



Pattern of Communication Disorders in a Tertiary Hospital in Nigeria.

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ABSTRACT

Background: Globally communication disorders have been recognized as a major public health challenge cutting across all age groups and gender. The prevalence of communication disorders also known as speech and language disorders in high socio-economic countries is between 0.5 -7% and in Africa is between 10- 25%.

Aim: The aim of the study was to determine the pattern of communication disorder in a tertiary hospital in Nigeria.

Method: This was a retrospective cross-sectional study of patients who presented to the speech and language section of the department of ear, nose and throat department of the University of Port Harcourt Teaching Hospital over a 10-year period. The information was retrieved with a proformer and analysed with SPSS version 25.

Result: Ninety eight patients were seen within the period under review; however only eighty – three (83) had complete record. There were 55 (62.3%) males and 28 (33.7%) females. For age bracket with communication disorders 0- 9 years were fifty-seven (68.7%) had the most common of these disorders while the age bracket 30-39 years had no communication disorder. Delayed speech seen in 31 (37.3%) of patients was commonest disorder seen. The least disorder seen was hoarseness. Most 42 (76.3%/77.4%) of the patients with delayed speech were males. The mean of presentation for patients with delayed speech was 40.3 months. The commonest communication disorder seen in the elderly was slurred speech.

Conclusion: The study revealed that delayed speech was the most common communication disorder represented by 37.3% of the subjects. The commonest age group with communication disorder was between 0-9 years represented by 68.7%. Prompt detection and follow-up of all children in early life key. Furthermore, involvement of caregivers, audiologist and speech therapist cannot be over emphasized in the management of patients with communication disorders.

INTRODUCTION

Communication disorders are impairment in the ability to receive, send, process and comprehend verbal or non-verbal and graphic symbol systems.¹ This includes speech, language and hearing impairments.¹ The process of communication is complex and requires precise multi-organ co-ordination.² The brain, lungs, larynx, palate, tongue and teeth are involved in communication.³ Speech disorders are present when there is difficulty in formation of speech sounds needed for communications.⁴ Language disorders on the other hand refers to difficulty in getting the meaning of messages across to others and understanding messages coming from others.⁵ Hearing impairment refers to total or partial inability to hear sound. Communication is fundamental to development in children as they need to understand and be understood. This is essential for learning, play and social interactions for children and in adult life for daily communication.

Communication disorders are common in children with delayed milestone.⁶ The prevalence of speech and language disorders in high socio-economic countries is between 0.5 -7%.⁷ The prevalence of speech and language disorder in African countries is between 10-25%.⁸ WHO estimates shows that 1.9% of children in sub-Saharan Africa versus 0.4% in high income countries.⁸ However, the estimates in Africa are based on limited evidence.

The studies on pattern of communication disorders in Nigeria are scarce. Knowing the pattern of communication disorders can assist in prevention, early detection, intervention and rehabilitation of children with the disorder.

PATIENTS AND METHODS

This is retrospective study of patients who presented to the speech and language section of the department of ear, nose and throat clinic of University of Port Harcourt Teaching hospital (UPTH) Port Harcourt, Southern Nigeria. Study period was from May 2006 to May 2016. Data was retrieved from speech and language register and patients case notes. Retrieved data was loaded into Microsoft excel sheet and analyzed using SPSS software.

RESULT

Ninety eight patients were seen within the period under review; however only eighty – three (83) had complete record. There were 55 males and 28 females with male female ratio of 2:1. Most of the patients were within age bracket 0- 9 years. Delayed speech seen in 37.3% of patients was commonest disorder seen. The least

disorder seen was hoarseness. Most (77.4%) of the patients with delayed speech were males. The mean age of presentation for patients with delayed speech was 40.3 months. The commonest communication disorder seen in the elderly was slurred speech.

Tables 1: Patient's gender

Sex	Frequency
Male	55
Female	28
Total	83

Table 2: Age

Age group (years)	Frequency n(%)
0- 9	57 (68.7%)
10 -19	8 (9.6%)
20- 29	5 (6.1%)
30- 39	0 (0%)
40 -49	4 (4.8%)
50- 59	1 (1.2%)
above 60	8 (9.6%)
Total	83 (100)

Table 3: Diagnosis

Diagnosis	Frequency n(%)
Delayed speech	33(39.8)
Articulation disorders	3 (3.6)
Hearing loss	9 (10.8)
Rhinolalia	22(26.5)
Stuttering	5(6.0)
Hoarseness	1(1.2)
Slurred speech	10(12.0)
Total	83(100)

DISCUSSION

Communication disorders as seen this study were common in children and declined towards puberty. This agrees with study by Aremu et al in Ilorin, Nigeria.⁹

Male preponderance was noticed in this study. This pattern agrees with the findings of Adegbijietal.¹⁰ Male preponderance may be due slower neurological maturity in males than females.⁶

The most frequent disorder seen in this study was delayed speech. The mean age of presentation for delayed speech was 40.3 months. Delayed speech is one of the common presentations of hearing impairment in children.¹¹ In our setting universal hearing screening is not practiced, delayed speech may be their first presentation.

Rhinolalia was noticed in 26.5% of the patients of the study population. This is quite high compared to the findings in a similar study in Lagos, Nigeria.¹² This may be due to very lengthy period covered in this study. All cases of rhinolalia were as result of cleft palate and lip.

Hearing loss was seen in 10.8% of the study population. This is lower than the findings in other Nigerian studies. This may be due to unavailability of facilities for objective hearing assessment in our Centre during the study period.

Slurred speech was the only communication disorder seen in the elderly in this study. They were all due to cerebrovascular disease. None was associated with hearing loss.

In conclusion, the delayed speech was the commonest communication disorder seen in this study. Delayed speech was seen mostly in males with mean age of presentation as 40.3 months. Rhinolalia secondary to cleft palates and lips was the second most common disorder seen in this study. Slurred speech was the only communication disorder seen in the elderly. Absence of facility for objective hearing assessment was a limitation in this study. Many of the cases of the delayed speech were not assessed for hearing loss. Future studies on objective hearing assessment among patients with delayed speech are necessary.

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Conflict of interest

Nil

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