



# PROCEEDING BOOK

*19<sup>th</sup>* ASEAN ORL-HNS CONGRESS  
*in conjunction with*  
*11<sup>th</sup>* **INDONESIAN ORL-HNS SCIENTIFIC MEETING**

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ISBN: 978-623-98585-0-6

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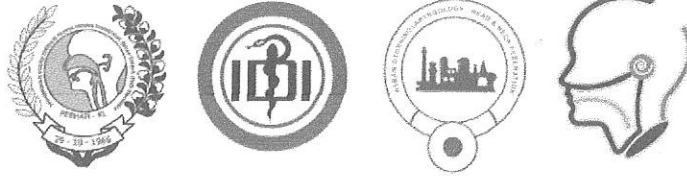
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**19<sup>th</sup> ASEAN ORL-HNS CONGRESS**  
**in Conjunction with**  
**11<sup>th</sup> INDONESIA ORL-HNS SCIENTIFIC MEETING**

**“Come with a New Spirit of ASEAN Solidarity”**

**MEDAN, INDONESIA, OCTOBER 21<sup>st</sup>-23<sup>rd</sup>, 2021**



**PUBLISHER :**  
**YAYASAN PERHATI SUMATERA UTARA**



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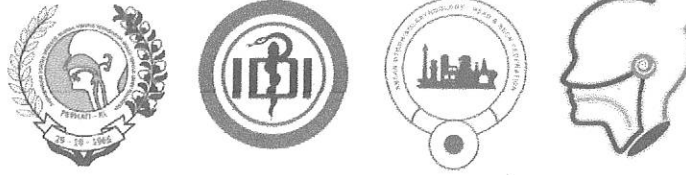
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## **WELCOME SPEECH CHAIRMAN OF ASEAN ORL-HNS CONGRESS**

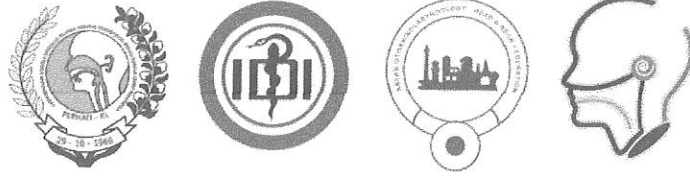
Proceeding Book of 19<sup>th</sup> ASEAN ORL-HNS Congress in Conjunction with 11<sup>th</sup> Indonesian ORL-HNS Scientific Meeting was initiated and organized by ASEAN ORL-HNS Federation. This electronic proceeding aims to provide an opportunity to present and share the latest innovations and results of studies in Otorhinolaryngology-Head and Neck Surgery.

This electronic proceeding's purpose is to provide international sources of information to all ENT specialists and other health professionals who are interested in the science of ORL-HNS in the future. Also, it is expected to improve communication between ORL-HNS doctors so that it has an impact on the development of knowledge regarding and stimulates further education, competency, and equality for ORL-HNS specialists and how roles and activities of ORL-HNS doctors in building communities in Southeast Asia.

Electronic Proceeding of 19<sup>th</sup> ASEAN ORL-HNS Congress in Conjunction with 11<sup>th</sup> Indonesian ORL-HNS Scientific Meeting will be reviewed by experts. This proceeding book publishes original research, review articles, and case reports. We are very thankful to everybody within this community who supported the idea of establishing and developing in Proceeding Book of the 19<sup>th</sup> ASEAN ORL-HNS Congress in Conjunction with the 11<sup>th</sup> Indonesian ORL-HNS Scientific Meeting. We do hope this proceeding book is useful and acceptable to the readers.

Medan, October 2021

Prof. Dr. dr. Farhat, M.Ked(ORL-HNS), Sp.T.H.T.K.L.(K)  
Chairman of ASEAN ORL-HNS Congress



## **WELCOME SPEECH CHAIRWOMAN OF PERHATI-KL INDONESIA**

Assalamu'alaikum Wr Wb

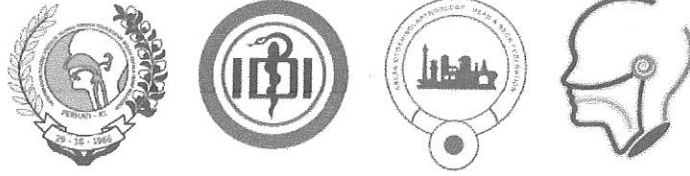
First of all, I would like to congratulate the North Sumatra branch of the PERHATI-KL for working hard to prepare for this event. The 19th ASEAN ORL HNS Congress in Conjunction with the 11th Indonesian ORL-HNS Scientific Meeting was held, hoping that all participants can broaden their horizons, improve competence, and open future research opportunities.

