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NAL
National Acoustic Laboratories

Listening difficulties can be caused by deficits in auditory processing, speech processing, cognition and language

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Macquarie University

National Acoustic Laboratories,

University of Manchester

Hearing CRC

CHSCOM

Linköping

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Thanks to my collaborators

Sharon
Cameron



Pia
Gyldenkaerne



Wayne
Wilson



Mridula
Sharma



Tony
Sirimanna



Kiri
Mealings



Helen
Glyde



Mark
Seeto

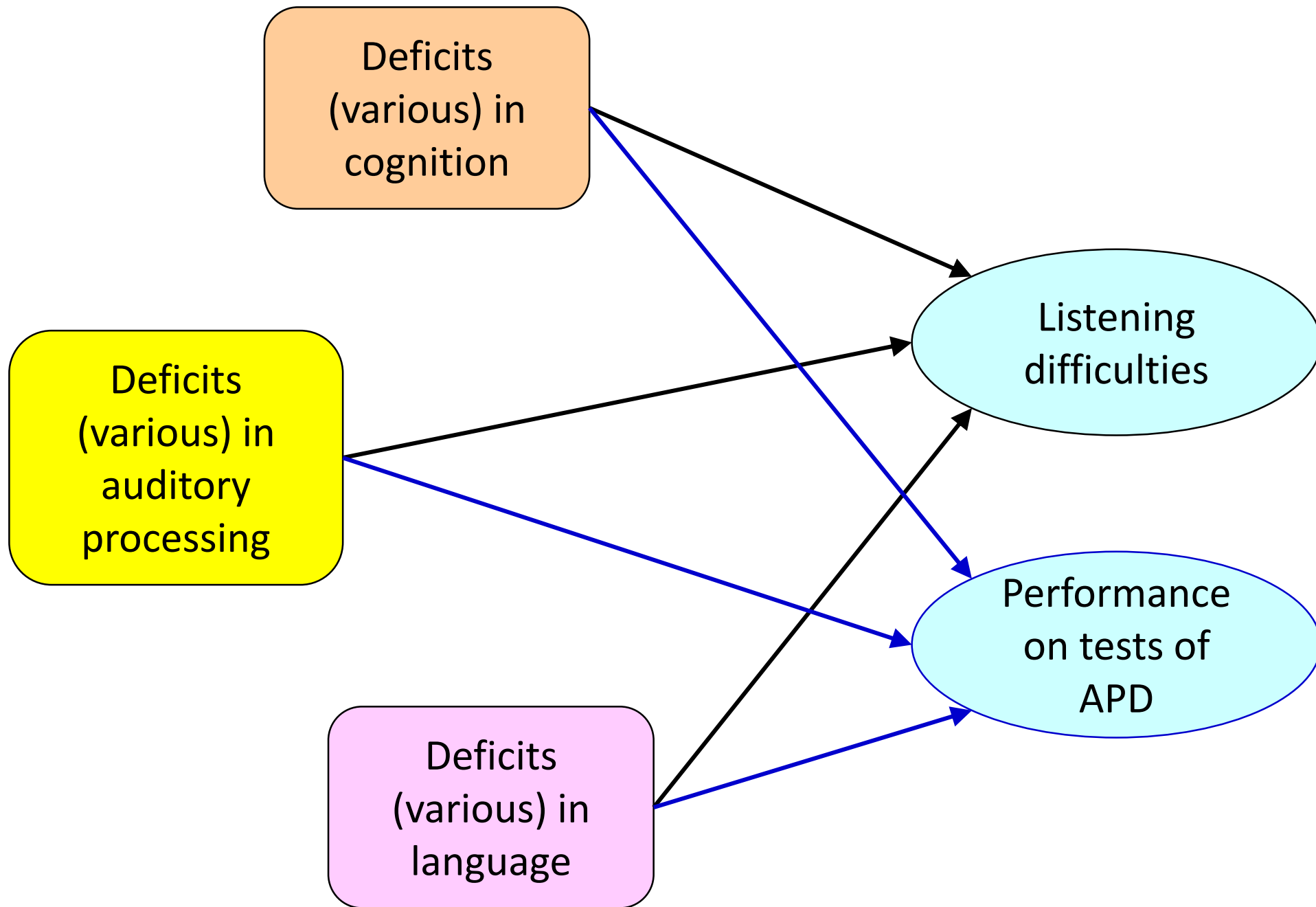


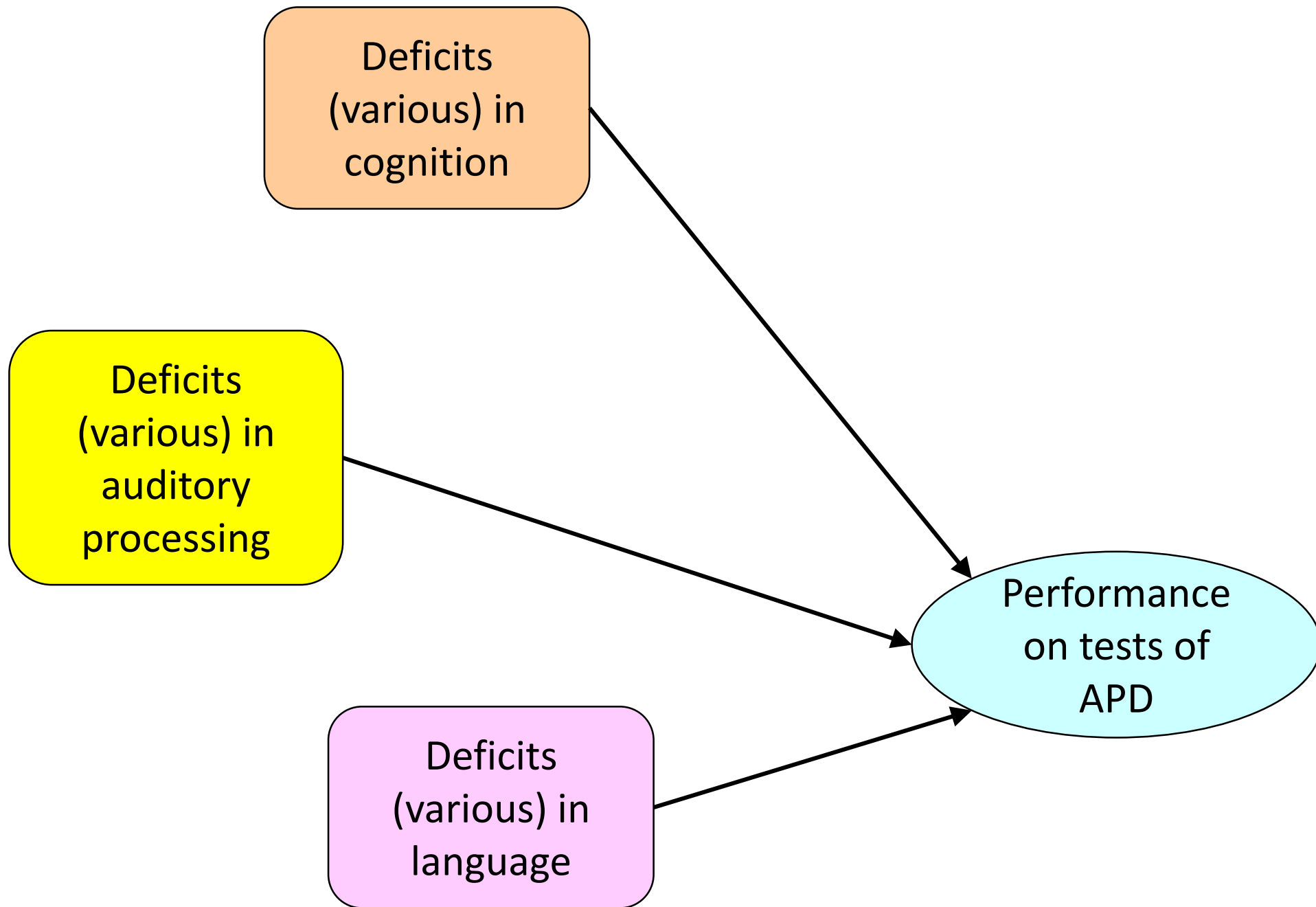
Dani
Tomlin



What you might remember

- Listening difficulties have multiple causes, which need to be allowed for, and quantified.
- Diagnosing the type(s) and extent of auditory processing disorder present requires quantitative control of the effects of:
 - Memory,
 - Attention,
 - Intelligence, and
 - Language,

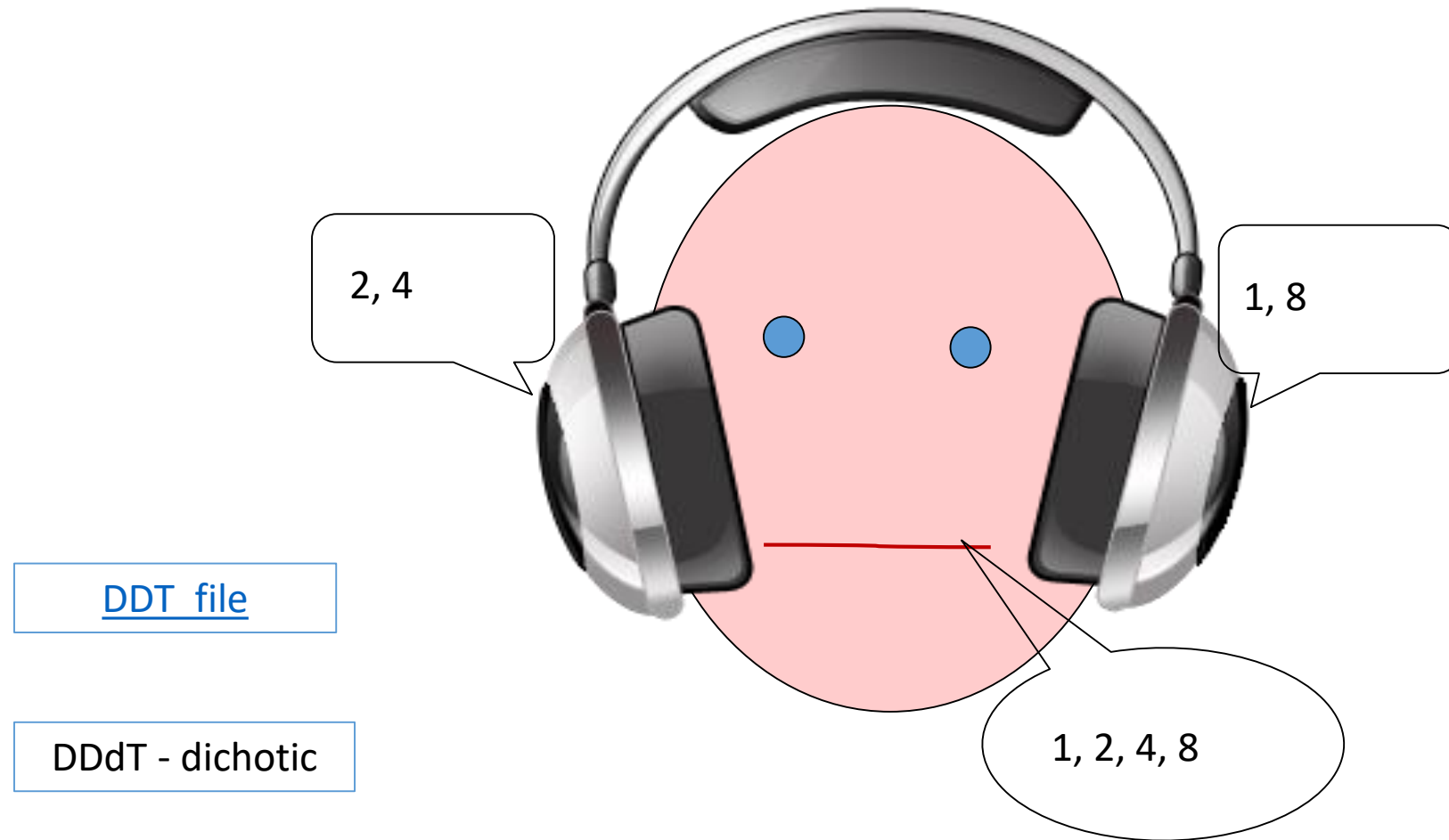




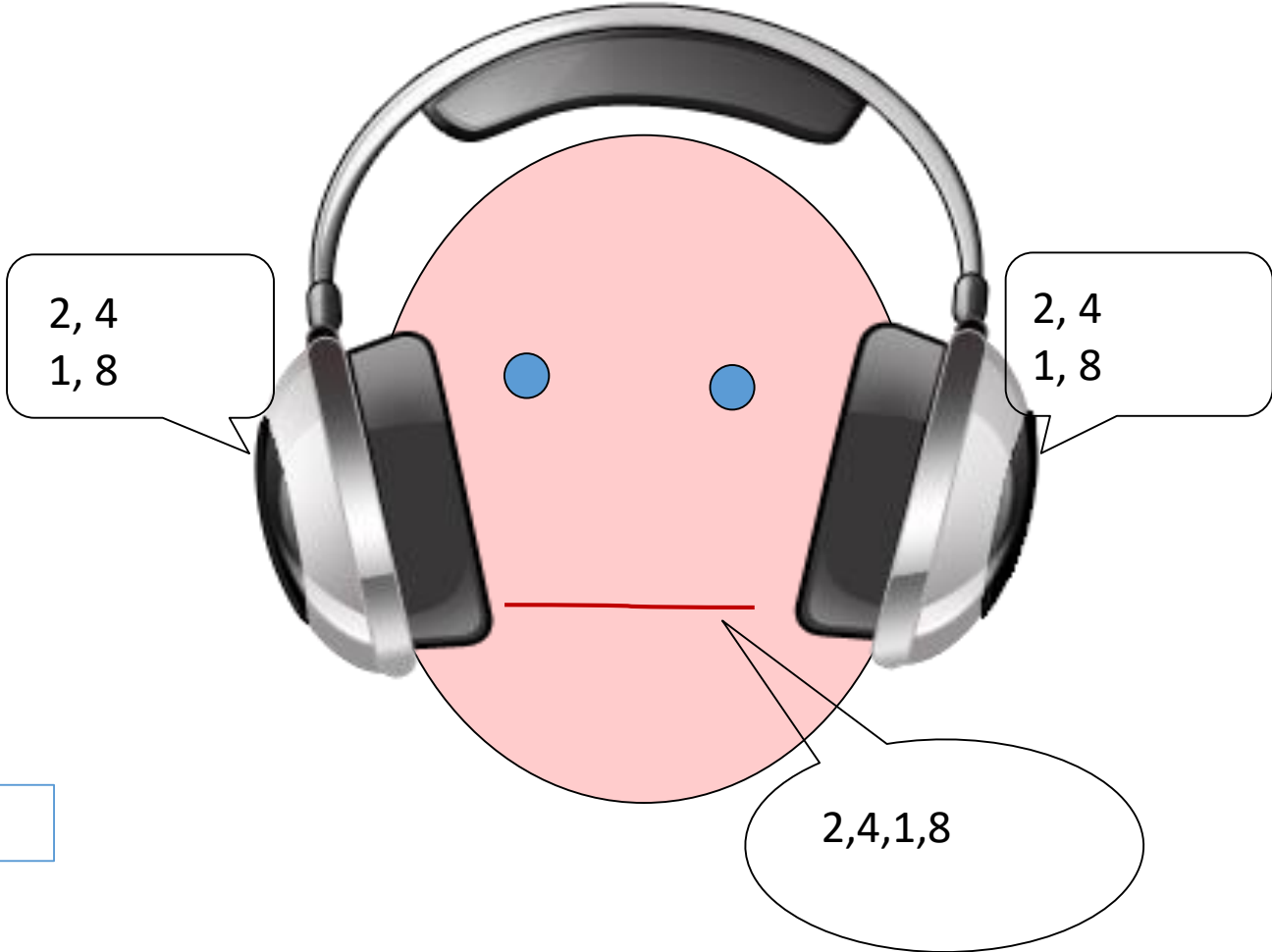
Example of a test that tests multiple abilities

