



आरोग्यम् सुखसम्पदा



Make Listening Safe



17th September to 2nd October 2025

**Organized by Sound Hearing 2030 & Maulana Azad Medical College,
New Delhi in collaboration with NIHFV, Munirka, New Delhi**

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Report of Ear & Hearing Screening Camp, National Institute of Health & Family Welfare (NIHFV), Munirka, New Delhi

Date: 23rd -24th September, 2025

Organized by: Sound Hearing 2030 & Maulana Azad Medical College, New Delhi
In collaboration with: National Institute of Health & Family Welfare (NIHFV), Munirka, New Delhi

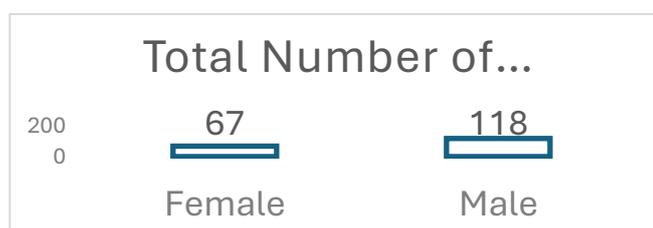
1. Introduction

A comprehensive Ear and Hearing Screening Camp was organized at NIHFV, Munirka, New Delhi, under the joint initiative of *Sound Hearing 2030* and *Maulana Azad Medical College*. The primary objective was to promote ear and hearing health, provide preventive screening, identify common ENT problems, and ensure timely referral and management.

2. Participation

- **Total individuals screened:** 185
- **Age group covered:** 5–77 years (pediatric to geriatric population)
- **Screening conducted by:** ENT specialists, Community Medicine doctors with support staff and audiologists

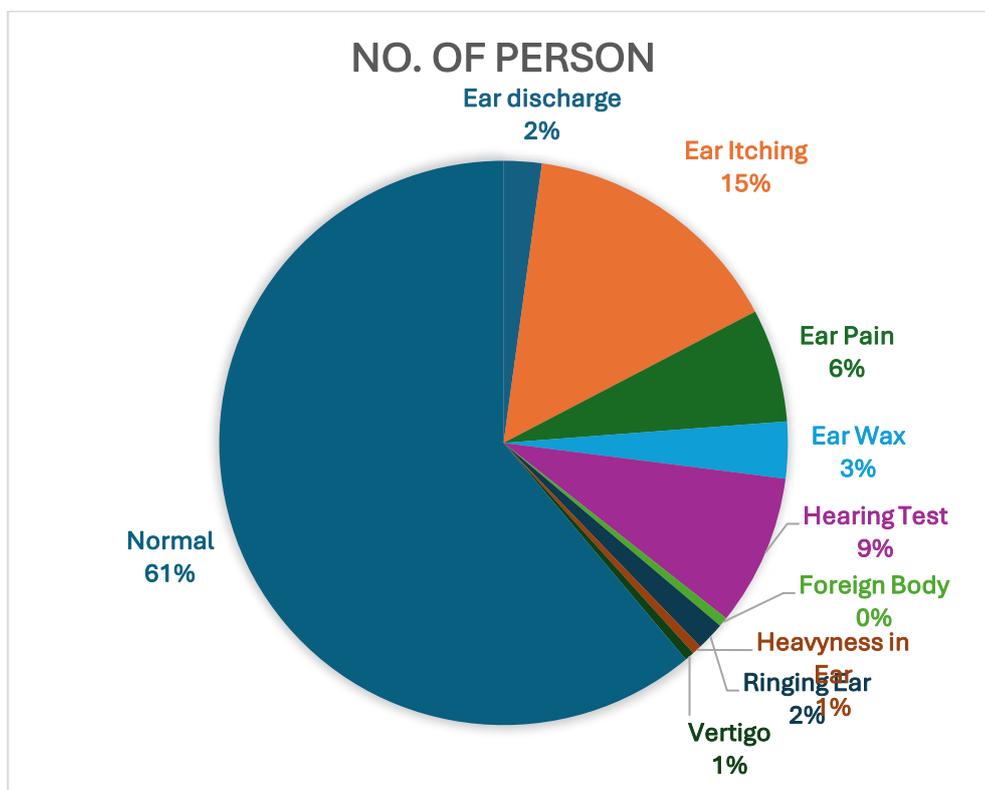
3. In 185 screened individuals 67 were females and 118 were males.



