

# 14<sup>TH</sup> MEETING OF THE MEDITERRANEAN SOCIETY OF OTOTOLOGY AND AUDIOLOGY, 9–11 MAY 2014, VALENCIA, SPAIN

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The 14<sup>th</sup> International Meeting of the Mediterranean Society of Otolaryngology and Audiology (MSOA) was held from 9<sup>th</sup> to 11<sup>th</sup> of May in Valencia, Spain. The Society was founded in 1987 and its Executive Committee comprises representatives of almost all countries in the region.

This year's event gathered over 150 specialists from the majority of Mediterranean and some European countries. With a diverse and extensive scientific program, participants could share their knowledge, exchange experiences, and learn the latest advances in the fields of otology and audiology. Topics covering surgical techniques, genetics, basic science, hearing impairment, new technologies, vertigo, and implantable hearing devices were discussed during round table debates, lectures, oral communications, and poster sessions.

Some of the most widely discussed topics included otosurgical issues such as middle ear surgery, cochlear implants, and skull base surgery. However, in his opening lecture Prof. Jacques Magnan, President of 14<sup>th</sup> MSOA Meeting, considered that the golden age of surgery has already passed: today we see a decreased importance placed on surgical training and an increased reliance on robotic surgery, a situation created by the surgeons themselves, Prof. Magnan said. Some surgical techniques, such as vestibular neurectomy or neurovascular cross compression, successfully used in the past, are now considered outdated. Clinicians prefer to fit otosclerotic patients with hearing aids than to perform middle ear surgery. Do we really want to replace surgeons with robots? Will that actually provide more cost-effective and, importantly, more patient-oriented care? The message from the opening lecture was – no! We need more surgical training!

This conclusion was reinforced by other otological and surgical themes during scientific sessions and discussions. While hearing restoration via various types of hearing implants is a widely accepted method of surgical treatment, there are still numerous controversies and novel ideas. For instance, in most cases ear surgery is still usually performed under general anesthesia, but some clinics report the effective and safe use of local anesthesia in bonebridge and CI revision surgeries (University of Navarra).

During the conference two international multicentre trials were presented, each which involved the World Hearing Center of the Institute of Physiology and Pathology of Hearing (IPPH). The work gave a summary of the indications, surgical tips, and results of two novel approaches



to hearing implants: the BAHA 'Attract' system, involving four clinics; and the C-DACS investigational device (ID) for severe to profound mixed hearing loss, now involving 5 clinics.

Considerable debate was generated on bilateral cochlear implantation and the benefits of having two implants in terms of speech perception in quiet and in noise, sound localization ability, and implications for language development in children stemming from restoration of three binaural effects: head shadow, squelch, and binaural summation (which is the capacity to centrally integrate the sound received at each ear). An important point emerging from the debate was that to achieve binaural summation in profoundly deaf children, bilateral implantation is mandatory and should be done before two years of age.

Poland was represented in Valencia by a delegation from the Institute of Physiology and Pathology of Hearing in

Warsaw. The team from the IPPH took part in the round table discussion on cochlear implants, and two of its people gave podium presentations. During the round table session, a proposal for a new Hearing Preservation Classification system, developed by the Herring Group, was presented. In oral communications IPPH gave reports on high frequency hearing loss in school-age children and gave details of a 'LittleEars' questionnaire used to assess auditory development in profoundly deaf children.

The meeting hosts took much care in providing a good atmosphere for the unconstrained exchange of ideas and learning, and to ensure that their guests enjoyed themselves in beautiful Valencia. Valencia is a very friendly, welcoming Mediterranean city rich in historical monuments and modern architecture, and, together with its climate, made these days an unforgettable experience for everyone.

The next 15<sup>th</sup> meeting of MSOA will bring otology and audiology researchers and clinicians together in Cappadocia, Turkey.