- Dichotic digits test – Musiek (1983) - 333 citations
- Easy to administer and score
- Often failed by children seeking APD assessment

Dichotic Free Recall Paradigm



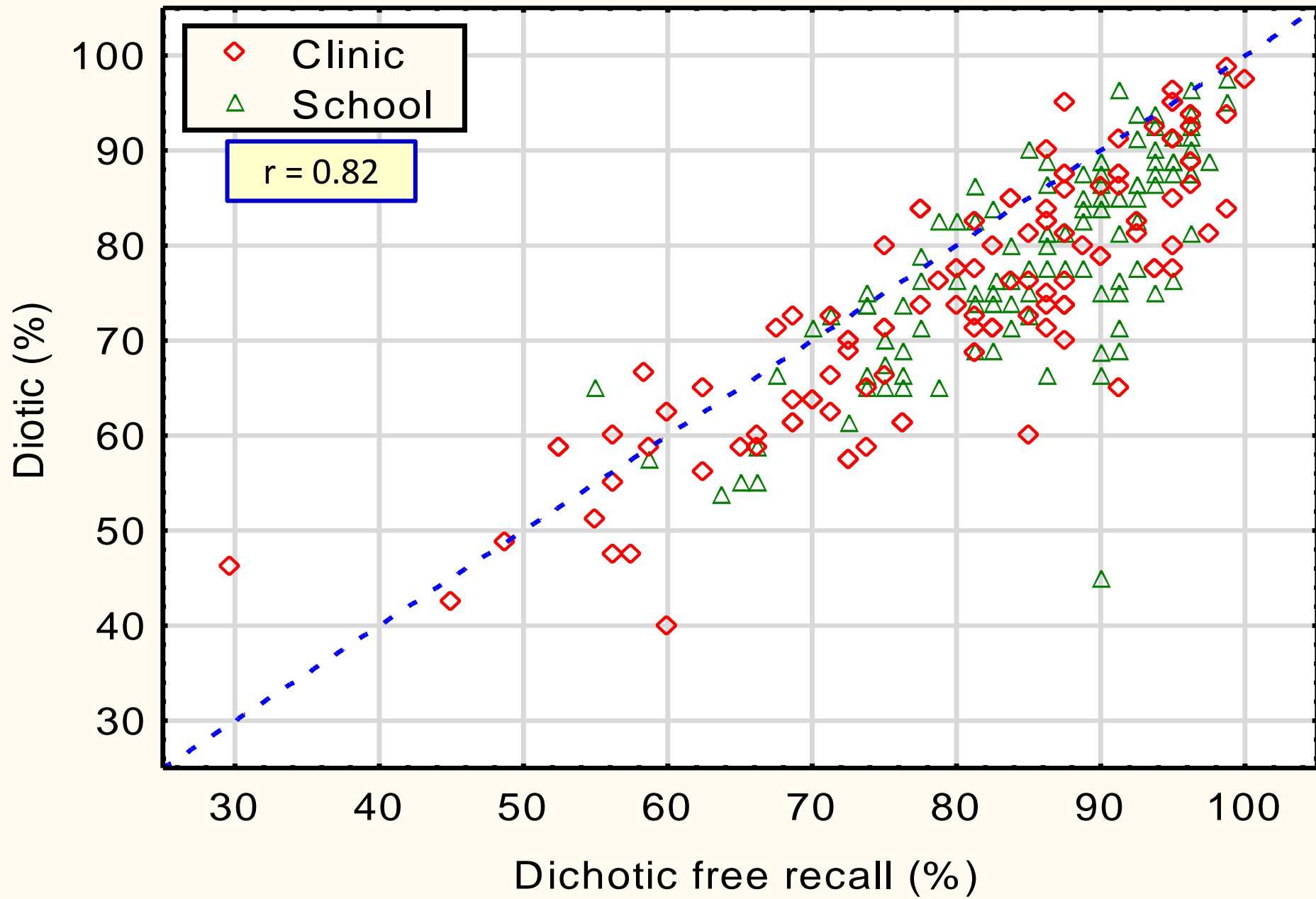
Diotic Paradigm



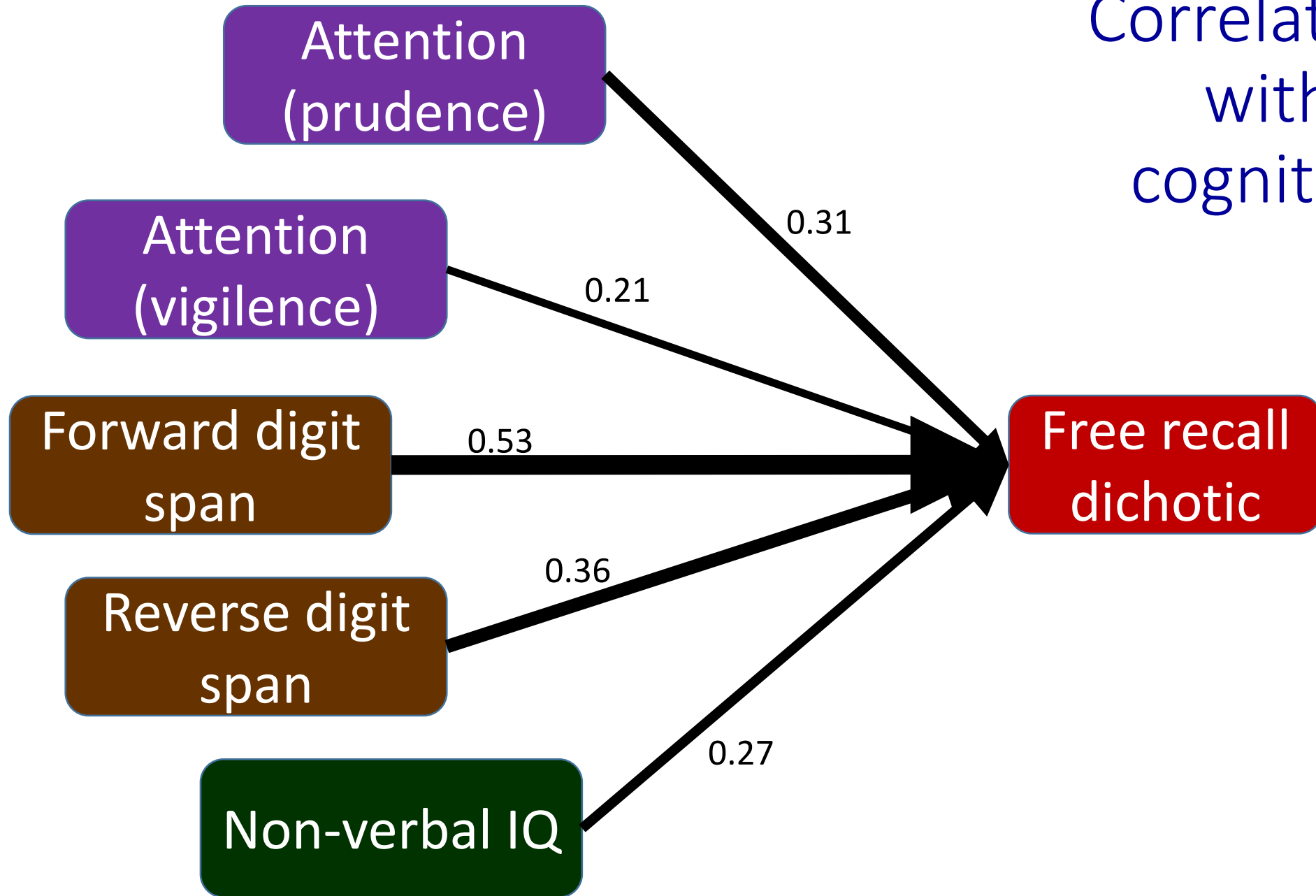
DDdT - diotic

Dichotic
Digits
difference
Test

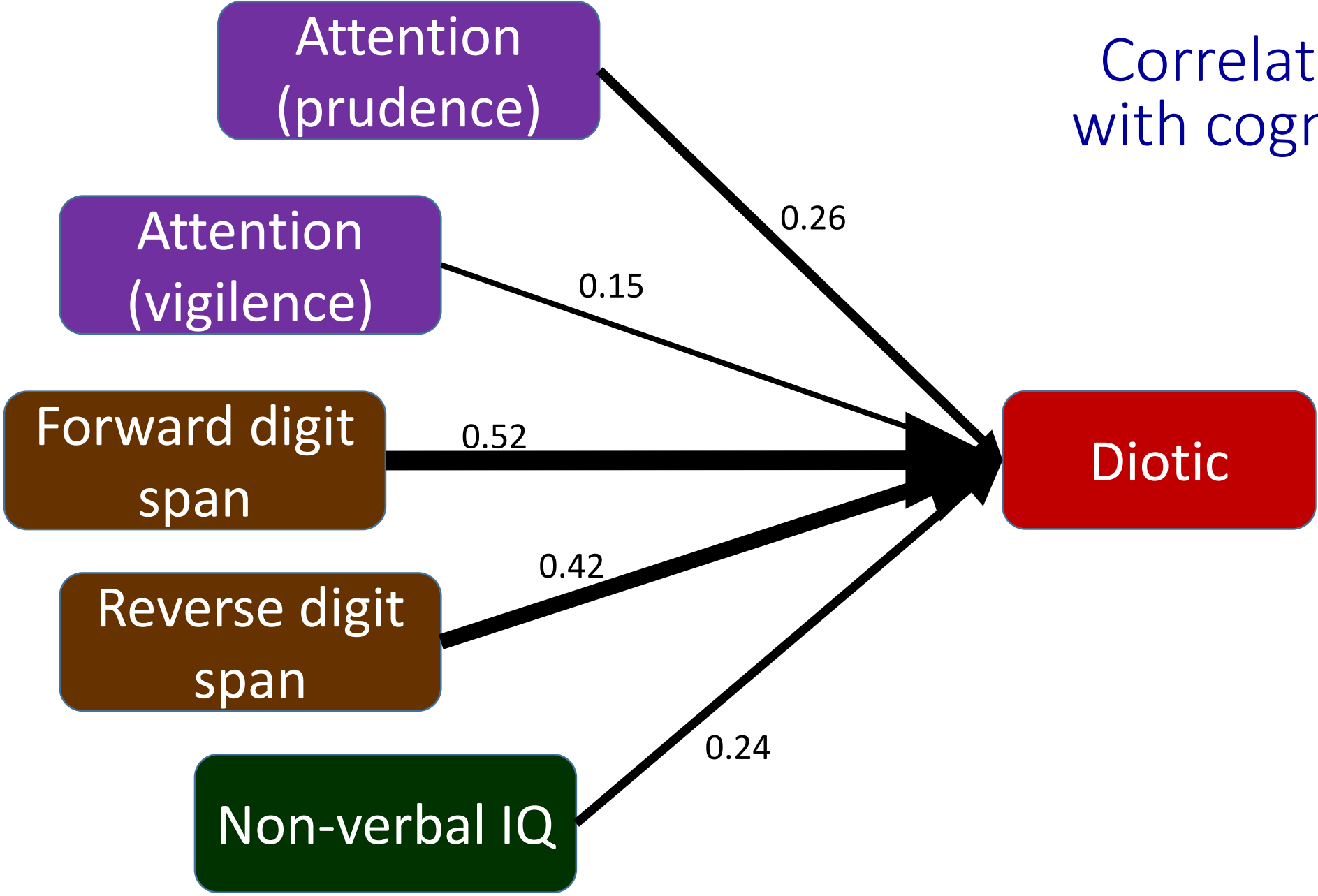
Dichotic versus diotic (%)