This significant event is one of the efforts to increase the knowledge of PERHATI-KL members of Indonesia, considering that there are still many things that need further discussion and research. There are still many ORL-HNS health problems in Indonesia that require the hard work of all PERHATI-KL members. I hope that this event can discuss current developing knowledge and research opportunities in the future.

Thank you to all speakers and instructors, the committee of The 19th ASEAN ORL-HNS Congress in Conjunction with 11th Indonesian ORL-HNS Scientific Meeting, and all parties who have contributed to organizing this event. This event was successful with the help of many parties. Therefore, we would like to thank the many parties who have helped organize this event.

At this event, research results, reviews, and case reports were presented by researchers. The results of the seminar are then documented in this proceeding. Hopefully this event and proceeding will be useful for readers, both PERHATI-KL members and the health of the Indonesian people.

Prof. Dr. dr. Jenny Bashiruddin, Sp.T.H.T.K.L.(K)  
Chairwoman of PERHATI-KL Indonesia  
(Indonesian Otorhinolaryngology-Head and Neck Society)



## **WELCOME SPEECH**

# **PRESIDENT OF ASEAN OTORHINOLARYNGOLOGICAL HEAD AND NECK FEDERATION**

Dear all colleagues and friends,

It is an honour to welcome all ASEAN and other countries ORL-HNS specialist on 19th Asean ORL-HNS Congress and 11th Indonesian ORL-HNS Scientific Meeting. This congress is very special for us because we hope will be held on the end of Covid-19 pandemic, where until know the Covid-19 still spread on most countries in the world, by this situation the congress be held by virtual platform.

By the theme "Come with New Spirit of Asean Solidarity" 19th Asean ORL-HNS congress an Conjunction with 11th Indonesian ORL-HNS Scientific Meeting it will bring to a new level ASEAN ORL-HNS cooperation that will provide platform for all ORL-HNS specialist to share the knowledge experience discuss and argument any controversial issues and updated of knowledge and technology for variety ORL-HNS problems. This event became one of the venues for ORL-HNS specialists to present their research, as well as exchange information and deepen research issues, as well as develop sustainable collaboration.

The committee has worked very hard to ensure this event becomes the most memorable ASEAN ORL-HNS event. Not forgetting also to all those who have provided support for the organization of this event and for the preparation of this proceeding. I think as long as ASEAN ORL-HNS Federation Congress this is the first scientific proceeding be edited by the committee. I hope that this proceeding can provide benefits for all parties. Many thank you for all committee had work very professionally.

Finally, the committee would like to apologize profusely for all the shortcomings in organizing this event, starting from the socialization of the activities until the publication of this proceeding.

dr. Soekirman Soekin, Sp.T.H.T.K.L.(K), M.Kes  
President of ASEAN Otorhinolaryngological Head and Neck Federation

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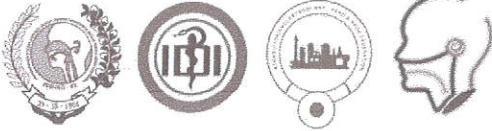
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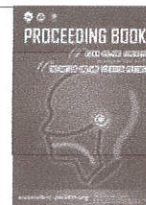
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## TRANSADAPTATION AND VALIDATION OF TINNITUS PRIMARY FUNCTION QUESTIONNAIRE (TPFQ 12 AND TPFQ20) IN INDONESIA LANGUAGE

**Nyilo Purnami<sup>1\*</sup>, Nico Probosutejo<sup>2</sup>, Budi Utomo<sup>3</sup>**

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### Abstract

**Introduction:** Tinnitus is the perception of sound, which is not produced intentionally, and the comes from an involuntary way in the owner's head. The questionnaire consists of 20-item and 12-item questions representing 4 independent domains, namely emotion, hearing, sleep and concentration.

**Objective:** to transadaptation and validity TPFQ-12 and TPFQ-20 in Indonesian which were applied to Tinnitus patients at the URJ Audiology Unit Dr. Soetomo Hospital Surabaya.

**Methods:** The design of this research is descriptive analytic with crosssectional approach. This research was conducted at the Outpatient Polyclinic. This research was conducted from September 2019 until April 2020. Data was Collected using general ear examination, DPOAE and audiometry as well as filling out a questionnaire.

**Results:** In the most hearing, hearing was not normal is 27 people (77.2%). Cronbach's Alpha value on item 12 questions is 92% while on item 20 questions is 95%. Based on the correlation coefficient on the TPFQ-12 all significant 0.000 p value <0.01 with a correlation value of  $r > 0.6$ .

