symptoms, without chronic illness, proven dust mite allergy and not on medication. Patients will be randomized to receive Telfast or Telfast D for 2 weeks then cross-over. A 14-day washout was required between treatments. Daily symptom scores were recorded on diary cards by VAS (visual analogue scale) of 0 to 10. Nasal challenge tests and acoustic rhinometry were performed before and after treatment.

### *Results:*

Thirty-seven patients were randomized and 30 completed both treatment sequences. Both drugs showed equal efficacy on nasal and ocular symptoms. We found statistically significant difference in favour of Telfast D for relief of nasal obstruction and in post-treatment nasal challenge.

### *Conclusion:*

Telfast D has proven additional effect in relief of nasal obstruction compared to telfast.