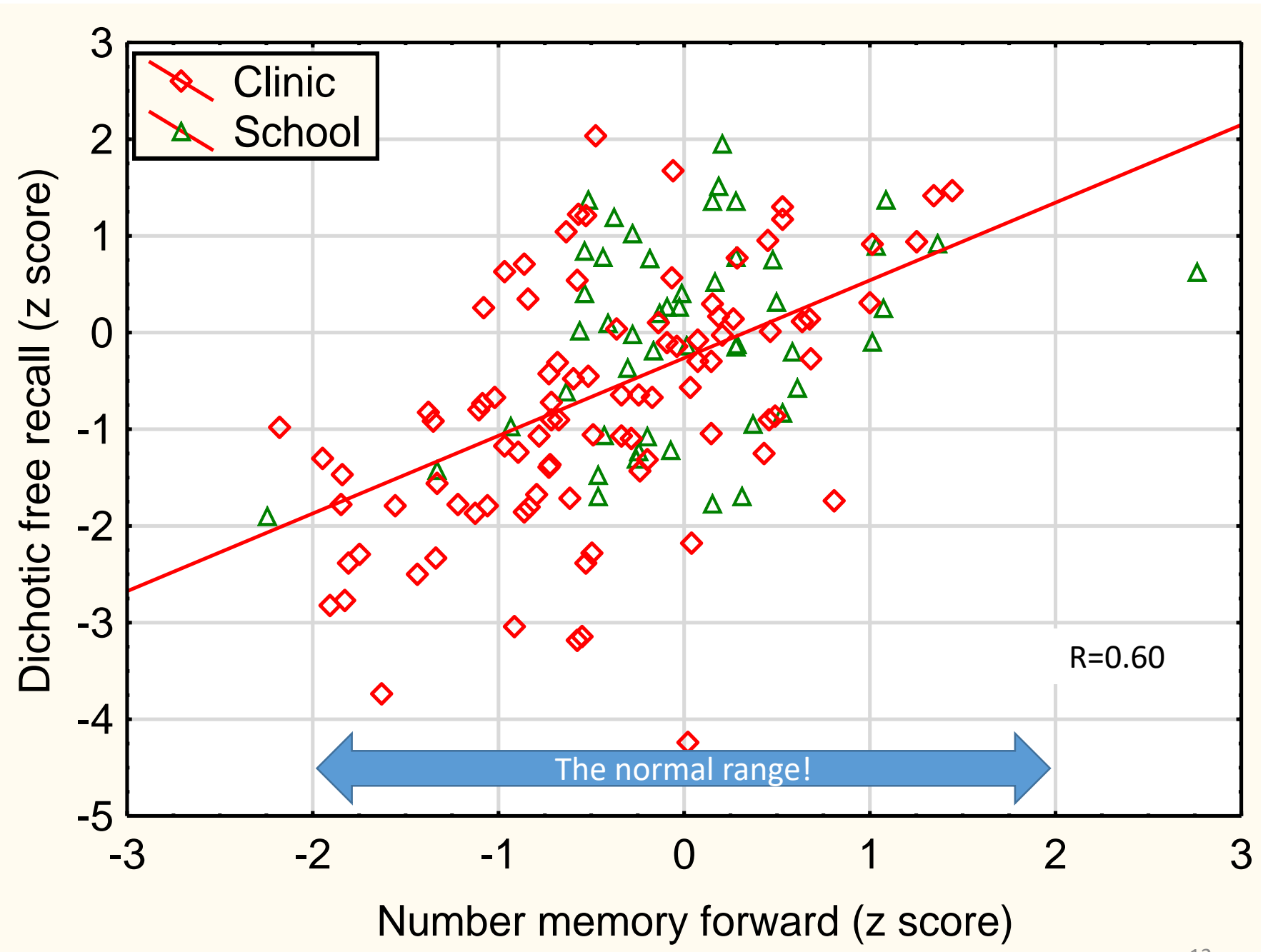
Correlations with cognition



Correlations with cognition



Dichotic scores and memory



Accounting for variance

Memory

Other non-dichotic factors

Random measurement error

Dichotic factors

27%

9%

Dichotic test scores

64%

64%
+27%
91%

.. and then there's attention!

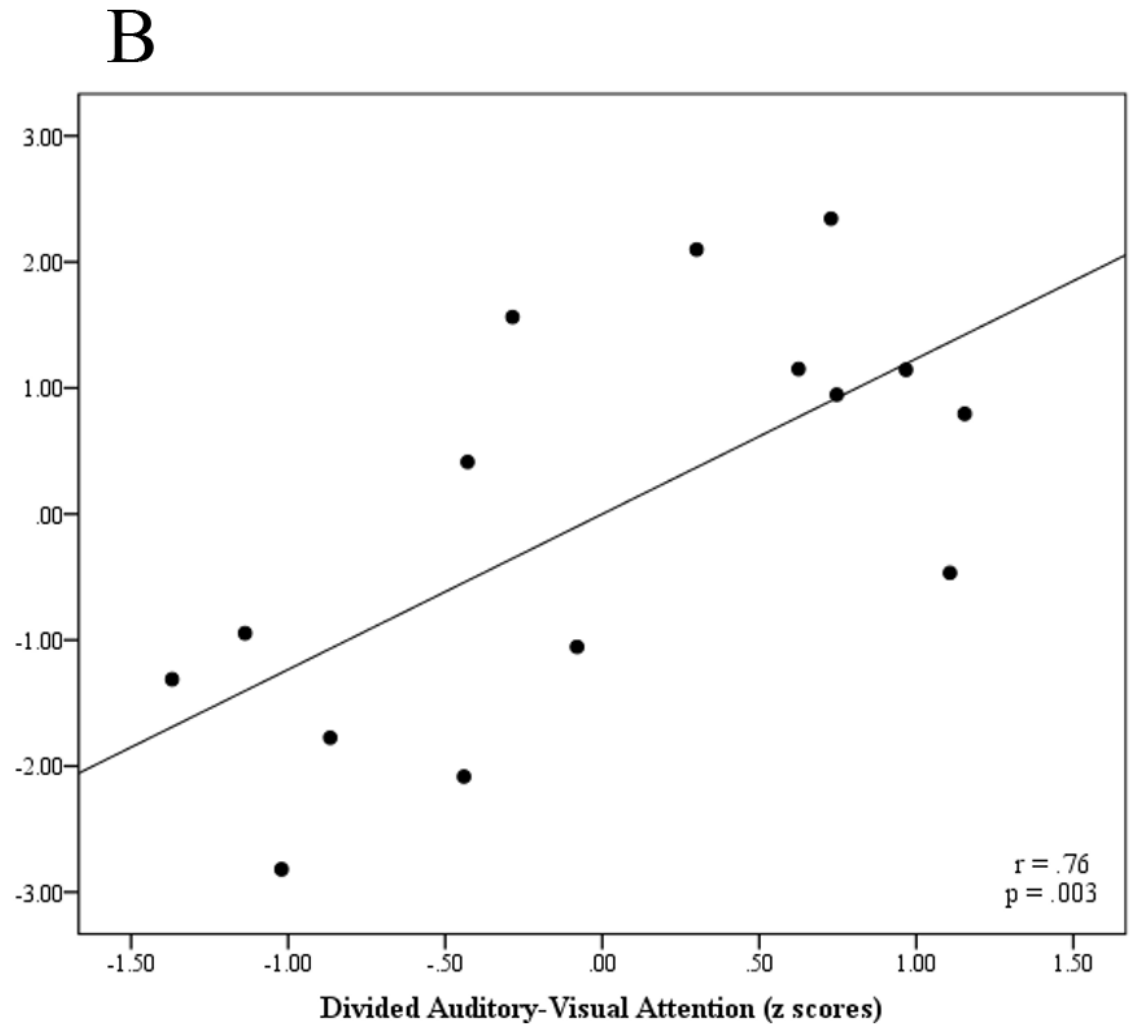
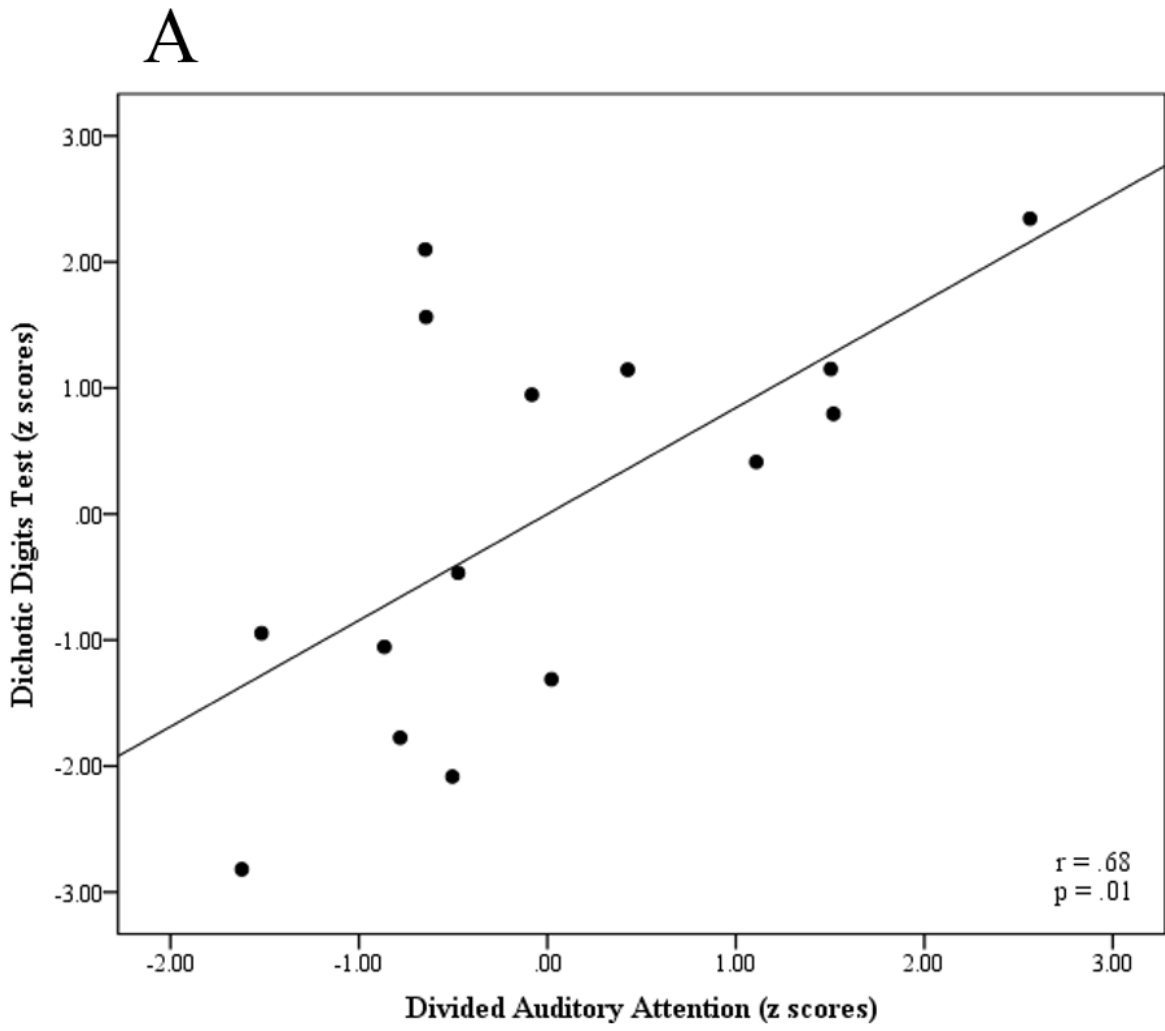
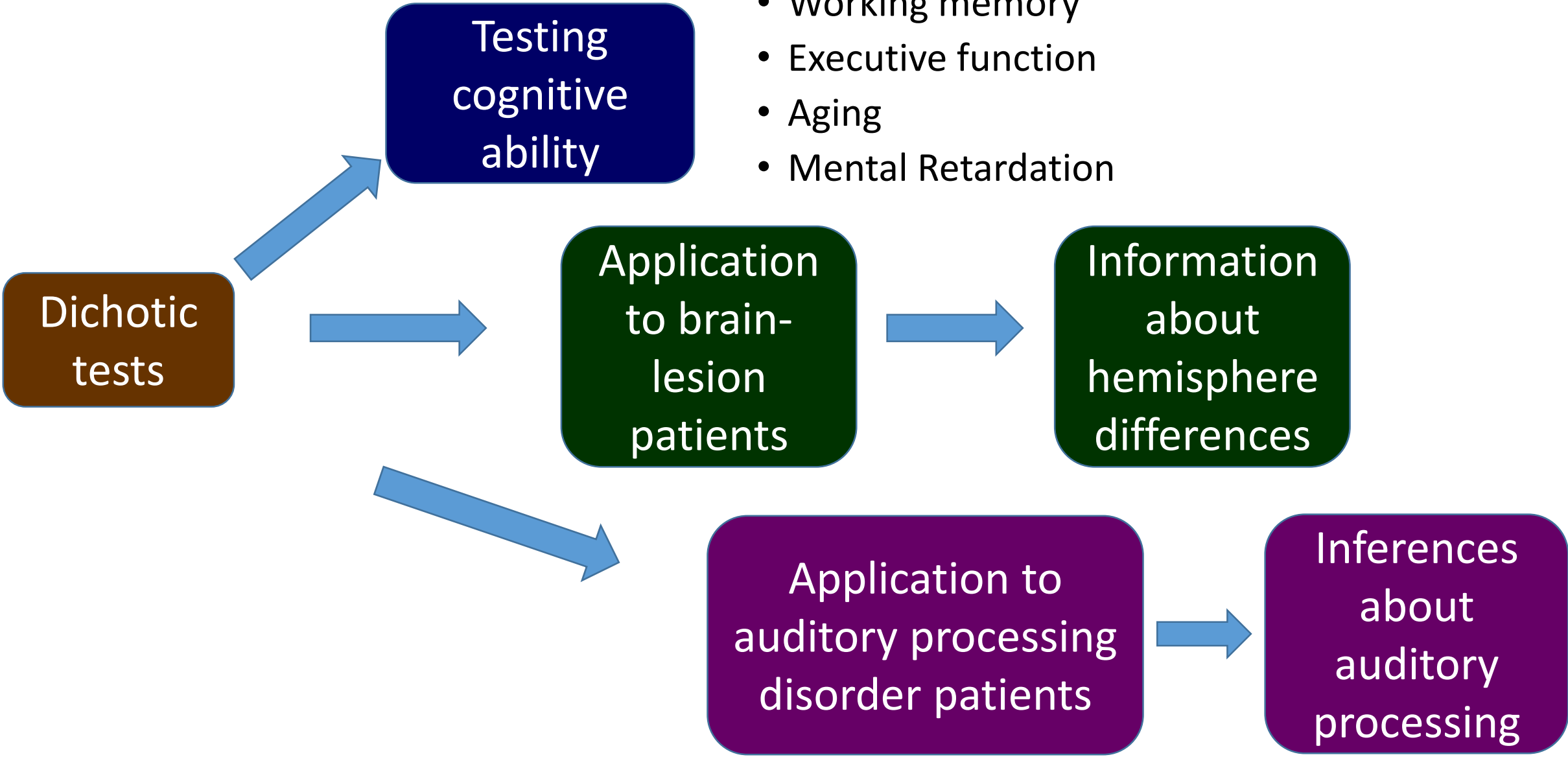


Fig 1 from Stavrinos (2018)

- Selective attention
- Working memory
- Executive function
- Aging
- Mental Retardation



Cognitive deficits



Brain "lesions" in Central Auditory Nervous System



Low dichotic test scores

What *not* to do in “sensitising” a test

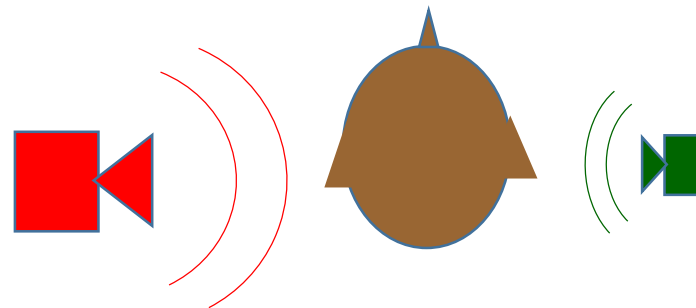
Problem: A test gives ceiling performance for too many people