4. ENT Examination Results: Doctors Team of ENT, Community Medicine, MAMC, New Delhi and NIHFV had taken history, screened and referred for Hearing test to those who required. Community Medicine doctors recorded the findings and distributed the medicines to the screened individuals during the Screening Camp. Findings from ENT Examination.

Out of 185 persons examined, the following conditions were observed:

S.No.	Diseases found	Number of Cases
1.	Ear itching / pruritus	27
2.	Ear pain	12
3.	Ear wax (including impacted/B/L)	6
4.	Tinnitus (ringing in the ear)	4
5.	Ear discharge (otorrhea)	4
6.	Foreign body in ear	1
7.	Vertigo	1
8.	Hearing assessment requested	17
9.	Normal	114



Overall outcome:

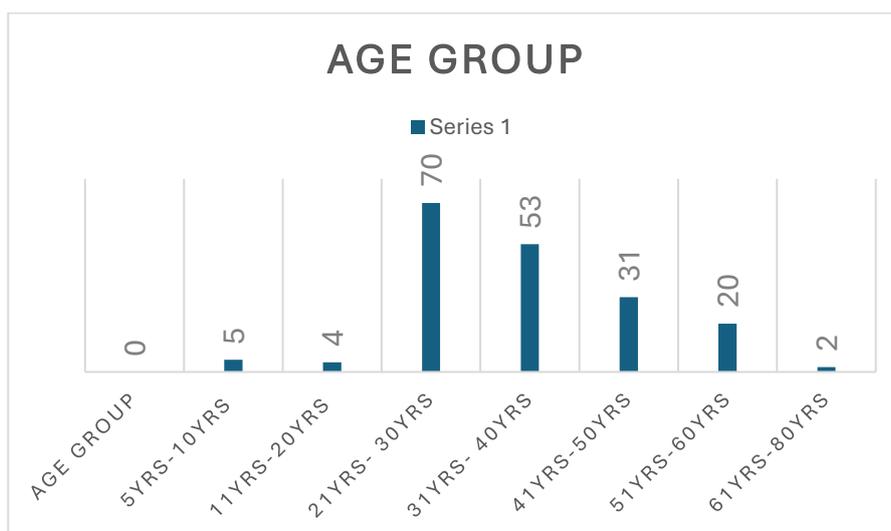
- **Normal findings:** 114 cases
- **Abnormal findings:** 71 cases

5. Audiometry (Hearing Assessment)

A total of **45 participants** underwent audiometric evaluation to assess hearing levels. The testing helped in identifying early signs of hearing loss and the need for further management, including referral to specialized centers.

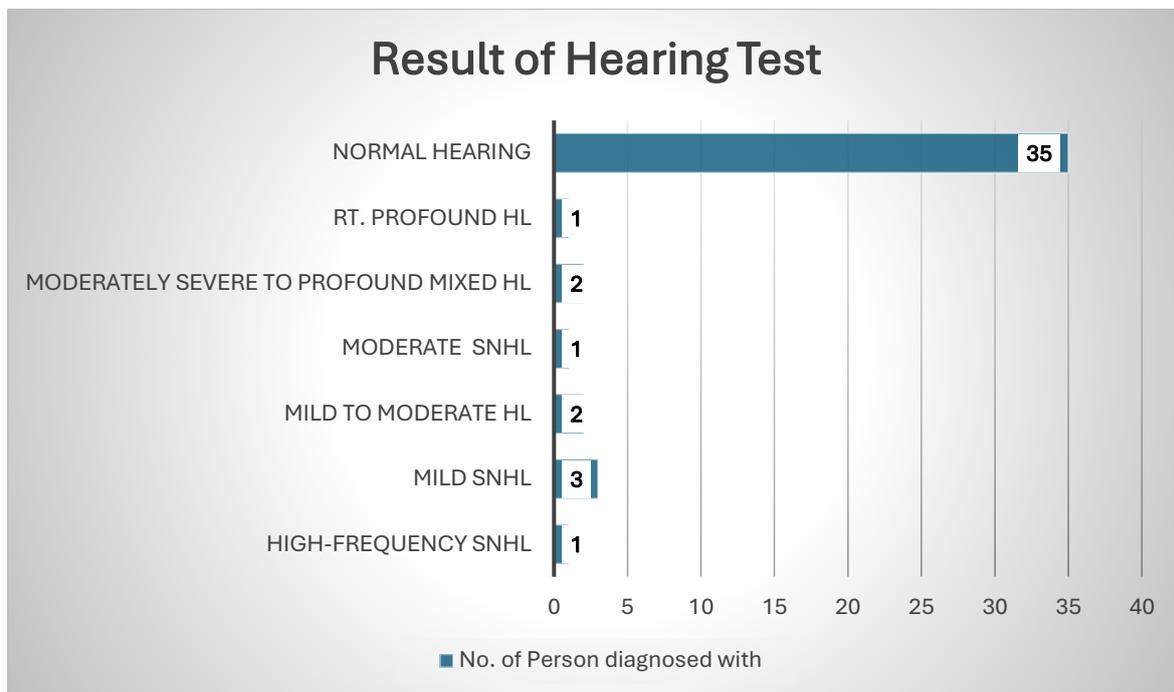
6. Age group distribution of the individuals screened: The age group distribution highlights the participation of individuals across different age ranges. The data indicates a clear dominance of younger adults, particularly those in their twenties and thirties.

