WHO shows it cares about hearing loss

It is not often that ENT topics are the leading stories on the World Health Organization (WHO) website, but with the publication of new prevalence data on hearing loss, to coincide with International Ear Care Day (1 March 2013), this has indeed happened.¹ These new data reveal greatly increased figures for hearing loss. There are an estimated 360 million people with disabling hearing loss worldwide (5.3 per cent of the world's population). The prevalence of disabling hearing loss is highest in the South Asia, Asia Pacific and Sub-Saharan African regions. Approximately one-third of people over 65 years of age are affected by disabling hearing loss. In younger persons, ototoxicity is a much overlooked cause of hearing loss in low and middle income countries, where resources for monitoring serum drug levels and audiometry often do not exist. 2,3

In last month's issue, we highlighted the hidden effects of environmental noise, particularly that generated by wind turbines. The major contributors to environmental noise remain road traffic and aviation. The United Kingdom's Department for Transport recently drafted an Aviation Policy Framework for the UK, which seeks to balance economic and environmental considerations. Such initiatives emphasise the fact that environmental noise is a major public health issue which requires greater awareness.

In this issue, a number of articles focus on important aspects of tonsillectomy. There is increasing pressure on surgeons to carry out tonsillectomy as a day-case procedure. Clement reports that children's eligibility for tonsillectomy with same-day discharge has increased, and that there is an association between

deprivation and tonsillectomy.⁷ Those wishing to justify tonsillectomy on quality of life grounds can refer to the systematic review by Andreou and colleagues, who conclude that the effects are likely to be long-lasting and to have a greater impact on younger patients.⁸ Finally, following their randomised, controlled trial El-Fattah and Ramzy report that preemptive triple analgesia is effective for the control of post-tonsillectomy pain in children.⁹

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