Usual solution: Make the test harder by demanding additional skills:

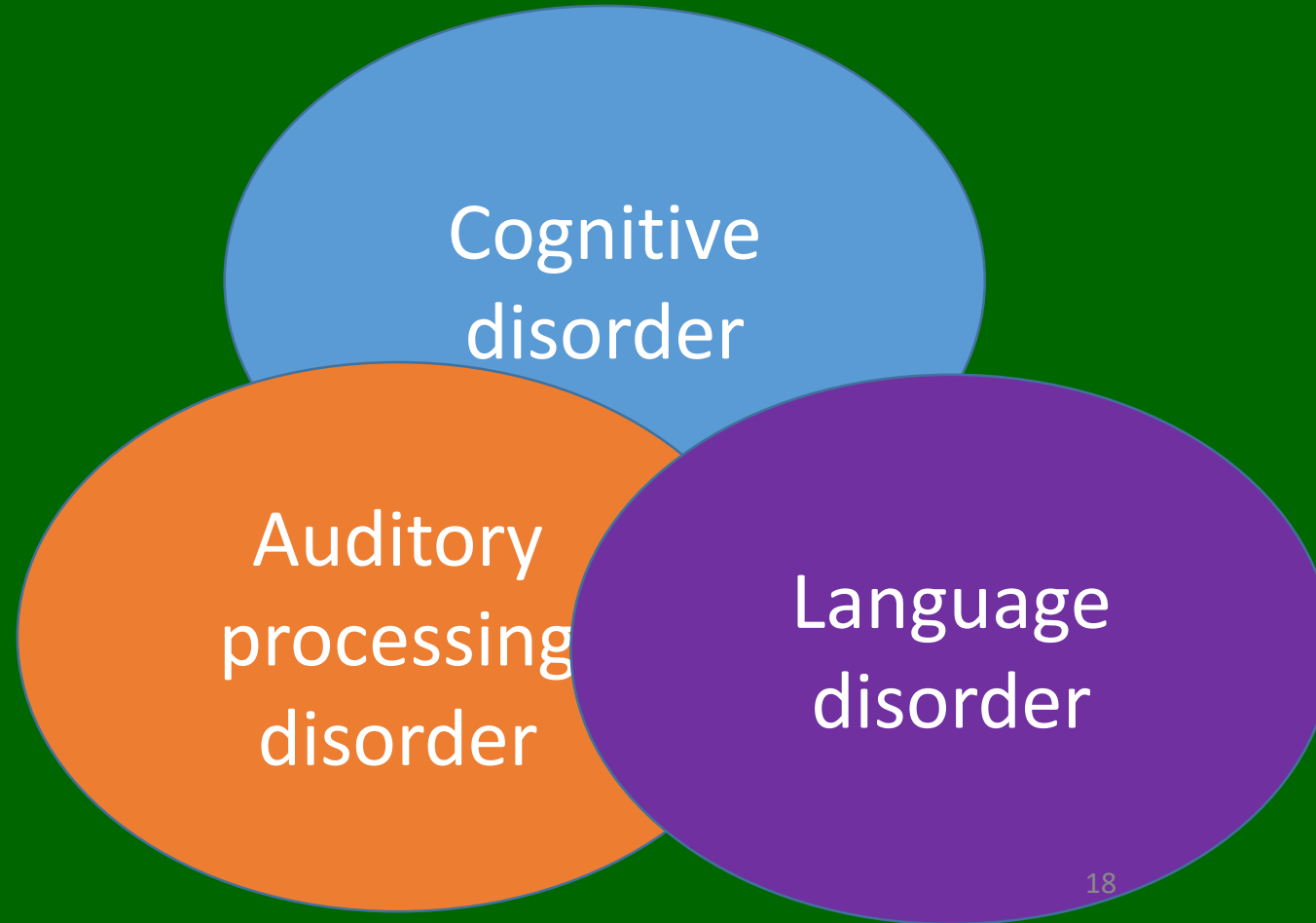
- dichotic digits – make it two pairs, or three pairs → memory ↑
- speech tests – low-pass filter it → vocabulary ↑, phonetic awareness ↑

Result: Scores decrease below ceiling, but cause become uncertain

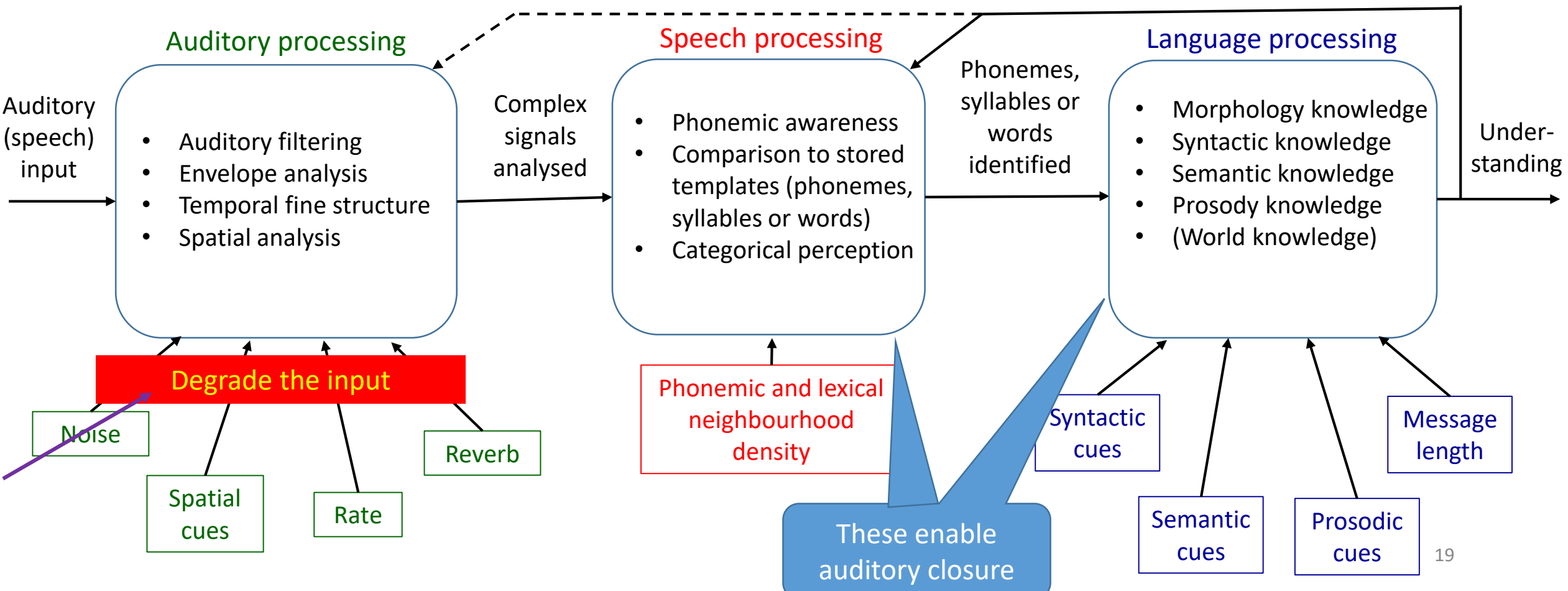
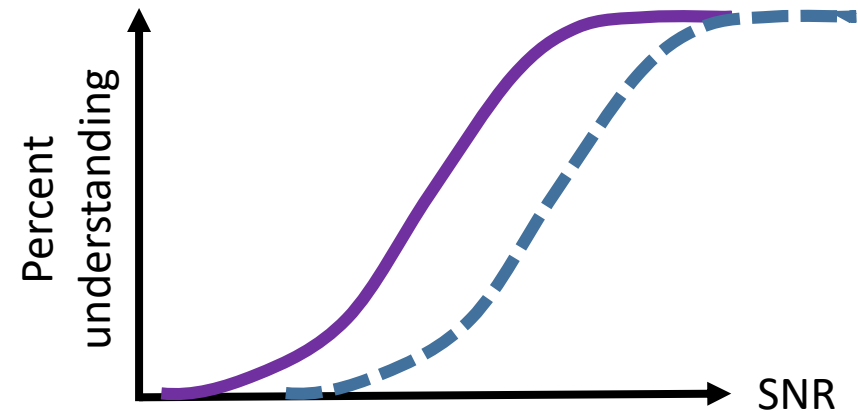
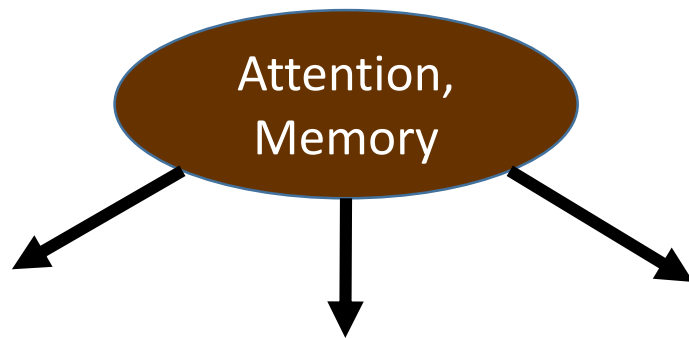
An alternative: Adaptively change inter-aural level



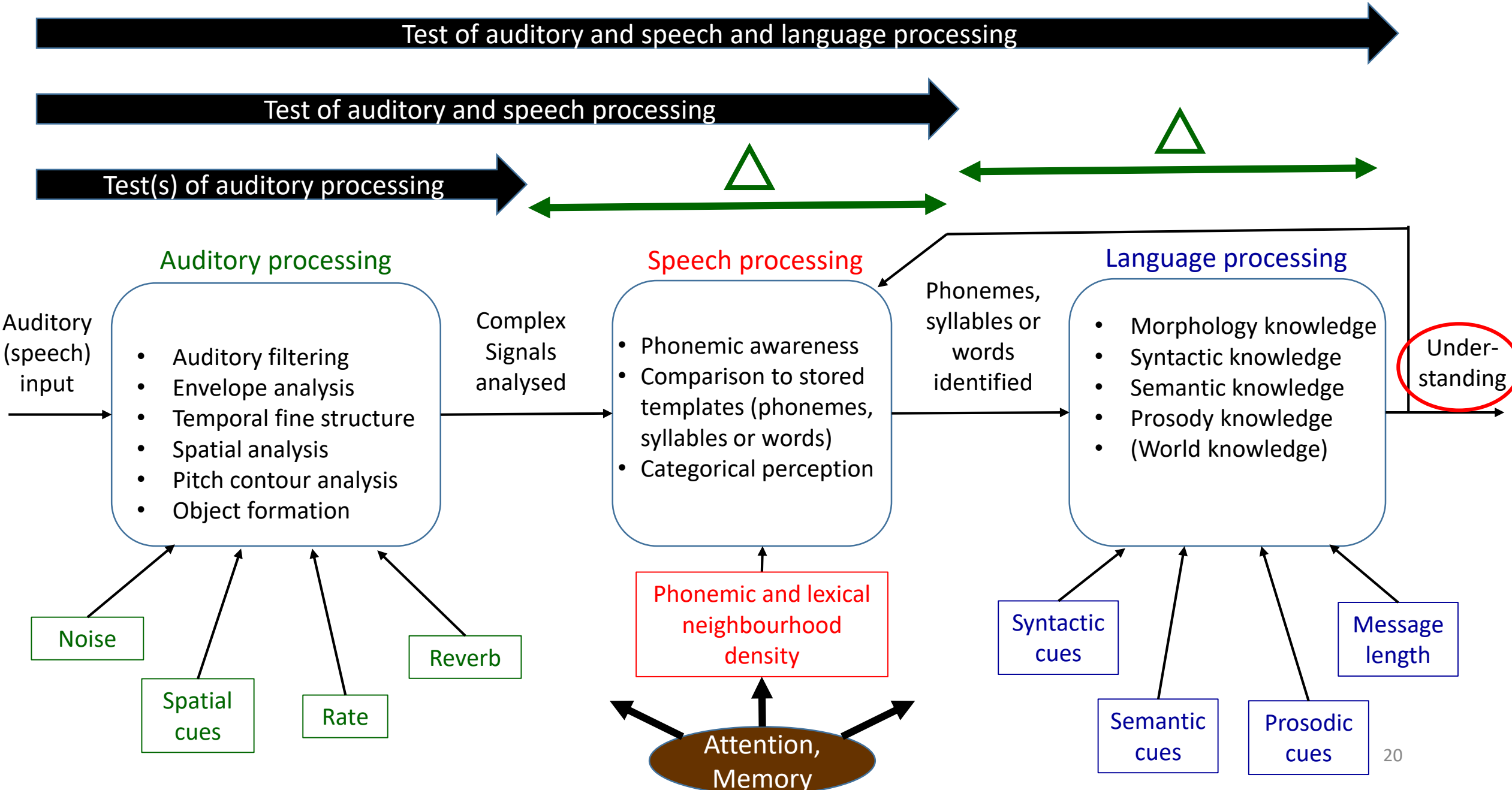
Disentangling the disorders



Speech understanding – what could go wrong?



Speech recognition – where is the problem?