**Conclusion:** There is no difference between the Tinnitus primary function Questionnaire in question 12 and question 20. Question 12 valid and reliable can be used and represents question 20.

### Article Info

#### Keywords:

transadaptation, validation, TPFQ-12, TPFQ-20

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## 1. INTRODUCTION

Tinnitus is a common clinical symptom. Tinnitus is the perception of sound, which is not produced intentionally, and that comes from an involuntary way in the owner's head, or it may seem to him to do. This condition is chronically experienced by a large proportion of the population (>15%) and severely debilitates about 1-2% of the population, affecting sleep, concentration, and productivity at work.<sup>1</sup> In many cases of tinnitus can not be eliminated, the best treatment for tinnitus sufferers is how to reduce the impact of tinnitus on the patient. Tinnitus affects the quality of life of sufferers, One of the treatments that can be done is tinnitus counseling and currently several studies have provided counseling via the internet.<sup>2</sup>

Research from Franke et al (2012) states that 30-40% of the adult population has experienced tinnitus and 0.5-2.5% of them have impaired quality of life.<sup>3</sup> World prevalence reports that around 10-20% of the population has experienced tinnitus symptoms.<sup>4</sup> Tinnitus symptoms occur in almost 61% of the young adult population (Crandell et al., 2004).<sup>5</sup> A report from the Neurotology division of the audiology section of RSUD DR. Soetomo reported that from 2016-2018 there were 420 patients who came to the Audiology clinic with complaints of tinnitus. Male patients are the most patients with a total of 315 patients compared to women as many as 105 patients where the most patients are at the age of 31-40 as many as 232 patients.

Attempts have been made to establish consensus for patient assessment and outcome measurement.<sup>6,7,8</sup> However, recent systematic reviews have shown that more than 100 instruments were used for primary outcome measures in clinical trials (Hall et al., 2016).<sup>9</sup> Several questionnaires are widely used worldwide, including the Tinnitus Handicap Inventory (THI)<sup>10</sup>, the Tinnitus Handicap Questionnaire (THQ). However, the THI could not distinguish between sleep disturbances, difficulty concentrating, decreased social enjoyment, and hearing loss. In addition, THI cannot play a role as a guideline in the treatment of tinnitus.<sup>11</sup> Recent research has found that the latest questionnaire

developed by Richard Tyler (2014) is valid, reliable, and sensitive and can be used as a tool to measure the quality of life of tinnitus patients. The questionnaire consists of 20-item and 12-item questions representing 4 independent domains, namely emotion, hearing, sleep, and concentration, known as the Tinnitus primary function questionnaire.

The tinnitus primary function questionnaire was previously developed at the University of Iowa and has been translated into various countries such as China and Sweden. This questionnaire has received validation permission and was developed into Indonesian from Prof. Tyler straight away. It is hoped that this questionnaire can be applied and used as a measuring tool for the quality of life of tinnitus sufferers in Indonesia. Therefore, as a first step, research needs to be done to translate the questionnaire into Indonesian and validate it on the patient.

## 2. MATERIAL AND METHODS

This research is a descriptive analytic study where this study uses a cross sectional research approach where both variables are observed at the same time at the same time. This research was conducted at the Outpatient Clinic (IRJ) audiology RSUD Dr. Soetomo was conducted in September 2019 to April 2020. This study will determine whether the Tinnitus primary function questionnaire which has been developed into Indonesian and is valid to be applied to tinnitus patients in measuring the patient's quality of life.

All research samples will receive treatment: providing information, consent to participate in the study, general ear examination, examination using DPOAE and Audiometry and filling out a questionnaire. The sampling technique was carried out by consecutive sampling that met the inclusion and exclusion criteria. The inclusion criteria in this study were that the patient had unilateral or bilateral tinnitus, had been suffering from tinnitus for 3 months, and was willing to be a respondent. While the exclusion criteria were suffering from hearing loss other than tinnitus, refusing or not attending the scheduled examination.

The data processing and analysis of the questionnaire results for each

factor were tested for validity and reliability using the Cronbach's alpha test ( $p > 0.5$  = reliable) with the help of the SPSS program which previously tested the normality of the data first. Different test using Mann Whitney test and T-Test.

### 3. RESULT

In this study there were 35 respondents who suffered from tinnitus for 3 months. Based on the most age distribution in the age range 17-29 and 60 years and over, namely 8 (22.8%), age 30-39 is 7 (20%), age 40-49 is 6 (17.2%) and age 50-39. 59 which is 6 (17.2%). While the most gender is female, namely 21 people (60%) and 14 people (40%). The highest hearing threshold value (NAD) was at normal and mild degrees, namely 8 people (22.8%), moderate 7 people (20%), moderate-severe 6 people (17.2%), weight 4 people (11.4%), and very heavy 2 people (5.8%). The most hearing was abnormal hearing, namely 27 people (77.2%) while the normal hearing was 8 people (22.8%).

