

Prevalence of malnutrition among Sudanese children with hearing loss

We read with interest the recent paper by Khalifa AF *et al.*^[1] pathological and clinical profile of hearing loss among Sudanese children attending the Khartoum Teaching Hospital. However, there are several points we would like to highlight to bring more clarity to this issue.

1. The sample size was not calculated. As the study population is small, the study may not be powered for the given conclusion. Also, there is no mention of the *P* value for the association of the otitis media with the specific type of hearing loss.
2. Unilateral sensorineural hearing loss (USNHL) is known to impact on school performance and social skills during childhood. Long-term hearing follow-up remains useful in USNHL as it can become bilateral.^[2] The author has not mention the common causes of unilateral or bilateral hearing loss in the children.
3. The basic hearing evaluation for persons of any age is the pure-tone audiogram. The degree of hearing loss is classified as mild, moderate, severe or profound. Therefore, it will be important to know the association of the severity of the hearing loss with the diseases.
4. Patients with mild hearing loss due to otitis media with effusion, on pure tone audiometry was more as compared to moderate hearing loss.^[3] The author mentioned that the history of otitis media in 41% cases. There is a significant relationship between the history of otitis media and conductive hearing loss. It would be nice if author mentioned the specific type of otitis media i.e., acute or chronic otitis media
5. Early-onset permanent hearing loss (EPHL) is highly prevalent among undernourished infants and associated with modifiable risk factors that can be addressed at the community-level.^[4] Early childhood undernutrition is a modifiable risk factor for early adulthood hearing loss. The author have not mentioned the status of the nutrition in the children.

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Conflicts of interest

There are no conflicts of interest.

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