Listening in Spatialized Noise – Universal (LiSN-U) Test



Adaptive Procedure:

0 correct = +3 dB 

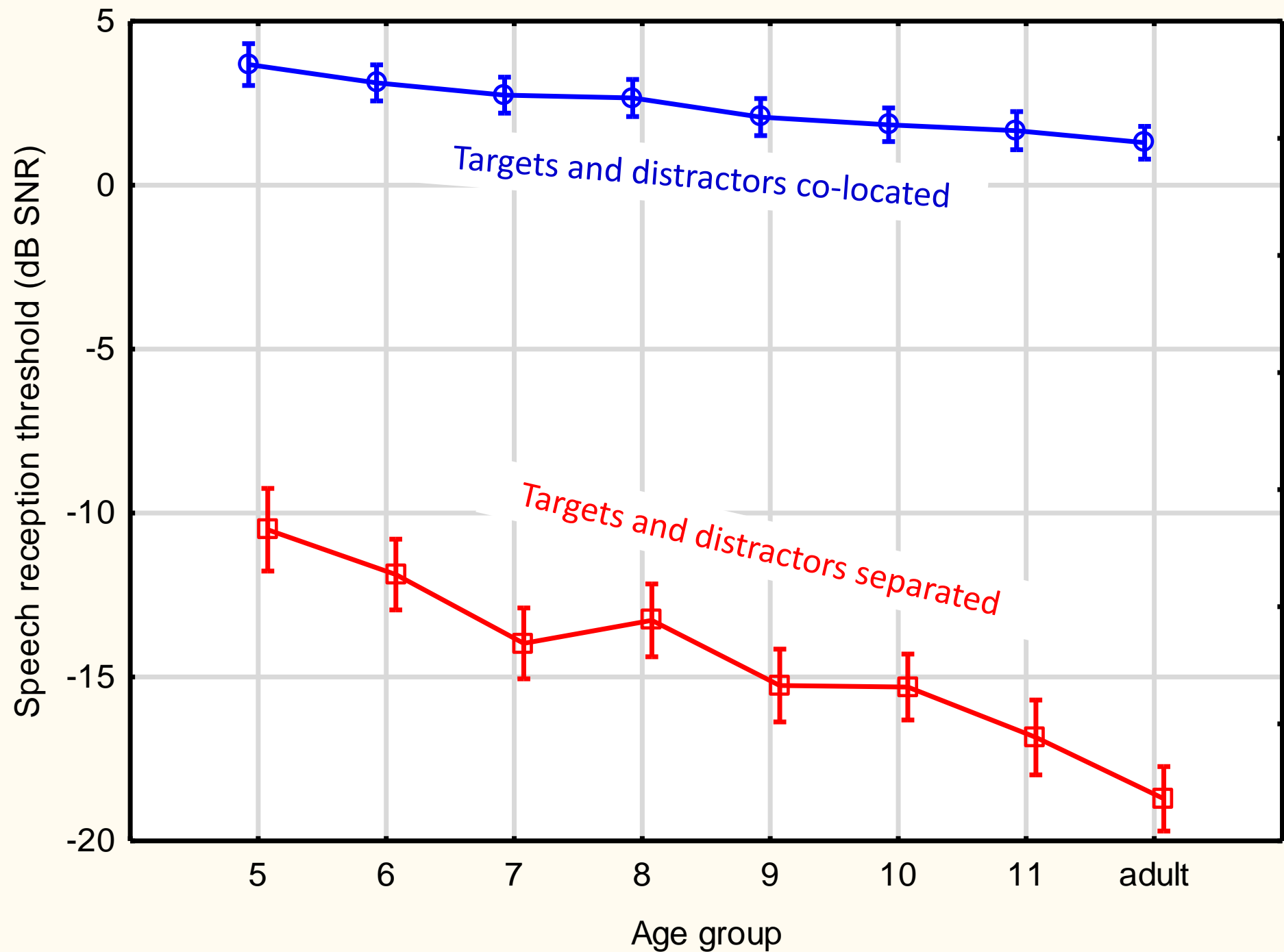
1 correct = +2 dB

2 correct = +1 dB

3 correct = no change

4 correct = -2 dB 

LiSN-U performance versus age



So,
top-level testing
to find the strength of deficit in each area,
but

How do we find the specific
deficit(s)?

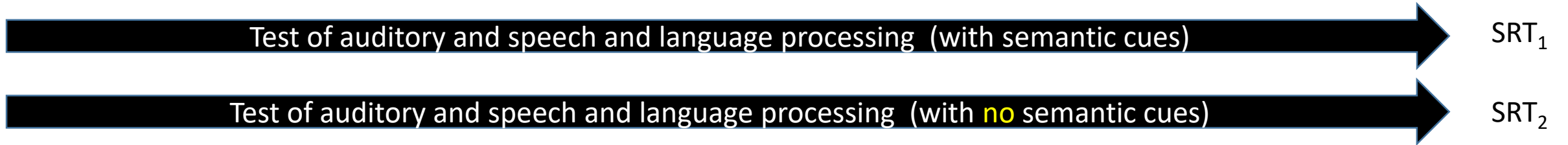
How do we find the specific deficit(s) causing listening difficulties?

1. Differential testing

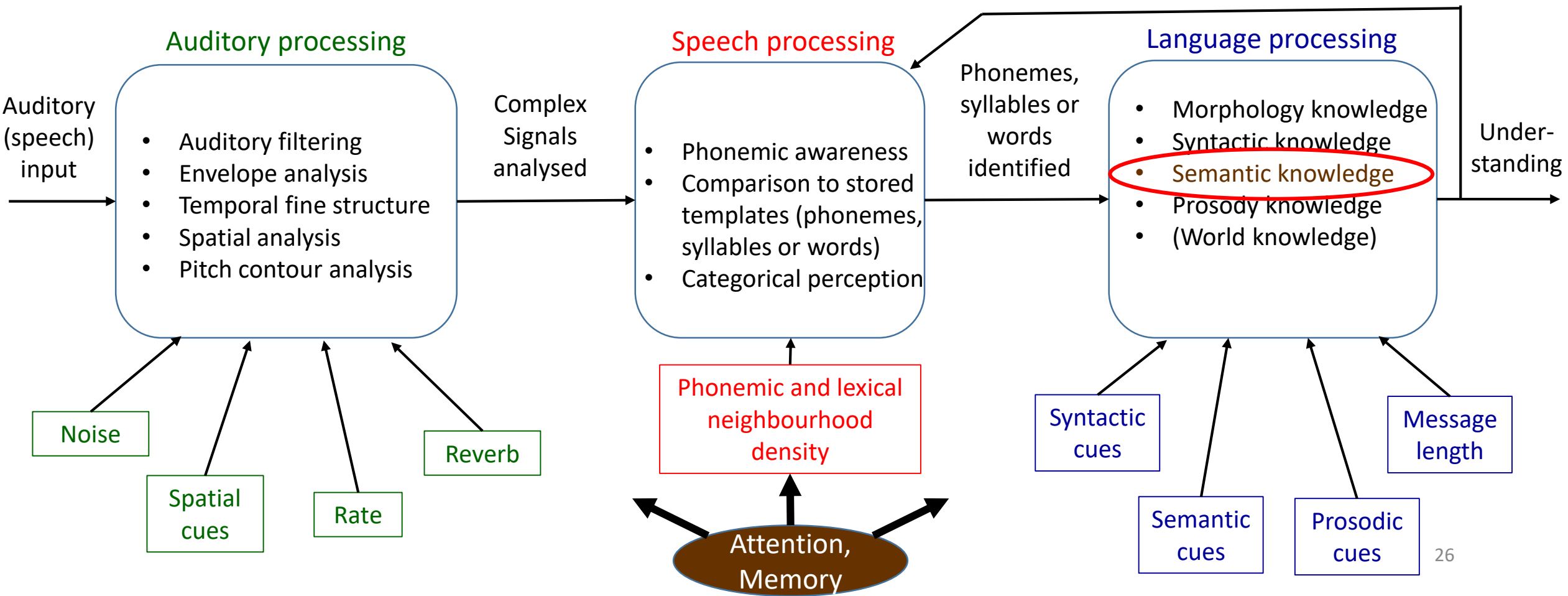
- DDdT (Dichotic digits difference test, [Cameron et al, 2016](#))
- SPIN (Speech in noise test; [Kalikow, Stevens & Elliott, 1977](#))
- LiSN-S (Listening in spatialized noise sentences test, [Cameron & Dillon, 2007](#))

2. Allow for other abilities that affect test scores (just like we allow for age)

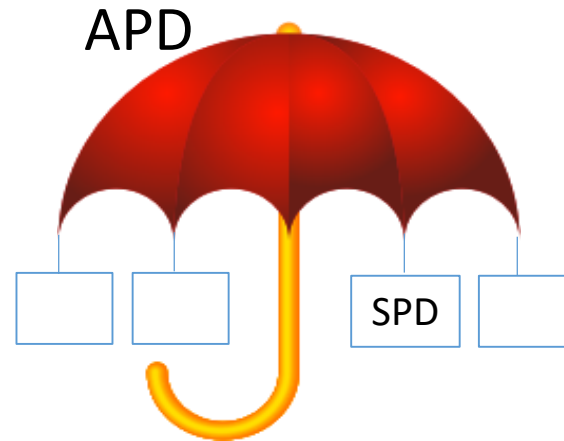
3. Use tests that rely only minimally on other abilities



$$\Delta SRT = SRT_2 - SRT_1$$



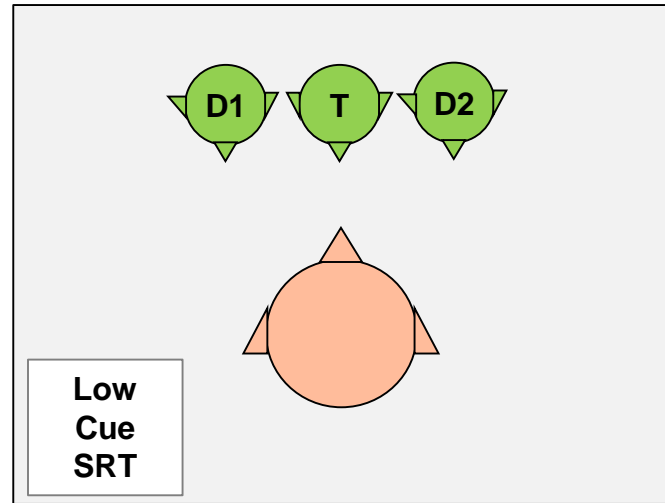
Diagnosing spatial processing disorder with the Listening in Spatialized Noise - Sentences (LiSN-S) test



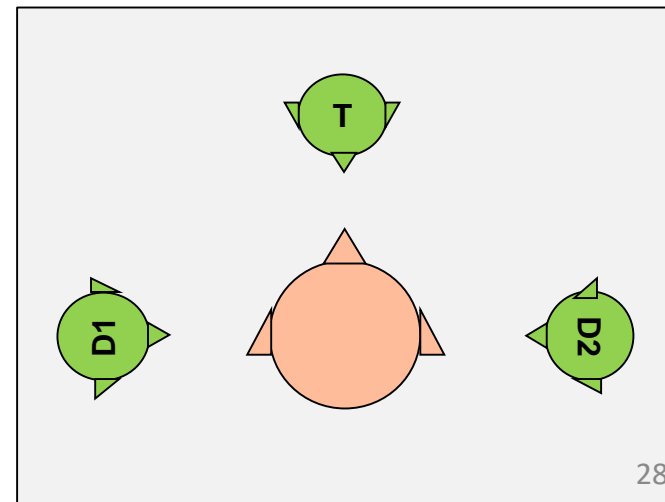
Disclosure
Licensed to Phonak

Listening in Spatialized Noise – Sentences test: To diagnose **Spatial Processing Disorder**

**Same
Direction**



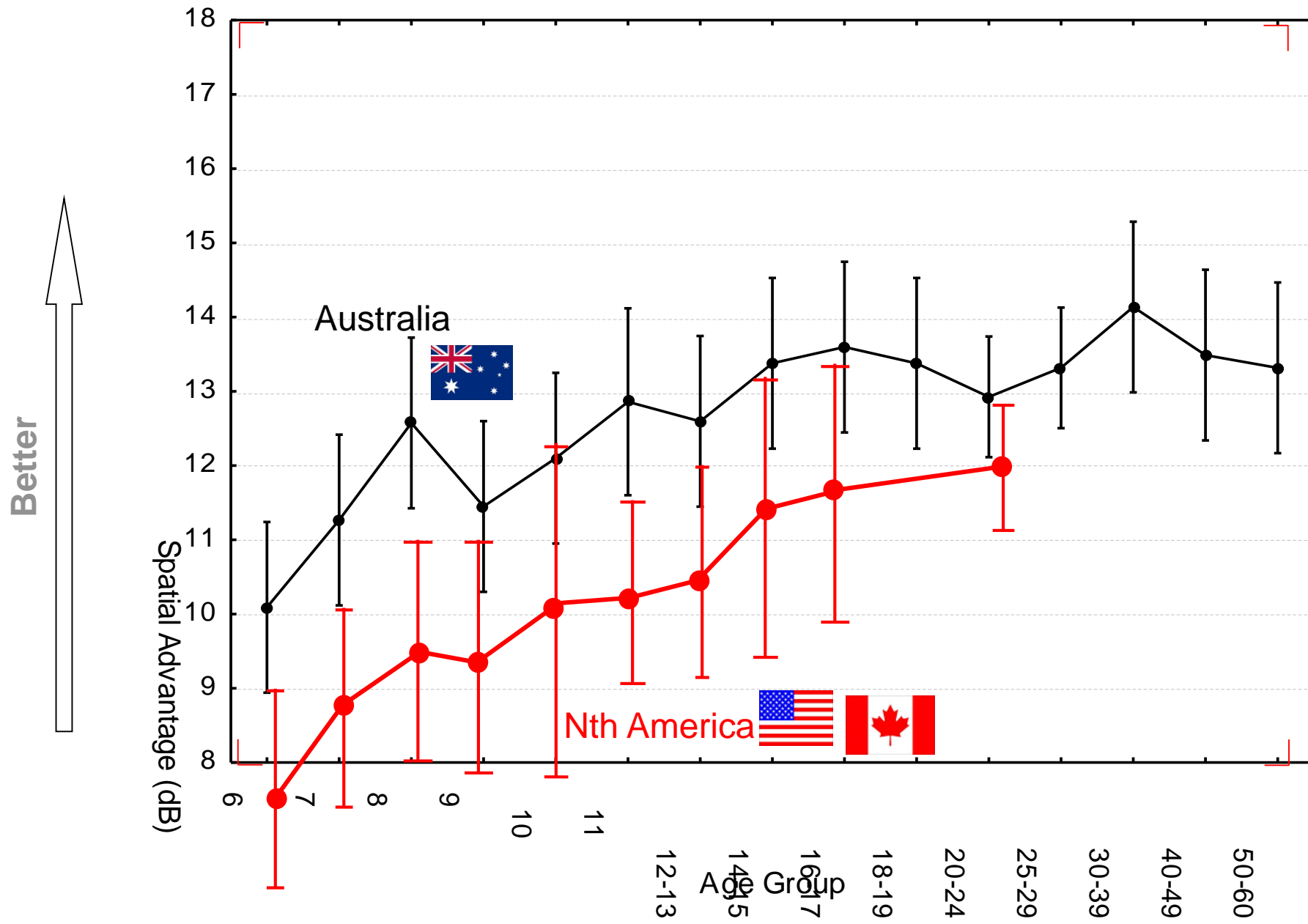
**Different
Directions**



Spatial Advantage

LiSN-S test

Spatial Advantage (\equiv Spatial Release from Masking)



How do we find the specific deficit(s) causing listening difficulties?

