HEARING



Objectives		Methods	HEARING CRC
To examine The influence of prescription on hearing aid (HA) fitting characteristics and developmental outcomes of hearing-impaired children at five years of age.	<page-header><text><text><text><text><text><text><text><text><text><text><text></text></text></text></text></text></text></text></text></text></text></text></page-header>	Design • A randomised controlled trial of hearing aid prescription in L • N = 163 hearing-impaired children (NAL: n= 89; DSL: n=74 $p_{00}^{125} = 250 \ 500}_{120}$	4)

Nethods		► CR
Characteristics	NAL group (n=89)	0.05 DSL group (n=74)
Gender (Male), No. (%)	57 (64.0%)	40 (54.1%)
Presence of additional disabilities (AD), No. (%)	30 (33.7%)	22 (29.7%)
Age at hearing aid fitting (months), Mean (SD) Median Interquartile range	11.2 (10.7) 6.0 3.0-17.0	10.0 (10.5) 4.0 2.0-18.8
Degree of Hearing Loss * (4FA HL in better ear) %: Mild (≤ 40 dB): %: Moderate (41-60 dB) %: Severe (61-80 dB)	20.50% 22.50% 57.30%	20.30 % 31.10% 48.60%
Cognitive ability (WNV) [®] N Mean (SD)	76 100.9 (17.2)	63 104.1 (16.0)
Median	100.0	105.0
Interquartile range (IQR)	91.0-116.0	95.5-116.5

Methods	
Fitting outcomes	
Fit-to-target	

- Deviations (dB) of measured couple gains from prescriptive targets at each frequency for each input level;
- Averaged root-mean-square (rms) error across four frequencies for each input level;

Aided Audibility Two versions of speech intelligibility index models

• ANSI SII (ANSI, 1997)
$$SII = \sum I_i A_i$$

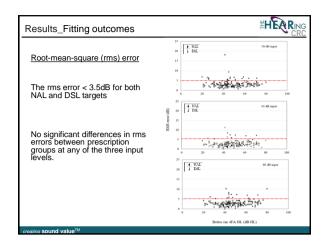
• Desensitized SII (Ching et al., 2011) $k' = \left[\left(\frac{k}{30} \right)^p + m^p \right]^{1/p}$

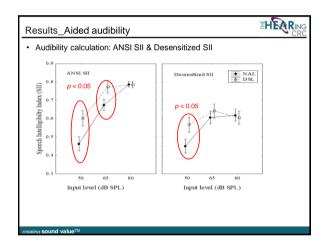
Speech and language outcomes

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Speech and language outcomes Measure Purpose PLS-4 Receptive (auditory comprehension, AC) and expressive communication, EC) language PPVT-4 Receptive vocabulary DEAP Speech production WNV Nonverbal cognitive ability BKB/NU-CHIPS Speech preception in noise PEACH Auditory functional performance	lethods	žHE
PLS-4 Receptive (auditory comprehension, AC) and expressive (expressive communication, EC) language PPVT-4 Receptive vocabulary DEAP Speech production WNV Nonverbal cognitive ability BKB/NU-CHIPS Speech perception in noise	peech and langua	ige outcomes
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DEAP Speech production WNV Nonverbal cognitive ability BKB/NU-CHIPS Speech perception in noise	PLS-4	
WNV Nonverbal cognitive ability BKB/NU-CHIPS Speech perception in noise	PPVT-4	Receptive vocabulary
BKB/NU-CHIPS Speech perception in noise	DEAP	Speech production
· · · · · · · · · · · · · · · · · · ·	WNV	Nonverbal cognitive ability
PEACH Auditory functional performance	BKB/NU-CHIPS	Speech perception in noise
	PEACH	Auditory functional performance

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		N	AL		DSL	Difference
		n	Mean (SD)	n	Mean (SD)	p value
No significant between-group differences in speech production, perception, and lanquace, except for PEACH	PLS-4_AC	77	85.6 (19.4)	71	88.2 (18.2)	0.39
	PLS-4_EC	77	85.6 (18.6)	71	85.4 (18.35)	0.95
	PPVT	74	91.0 (16.2)	67	90.9 (17.9)	0.98
	DEAP_PCC	78	4.1 (2.1)	70	4.0 (1.6)	0.95
	DEAP_PVC	78	5.0 (2.6)	70	5.1 (2.6)	0.81
language, except for PEACH	PEACH-quiet	66	79.4 (15.3)	60	86.3 (11.5)	0.01
	PEACH-noise	66	71.7 (18.5)	60	75.8 (13.8)	0.16
	PEACH_Total	66	75.9 (15.5)	60	81.5 (11.0)	0.02
	SNR_ S ₀ N ₀	59	4.1 (3.2)	60	3.6 (3.3)	0.35
	SNR_ S ₀ N ₄₉₀	59	1.2 (3.3)	60	1.2 (3.8)	0.98
	SRM	59	2.7 (3.3)	60	2.3 (3.0)	0.43

Conclusion	HER RING	Acknowledgements
 Proximity to prescriptive targets were similar betwee prescriptions; Significant difference in aided audibility between prelow but not at medium and high input levels, when dwas considered; Parent-rated functional performance scores were high than for the NAL group; The speech production, speech perception, receptive expressive language were not significantly different to prescription groups at 5 years of age. 	scriptions at esensitization her for the DSL e and	 We gratefully thank all the children and their families for participation in this study. The project described was partly supported by Award Number R01DC008080 from the National Institute on Deafness and Other Communication Disorders. Supports for this research were also provided by the HEARing CRC, and OHS, Department of Health, Australia. We thank all the speech pathologists in LOCHI team for their assistance in data collection and transcription.
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