

FEATURES OF COCHLEAR IMPLANTATION REHABILITATION

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ABSTRACT

This article highlights current problems with the rehabilitation system for children with cochlear implants.

It reflects the work being done, the preparation of children with hearing impairments for surgery and the postoperative practice.

Keywords: cochlear implant, correction, rehabilitation, surdopedagogics.

Special education is a conducive environment for children with hearing and hearing impairments to have equal opportunities with all other citizens, to overcome their limitations in life, to lead a full life, to participate actively in the social, economic and political life of the society and to fulfill their civic duties. - creation of conditions is the main essence of the humanitarian policy of our state.

We can say that deafness drives people away from society. Today, cochlear implantation allows deaf people to hear even the lowest sounds. Cochlear implantation helps a person with hearing impairment to return to hearing, thus leading to work and life. A deaf child with cochlear implants will have the opportunity to understand and speak. The implantation of a two-year-old child will allow him to develop and integrate fully as a normal child. To date, there is no doubt that cochlear implantation is one of the most effective methods of rehabilitation for children and adults with hearing defects.

Usually, normal hearing function in healthy people is related to the activity of the ear tissues of the ear. In most cases of hearing impairment these cells are in some way defective. As a result of cochlear implantation, it is these cells that are artificially restored by electrical stimulation. As a result, an implanted patient will be able to hear sounds. However, it is important to remember that after cochlear implantation, the patient, as well as all others, will not be able to read sound easily. This will require time and special conditions, pedagogical, medical and psychological. Receiving sounds and speech is a complex process. Speech and perception of sounds develop slowly over age. This is why a person who is not accustomed to perceiving external sounds suddenly has difficulty perceiving it. In addition, given that imitation occurs in healthy individuals, teaching a patient with cochlear implants in a later process is also a complex process. Cochlear implantation is organized in three stages:

- preparation stage;
- the surgical stage;
- post-surgery phase.

Each stage is important, and the patient will have a positive impact if the tasks are fulfilled. This practice is a complex process. Therefore, it requires a multilateral approach. In any case, this surgery may not be effective. Usually, the age of the surgery is not clearly defined. Cochlear

implantation is possible for patients of any age from the age of two. Only the general health and physical condition of the patient undergoing an operation is taken into account. As mentioned above, surgery in any case may not be effective. For its implementation the following should be considered:

- preservation of auditory nerve fibers;
- absence of ear oblique obstruction;
- absence of somatic diseases.

Additionally, cochlear implantation will take into account the patient's hearing. For example, if a patient can hear 30-40% of speech in a normal hearing aid, cochlear implantation can have a very effective effect on it. Here is another criterion. It is also important to determine if the history of deafness occurs before or after speech development, because correction of the child is more straightforward if the child is deaf. In most cases, such people still have some speech remains. This facilitates their ability to integrate into the process of speaking and to master the speech.

Children with cochlear implants should be aware of various adverse conditions (during sports and work activities) during their lifetime. It is desirable that parents and educators pay serious attention to this.

T.D. Sharmanjnova systematized criteria for medical analysis of auditory perception dynamics of clients using cochlear implants. These criteria of the scientist make it possible to analyze the effectiveness of staged types of work on hearing perception of speech and non-speech sounds in children.

Modern models of cochlear implants provide children with good speech hearing and full social rehabilitation of children with hearing loss during speech development. After cochlear implantation, children can hear normal sounds, orient themselves in the sound environment: Only they need continuous hearing-speech rehabilitation.

Mental development of children with cochlear implants is important in preparing them for auditory and speech activities. Because any action is pre-estimated, its plan is drawn up through thinking, and the result - the goal is achieved. Therefore, preparing children with cochlear implants for speech activity is in harmony with the task of their intellectual development.

By acquiring speech, the child also acquires concepts such as objects, symbols, action and attitude. In this he not only acquires knowledge, but also learns to think, because to think is to speak inside or out, and to speak is to think.

After acquiring speech, a child with a cochlear implant begins to interact with the world around him, and his worldview expands. Now he interacts not only with the object, but also with the object that he has not seen at all or does not exist in his personal experience at the moment (travels to fairy tales, listens to how the people in the stories lived and reflects). A child with a cochlear implant uses speech to express his thoughts and feelings, that is, to influence the people around him. It is important that the speech is expressive, emotional and connected.

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