1. Differential testing
 - DDdT
 - SPIN
 - LiSN-S
2. **Allow for other abilities that affect test scores (just like we allow for age)**
3. Use tests that rely only minimally on other abilities

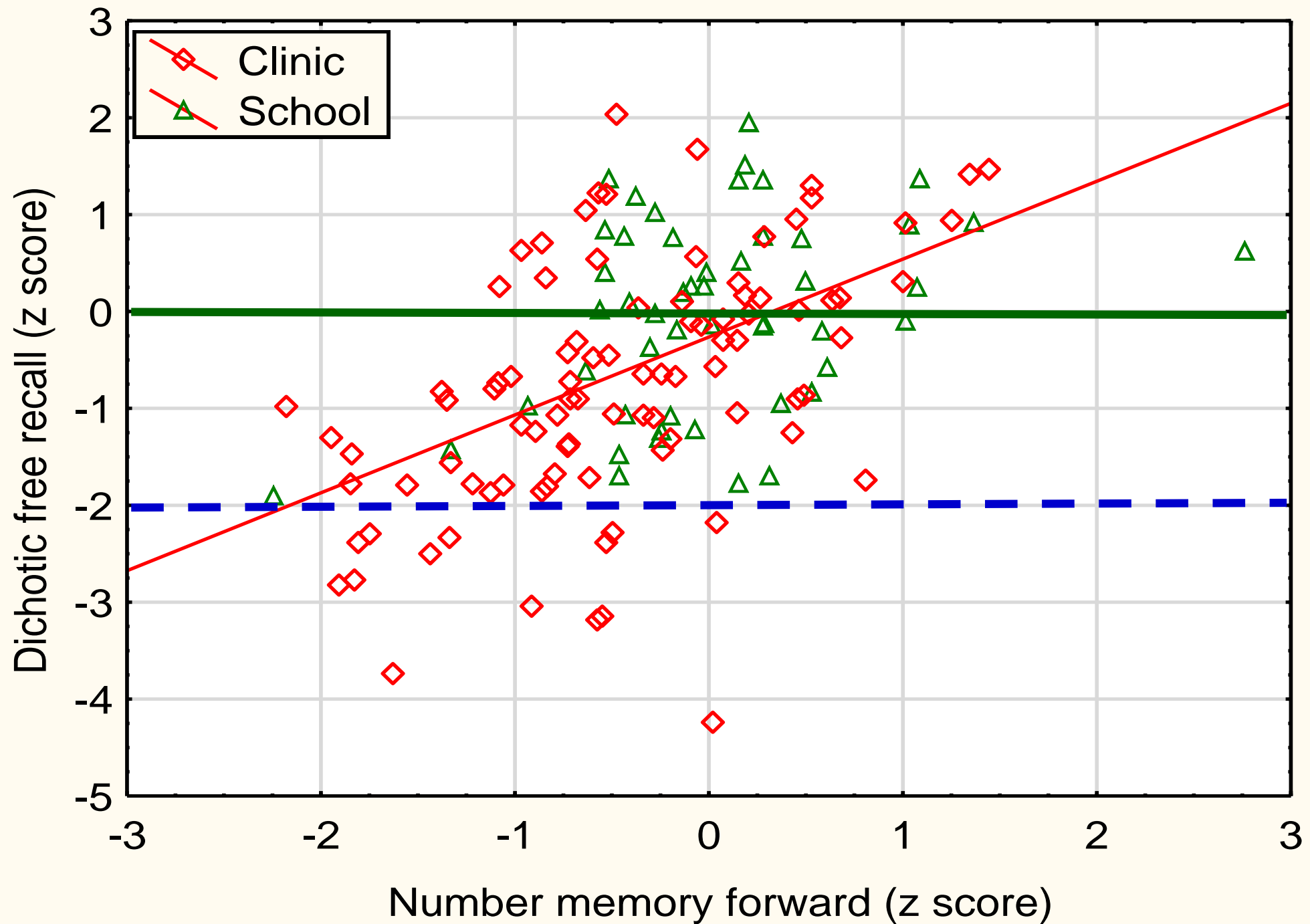
Allowing for related abilities

$$\text{APD test z-score} = \text{AP ability} + c.(\text{memory}) + d.(\text{attention})$$

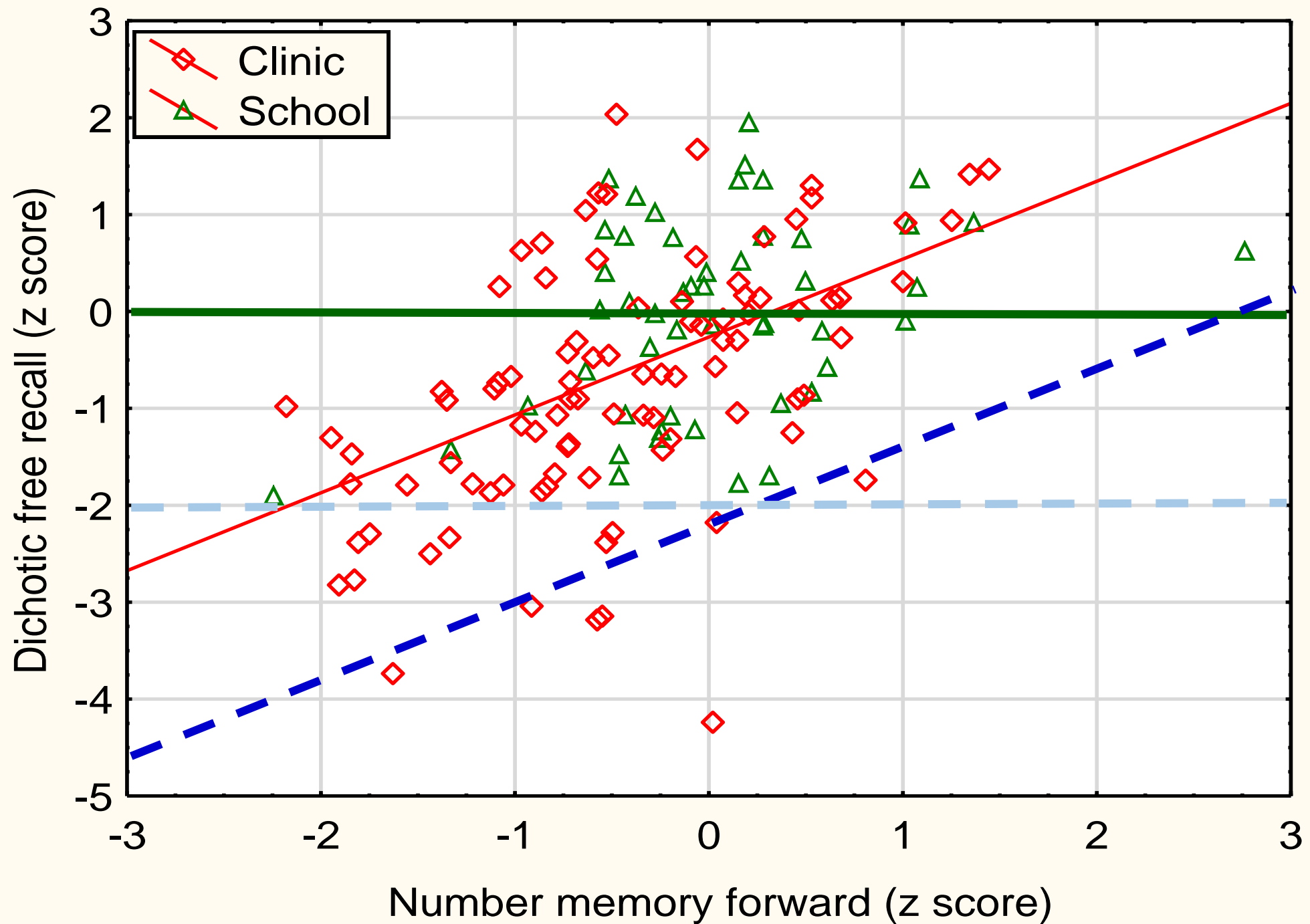
Therefore:

$$\widehat{\text{AP ability}} = \text{APD test z-score} - c.(\text{memory}) - d.(\text{attention})$$

Dichotic scores
and
memory



Dichotic scores
and
memory



But how do we allow for
attention?



... and is it:

Sustained attention?

Divided attention?

Executive attention?

Switching attention?

Auditory attention

Visual attention

How motivating is
the attention task?

The attention that matters in diagnosing APD is



Allowing for attention



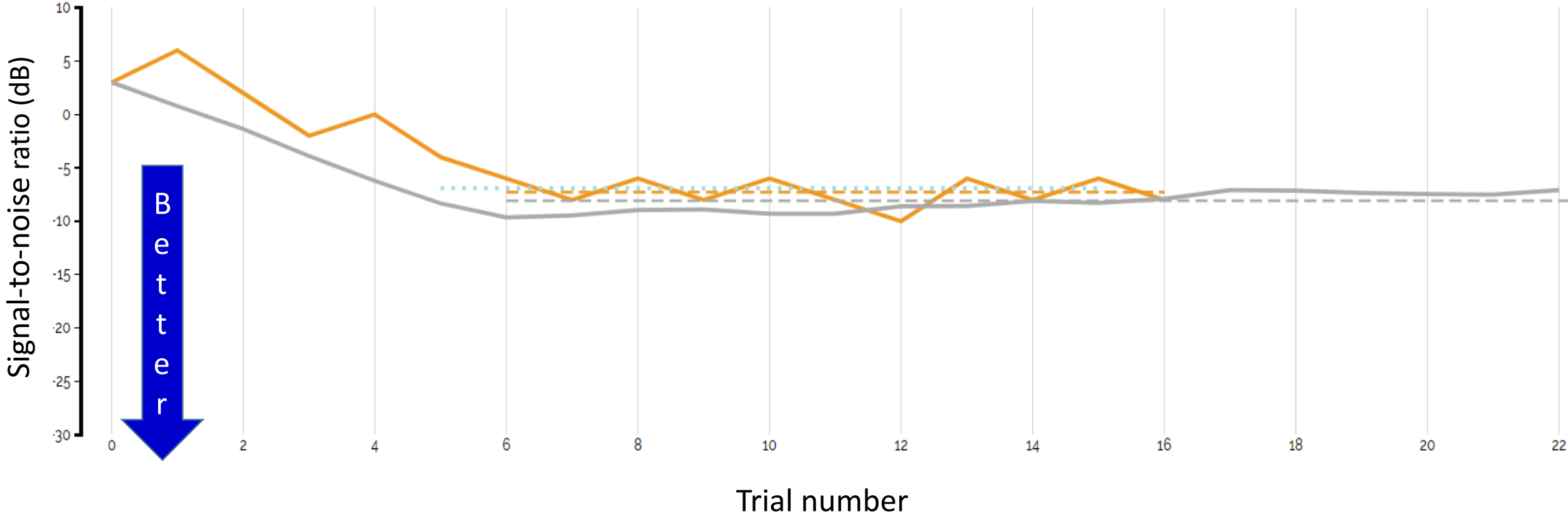
Sound Scouts™
Hear for your future.

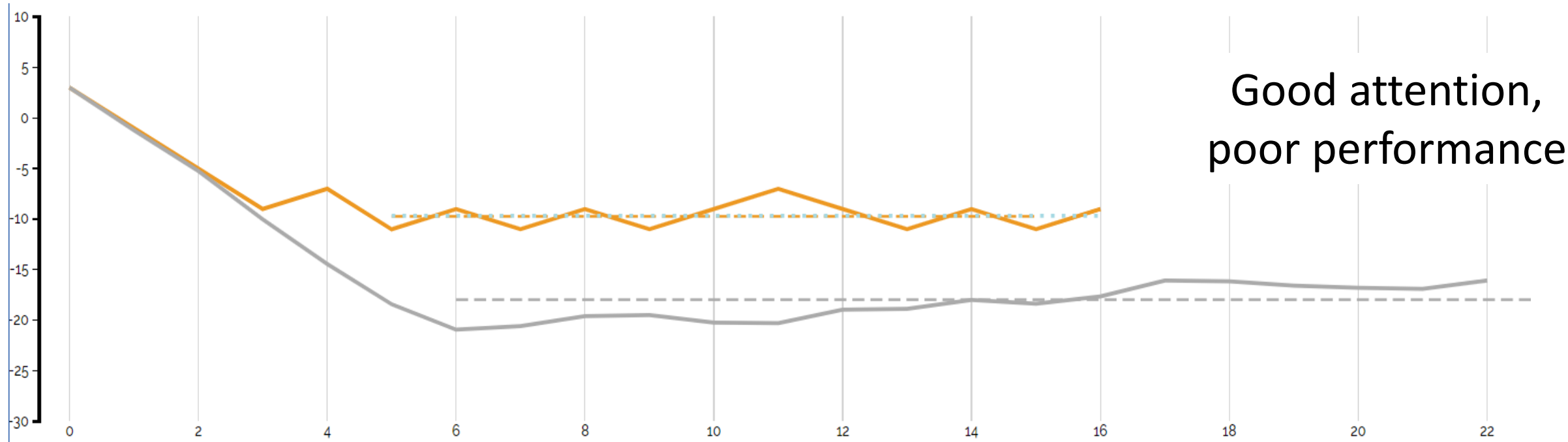
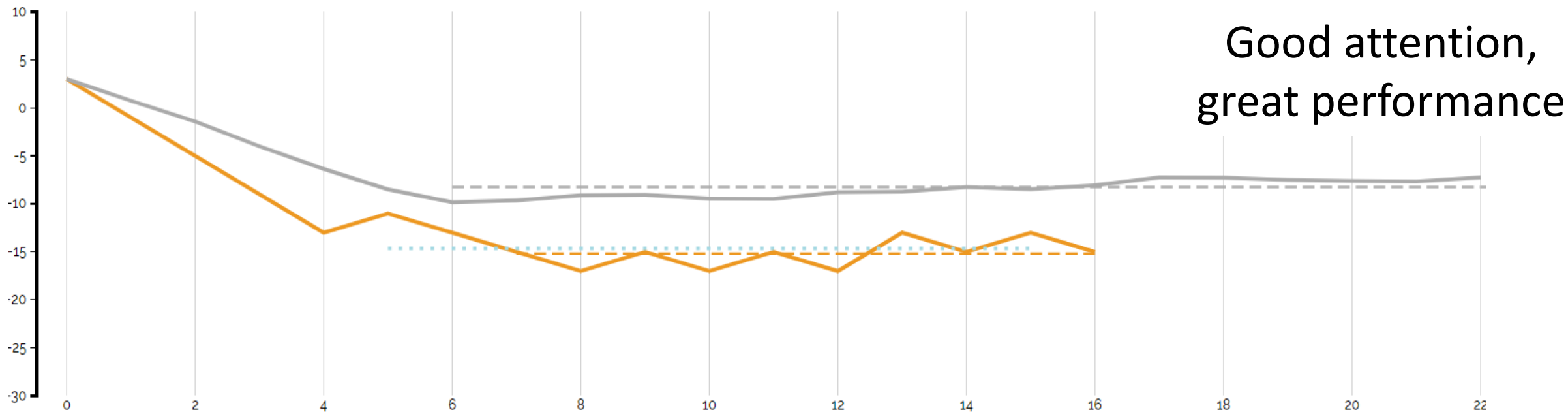