- **21–30 years:** This age group has the highest representation with **70 individuals**, reflecting the most active and engaged segment.
- **31–40 years:** The second-largest group with **53 individuals**, showing significant participation among early middle-aged adults.
- **41–50 years:** With **31 individuals**, this group also contributes notably, though less than the younger cohorts.
- **51–60 years:** Participation decreases to **20 individuals**, indicating reduced involvement in later middle age.
- **61–80 years:** Only **2 individuals** are represented, showing minimal participation among senior citizens.
- **5–10 years** and **11–20 years:** Younger age groups contribute **5** and **4 individuals**, respectively, suggesting limited engagement among children and adolescents.



7. Hearing Test Results: Total number of 45 persons were gone through the audiometry testing. The hearing assessment conducted among participants revealed a predominance of normal hearing, with only a small proportion diagnosed with varying degrees and types of hearing loss.

- Normal Hearing: A significant majority, 35 individuals, demonstrated normal hearing ability, indicating overall healthy auditory function in most of the participants.
- Mild Sensorineural Hearing Loss (Mild SNHL): 3 individuals were found with mild SNHL, reflecting early-stage hearing impairment.
- Mild to Moderate Hearing Loss: 2 cases were detected in this category, suggesting moderate-level challenges in hearing.
- Moderately Severe to Profound Mixed Hearing Loss: 2 individuals were diagnosed, showing more advanced forms of impairment involving both conductive and sensorineural elements.
- Moderate Sensorineural Hearing Loss: 1 case was identified.
- High-Frequency Sensorineural Hearing Loss: 1 individual was diagnosed, highlighting frequency-specific loss.
- Right Profound Hearing Loss: 1 case was recorded, representing a severe form of hearing disability in one ear.



8. Key Observations

- High prevalence of **ear itching and ear pain**, suggesting poor ear hygiene and possible environmental factors.
- Presence of **ear wax and otorrhea**, indicating the need for awareness on self-care and timely medical consultation.
- **Hearing difficulties** identified in a considerable number, underlining the importance of regular screening, especially in elderly participants.
- Early detection of **tinnitus and vertigo cases**, which can be linked to lifestyle, occupational exposure, or underlying systemic issues.

- **Variety of Impairments:** Hearing loss cases were distributed across different severities and types, ranging from mild SNHL to profound hearing loss.
- **Early Detection:** The identification of mild and frequency-specific losses emphasizes the importance of screening for timely intervention.

9. Conclusion

The camp successfully screened 185 individuals across a wide age range, identifying both common and specific ENT concerns. With 71 cases showing abnormal findings, the activity highlighted the ongoing need for ear and hearing care initiatives in the community. The integration of ENT examination and audiometry allowed comprehensive assessment, ensuring early detection and timely management of hearing-related conditions.

The data reflects a reassuring picture, with most participants exhibiting normal hearing. However, the presence of different categories of hearing loss, though limited in number, underlines the need for awareness, preventive measures, and early intervention strategies to prevent progression and to support those affected.

10. Recommendations

1. **Regular ENT and Hearing Camps** – to be organized at institutional and community levels.
2. **Awareness Campaigns** – to educate people on ear hygiene, prevention of ear infections, and risks of self-cleaning.
3. **Early Referral System** – linking abnormal cases with higher referral centers for timely management.
4. **Hearing Conservation Programs** – particularly for elderly and high-risk occupational groups.
5. **Integration with Primary Healthcare** – training of frontline health workers to identify and refer suspected hearing cases early.







