

Cochlear Implants and Its Complications: A retrospective study

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Abstract

Objective: To estimate the prevalence of complications associated with CI. **Design:** Retrospective descriptive study wherein data of surgeries done during April 1994 - March 2016 was analysed. **Setting:** Hospital **Participants:** Patients who underwent cochlear implant. **Outcome measures:** Complications were recorded as surgical and non-surgical; latter were further classified as major and minor. **Results:** 1236 surgeries were performed on 933 pediatric patients (06 months-18 years) and 79 adults. The cause of the deafness was congenital (90.91%), idiopathic (8.30%), and meningitis (0.79%). No speech impairment was seen in eight (0.86%) children. Bilateral profound hearing impairment was common in 99.41% patients. In addition, Mondini's deformity (n=05), auditory neuropathy (n=10), adenoid hypertrophy (n=05) and tongue tie (n=10) were seen in children. Previous CI was reported in 29.46%. Delayed milestones were seen in 13.39%. Hypertension (14.29%) and diabetes mellitus (15.18%) were seen in adult patients. There was history of consanguinity in 60.02% patients. Right cochlear implantation (47.43%), left (31.42%) and Bilateral implantation (21.15%) were done. Reimplantation was required 2.96% patients. Surgeries were performed by two surgeons, 55.34% and 41.50% surgeries respectively, and as a team (3.16%). All pediatric patients had uneventful postoperative period. There were 17 (1.68%) complications in adults; permanent facial nerve palsy (n=04) and flap necrosis (02) were major complications (n=08); labyrinthitis (n=04) and wound infection (n=04) were the minor complications (n=09). **Conclusion:** CI is a safe procedure for restoration of hearing loss and the complications are within the acceptable limits.

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