Sound Scouts game/tests

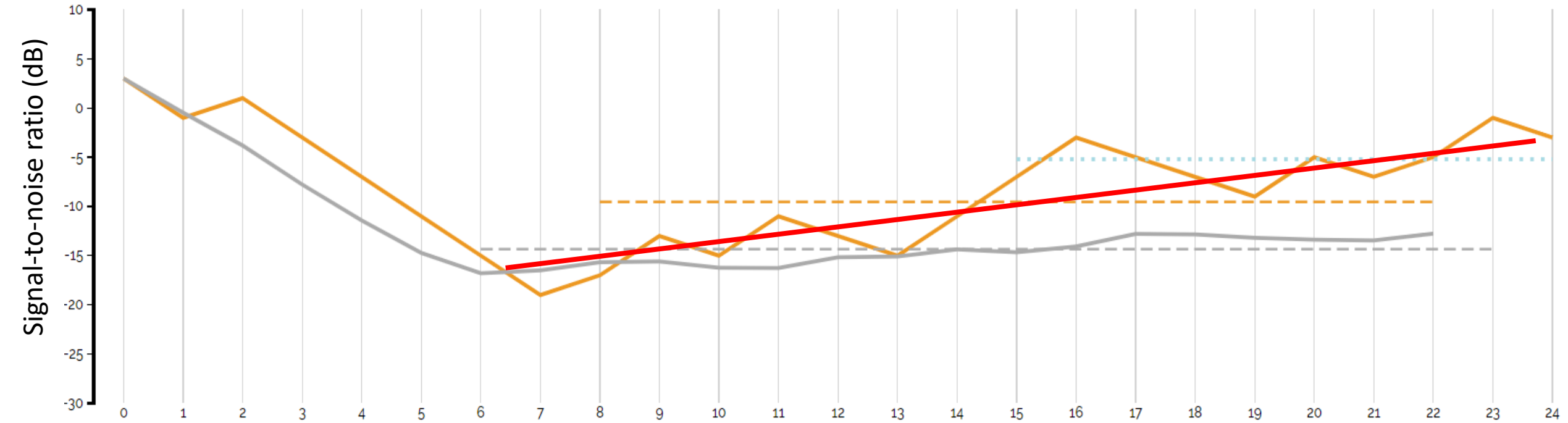
- Speech in quiet
- Speech in noise
- Tone in noise

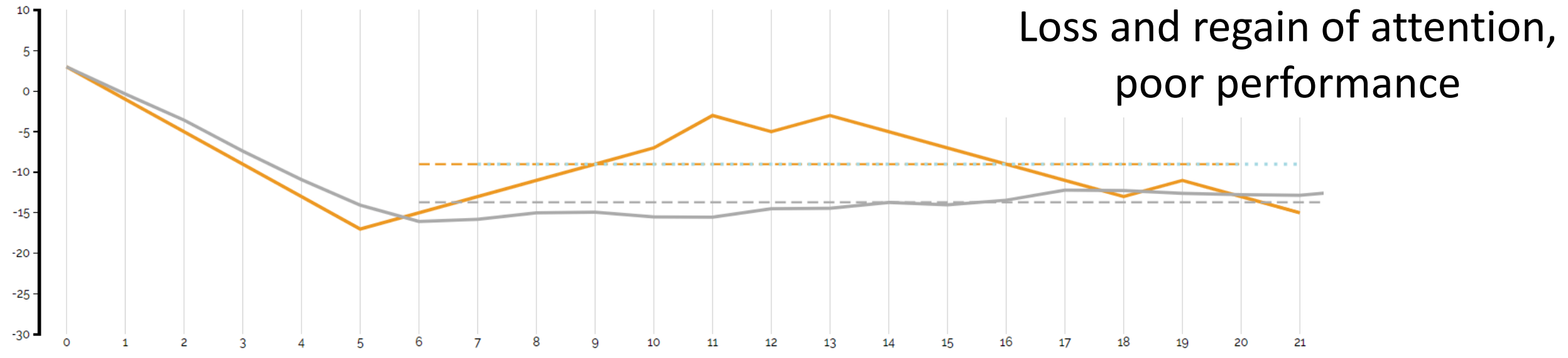
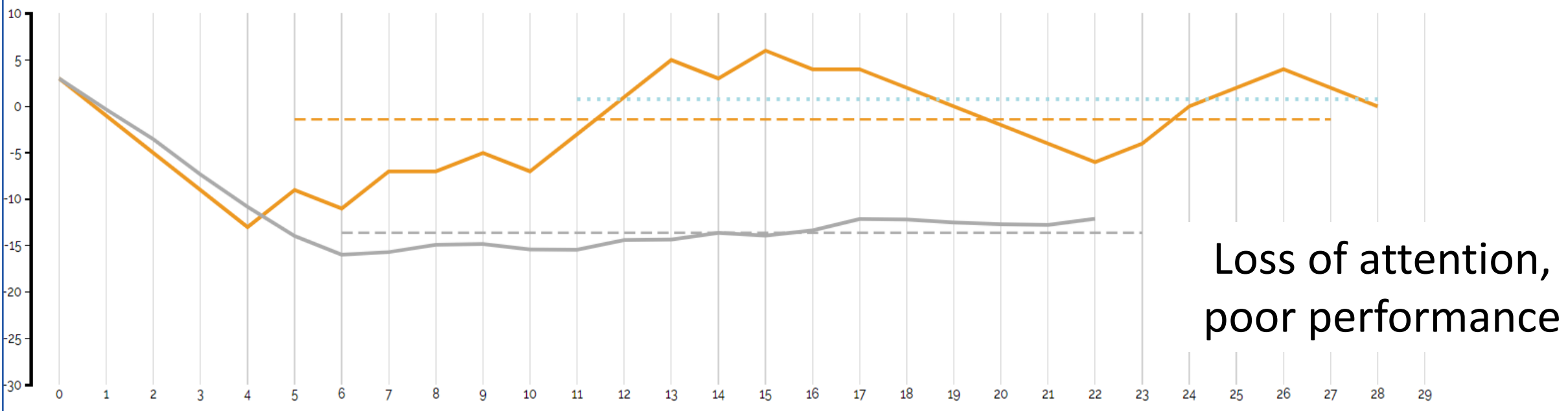
Adaptive track with good attention and average speech in noise ability



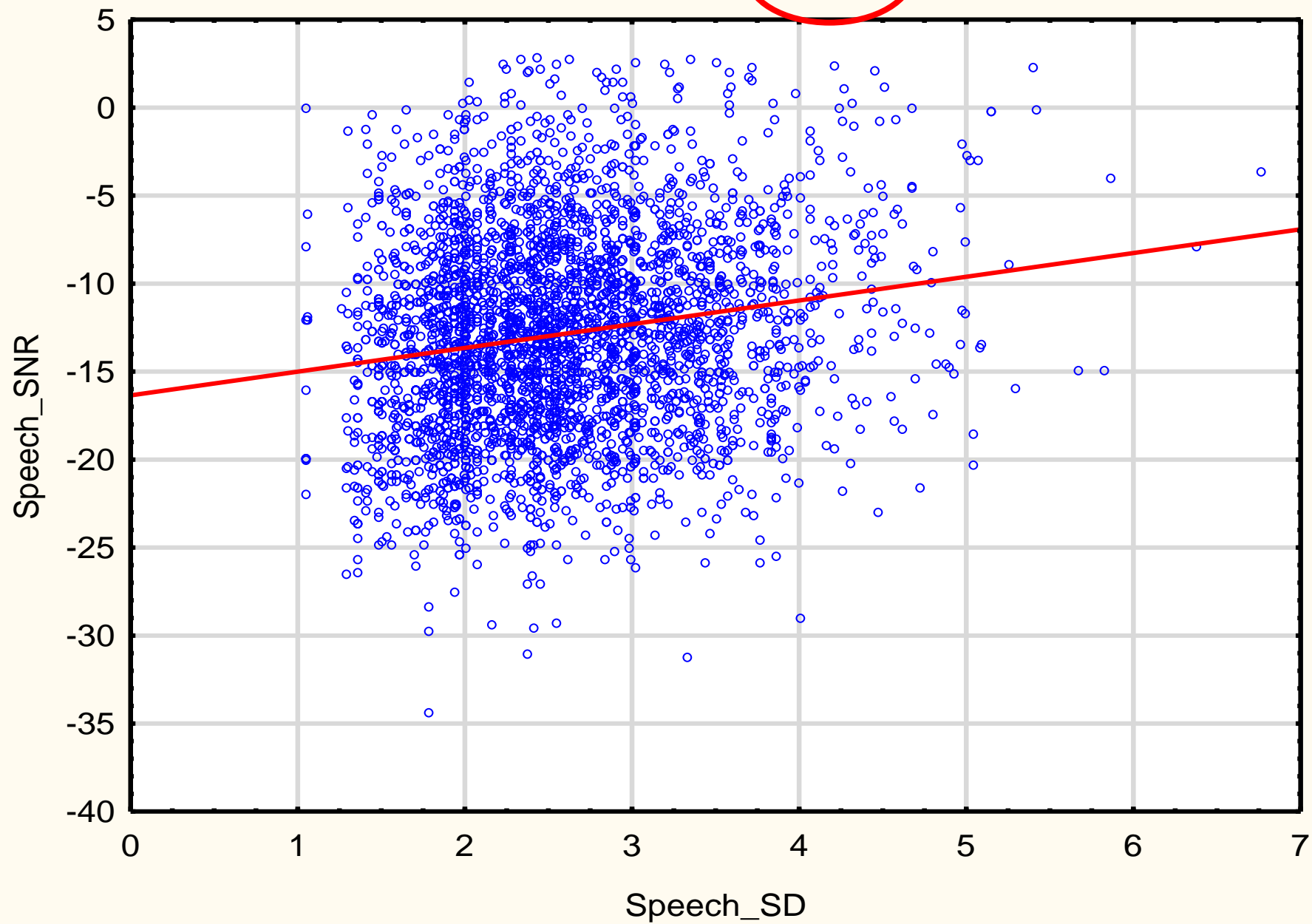


Adaptive track with poor attention



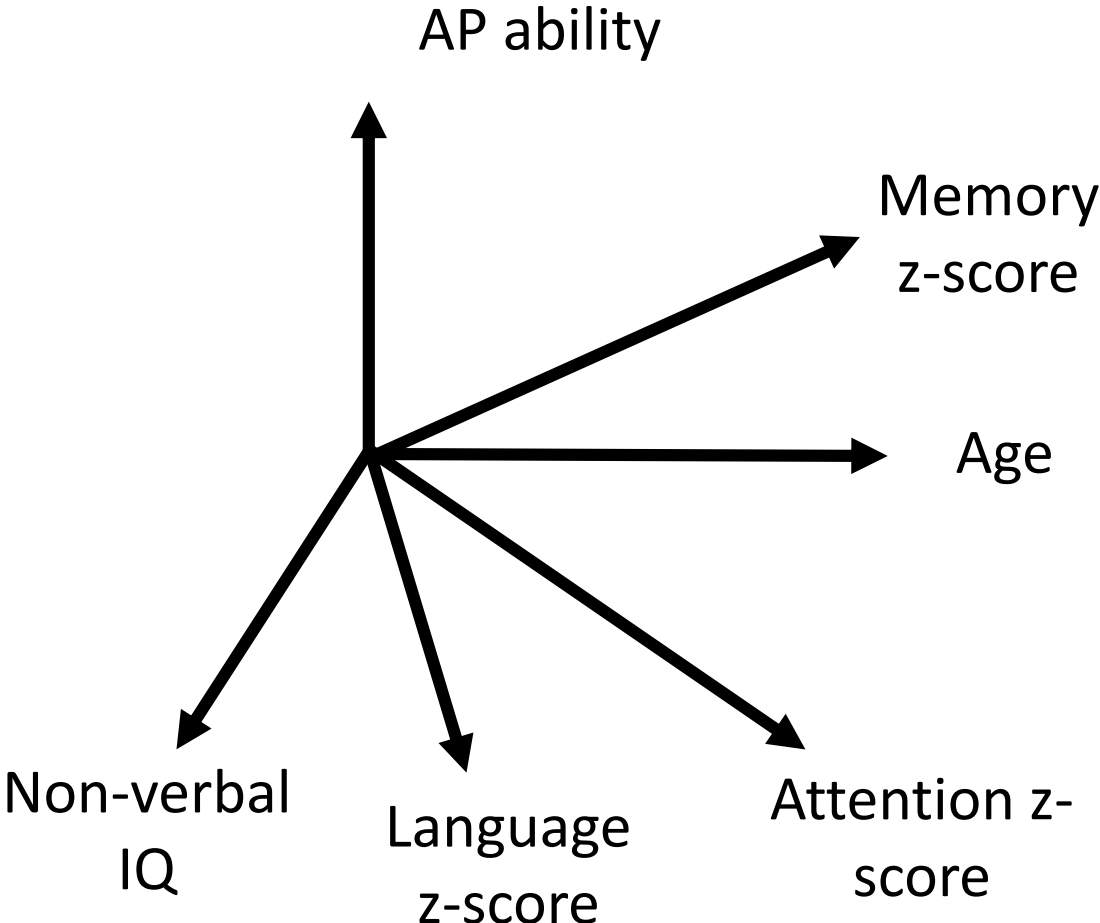


$$\text{Speech SNR} = -16.4 + 1.3 \cdot \text{SD}$$



Allowing for related abilities

$$\widehat{AP\text{ ability}} = \text{APD test z-score} - c.\text{(memory)} - \overbrace{d.\text{(attention)}}^{1.3*SD}$$