In the results of the questionnaire reliability test, the value of Cronbach's Alpha on the 12 questions item is 92% while the 20 questions item is 95%. Based on the correlation coefficient on the TPFQ-12 all significant 0.000 p value  $< 0.01$  with a correlation value of  $r > 0.6$ . In Question-1= 0.78; Question-2 = 0.84; Question-3 = 0.86; Question-4= 0.70; Question-5= 0.60; Question-6= 0.61; Question-7= 0.70; Question-8= 0.79; Question-9= 0.68; Question-10= 0.79; Question-11= 0.71; and Question-12=0.74.

Based on the correlation coefficient on the TPFQ-20 all significant 0.000 p value  $< 0.01$  with a correlation value of  $r > 0.6$ . In Question-1= 0.84; Question-2 = 0.69; Question-3 = 0.70; Question-4= 0.76; Question-5= 0.80; Question-6= 0.74; Question-7= 0.80; Question-8= 0.79; Question-9= 0.81; Question-10= 0.68; Question-11= 0.63; Question-12=0.73; Question-13= 0.77; Question-14= 0.77; Question-15= 0.59; Question-16= 0.70; Question-17= 0.70; Question-18= 0.73; Question-19= 0.68; Question-20= 0.77.

Based on the distribution of the TPFQ questionnaire, there are 4 variables, namely PKONS, PEMS, PPEND, and PTIDR. The average of PKONS20 is 45.2; PEMS 20 is 62.2; PPEND20 is 44.8, and PTIDR 20 is 36.8, while the mean of PKONS12 is 49.1; PEMS 12 is 55.6; PPEND12 is 46.5, and PTIDR 12 is 36.3.

Based on the results of the Mann-Whitney difference test on TPFQ12-TPFQ 20, it was found that all the variables in the questionnaire did not differ between TPFQ12 and TPFQ 20. The concentration variable P12-P20 had a p-value of 0.595, emotion P12-P20 had a p-value of 0.954, Hearing P12-P20 p-value is 0.052, and Sleep P12-P20 p-value is 0.664.

### 4. DISCUSSION

The Tinnitus Main Function Questionnaire is a new questionnaire (TPFQ) specially designed to evaluate the outcome and effect on tinnitus experienced by patients. In this study, the questionnaire focused on four subcategories, namely emotion, concentration, hearing and sleep. This affects the life of a person in socializing and relaxation.<sup>11</sup> The benefit of the TPFQ is that it provides information about the severity of tinnitus and symptoms experienced, as well as providing information related to several subcategories (concentration, emotion, hearing and sleep scale).

The purpose of this study was to evaluate the reliability and validity of the Tinnitus questionnaire on 20 questions and 12 questions in Indonesian which would later be applied to patients with Tinnitus. The questionnaire consists of 20-item and 12-item questions representing 4 independent domains, namely emotion, hearing, sleep, and concentration, known as the Tinnitus primary function questionnaire. The results of this study showed that the questionnaire on 20 questions and 12 questions was valid and reliable.

The results of this study are comparable with research by Tyler, 2014 that the TPFQ in Indonesian is comparable to the original TPFQ. Cronbach's alpha values range from 0.81 to 0.94 for the original TPFQ, while in this study Cronbach's TPFQ alpha value of 20 questions was 0.95 and in TPFQ 12 questions is 0.93. So it can be concluded from this study that the question 12 tinnitus questionnaire can represent questions 20, as evidenced by the Cronbach's alpha value and the p value of the different test. In this study, there was no difference between item 20 and item 12 questions related to tinnitus.

This is also supported by Chinese research explaining that the 20-item and 12-item versions of the Chinese TPFQ Questionnaire are reliable and valid measures of tinnitus. The TPFQ can be used in the assessment and management of tinnitus among the Chinese-speaking population.<sup>12</sup>

### 5. CONCLUSION

The questionnaire consists of 20-item and 12-item questions representing 4 independent domains, namely emotion, hearing, sleep, and concentration, known as the Tinnitus primary function questionnaire. There is no difference between the Tinnitus primary function Questionnaire in question 12 and question 20. Question 12 valid and reliable can be used and represents question 20.

### ACKNOWLEDGMENT

The Author like to thank all the member of Audiology unit in the General Hospital Dr. Soetomo Surabaya for research support.

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