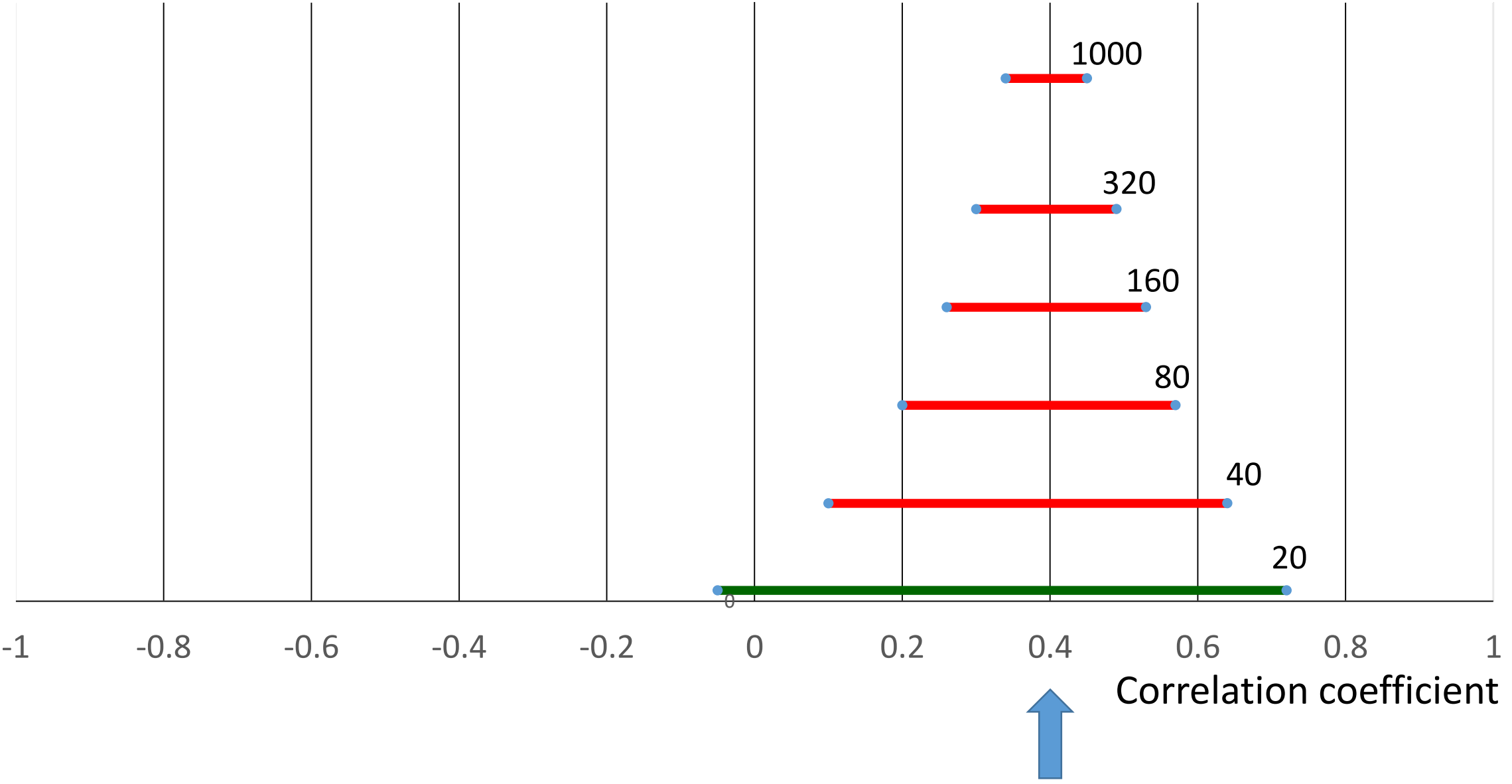


How do we find the specific deficit(s) causing listening difficulties?

1. Differential testing
 - DDdT
 - SPIN
 - LiSN-S
2. Allow for other abilities that affect test scores (just like we allow for age)
3. **Use tests that rely only minimally on other abilities**

But which cognitive or language abilities affect which auditory processing tests?

Correlations !



Cognitive
(NVIQ, memory, attention)

APD
(dichotic, non-speech)

APD
(speech tests)

Outcomes
(reading, questionnaires, language)

	NVIQ	NMF	NMR	NMF+NMR	Prudence	Vigilance	Div Aud Tten	Vis Sus Atten	DDT-L	DDT-R	DDT-Avg	FPT	SSW	MLD	RGDT or GIN	Filtered words (Scan)	Competing words (Scan)	Competing sentences (Scan)	AFG (Scan)	VCV	LISN-S HC	LISN-S Spat Adv	WARP or TOWRE	Combined reported listening	CHAPS	SIFTER	Life	Fishers	CCC-2 SLI	CCC-2 PLI	CCC-2 GCC	Receptive language (CELF-4)	Expressive language (CELF-4)	Overall academic ability			
NVIQ	1.00	0.27	0.32	0.19	0.28	0.25		0.27	0.31	0.16	0.36	0.38			0.09	0.12	-0.04	-0.03	-0.02	0.09	-0.08	0.22	0.08	0.34	0.40										0.60		
NMF	0.27	1.00	0.45	0.86	0.18	0.15		0.07	0.32	0.27	0.37	0.31			0.16	0.12	0.04		0.09			0.15	-0.01	0.44	0.24	0.08	0.06	0.03	0.29							0.44	
NMR	0.32	0.45	1.00	0.83	0.22	0.26		0.26	0.26	0.22	0.31	0.35			-0.05	0.04	0.11		0.21		0.16	0.02	0.53	0.36	0.26	0.27	0.07	0.36								0.59	
NMF+NMR	0.19	0.86	0.83	1.00		0.29		0.19	0.32	0.27	0.40	0.35			0.06	0.08	0.20	0.34		0.33	0.15	0.22	0.18	0.01	0.47	0.35	0.24									0.59	
Prudence	0.28	0.18	0.22		1.00	0.54			0.37	0.22	0.36		0.18				0.42	0.55		0.49							0.12	-0.08									
Vigilance	0.25	0.15	0.26	0.29	0.54	1.00	0.76	0.62	0.25	0.22	0.26	0.33	0.21	0.02	0.17		-0.10	0.01		-0.17		0.12	0.07	0.39	0.31		0.19	0.22	0.53	0.16		0.15	0.03		0.31		
Div Aud Tten						0.76	1.00				0.68										0.08	-0.03															
Vis Sus Atten	0.27	0.07	0.26	0.19		0.62		1.00	0.24	0.20	0.22	0.19		0.07	-0.01						0.00	0.01	0.30	0.20		0.18	0.16									0.28	
DDT-L	0.31	0.32	0.26	0.32	0.37	0.25		0.24	1.00	0.47	0.85	0.37		-0.02	0.13		0.20		0.36		0.17	0.21	0.29	0.21	0.18	0.24	0.11	0.31				0.06	0.18		0.48		
DDT-R	0.16	0.27	0.22	0.27	0.22	0.22		0.20	0.47	1.00	0.76	0.29		-0.04	0.11		0.20		0.32		0.17	0.18	0.20	0.34	0.09	0.15	0.08	0.31			0.16	0.33		0.36			
DDT-Avg	0.36	0.37	0.31	0.40	0.36	0.26	0.68	0.22	0.85	0.76	1.00	0.36		-0.11	0.09		0.21		0.26		0.18	0.18	0.41	0.32		0.11	0.38			0.00	0.19		0.52				
FPT	0.38	0.31	0.35	0.35		0.33	0.19		0.37	0.29	0.36	1.00		-0.02	0.25		0.21		0.26		0.12	0.12	0.36	0.20	0.11	0.14	0.01	0.21			0.34	0.30		0.39			
SSW					0.18	0.21							1.00				0.64	0.57		0.26																	
MLD	0.09	0.16	-0.05	0.06		0.02		0.07	-0.02	-0.04	-0.11	-0.02		1.00	0.01						-0.08	0.02	-0.03	-0.14			-0.07	-0.05			0.21	0.07		0.08			
RGDT or GIN	0.12	0.12	0.04	0.08		0.17	-0.01		0.13	0.11	0.09	0.25		0.01	1.00						0.13	0.18	0.30	0.10		-0.07	0.12				0.03	0.05		0.07			
Filtered words (Scan)	-0.04	0.04	0.11	0.20	0.42	-0.10			0.20	0.20		0.21	0.64			1.00	0.35	0.33	0.38	0.20					0.08		0.20	0.19					0.11				
Competing words (Scan)	-0.03			0.34	0.55	0.01			0.35	1.00	0.48	0.32	0.57			0.35	1.00	0.48	0.32	0.21					0.21						0.10						
Competing sentences (Scan)	-0.02	0.09	0.21	0.33					0.36	0.32		0.26				0.33	0.48	1.00	0.26	0.25					0.17	0.19	0.14			0.07	0.25	0.25					
AFG (Scan)	0.09			0.15	0.49	-0.17			0.38	0.32	0.26	1.00	0.14			0.20	0.21	0.25	0.14	1.00					0.00					0.13							
VCV	-0.08			0.22					0.20				0.26			0.20	0.21	0.25	0.14	1.00						0.28											
LISN-S HC	0.22	0.15	0.16	0.18		0.12	0.08	0.00	0.17	0.17	0.18	0.12		-0.08	0.13						1.00	0.35	0.34	0.20		0.27	0.08	0.24	-0.15						0.15		
LISN-S Spat Adv	0.08	-0.01	0.02	0.01	0.07	-0.03	0.01		0.21	0.18	0.18	0.12		0.02	0.18						0.35	1.00	0.12	0.07		0.03	0.08	0.09	-0.01							0.03	
WARP or TOWRE	0.34	0.44	0.53	0.47		0.39		0.30	0.29	0.20	0.41	0.36		-0.03	0.30		0.08	0.21	0.17	0.00	0.34	0.12	1.00	0.54	0.13	0.30	0.38								0.67		
Combined reported listening	0.40	0.24	0.36	0.35		0.31		0.20	0.21	0.34	0.32	0.20		-0.14	0.10						0.20	0.07	0.54	1.00		0.62	0.80								0.62		
CHAPS		0.08	0.26	0.24					0.18	0.09		0.11				0.20	0.15	0.19		0.28			0.13		1.00	0.66											
SIFTER		0.06	0.27						0.24	0.15		0.14				0.19		0.14							0.66	1.00											
Life	0.21	0.03	0.07	0.17	0.12	0.19		0.18	0.11	0.08	0.11	0.01		-0.07	-0.07						0.27	0.03	0.30	0.62		1.00	0.14								0.29		
Fishers	0.24	0.29	0.36	0.43	-0.08	0.22		0.16	0.31	0.31	0.38	0.21		-0.05	0.12						0.08	0.08	0.38	0.80		1.00	1.00								0.56		
CCC-2 SLI						0.53	0.66														0.24	0.09							1.00	0.59							
CCC-2 PLI						0.15	0.24														-0.15	-0.01							0.59	1.00							
CCC-2 GCC																0.11	0.10	0.07	0.13											1.00							
Receptive language (CELF-4)						0.15			0.06	0.16	0.00	0.34		0.21	0.03																1.00						
Expressive language (CELF-4)						0.03			0.18	0.33	0.19	0.30		0.07	0.05																		1.00				
Overall academic ability	0.60	0.44	0.59	0.59		0.31		0.28	0.48	0.36	0.52	0.39		0.08	0.07						0.15	0.03	0.67	0.62		0.29	0.56									1.00	

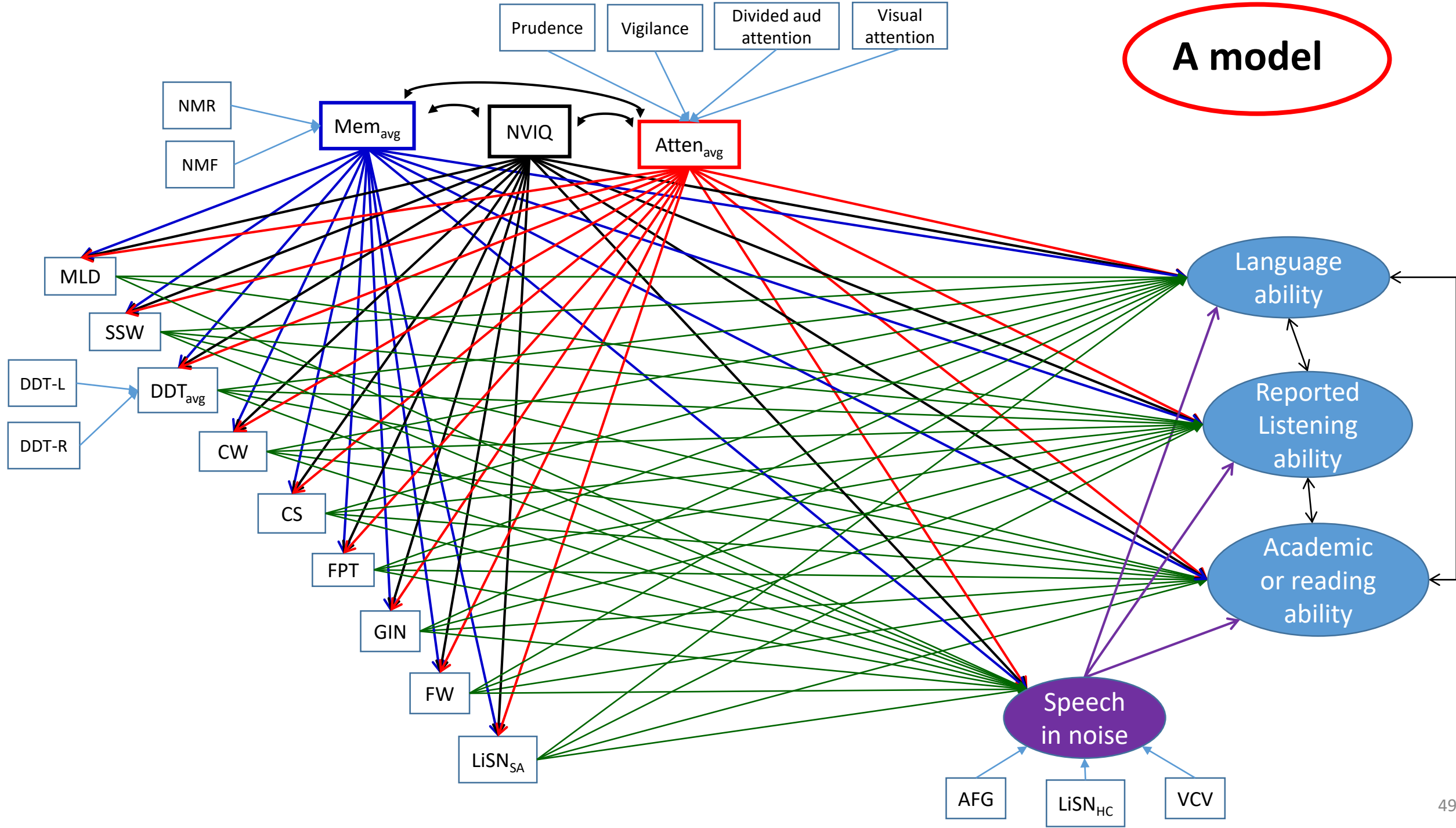
Ahmed (2017)
Ahmed & Ahmed (2016)
Brenneman et al (2017)
Cameron et al (in prep)
Cameron et al (2015)

Cameron et al (2016)
Gyldenkaerne et al (2014)
Harris et al (1983)
Maerlander (2010)
Maerlander et al (2004)

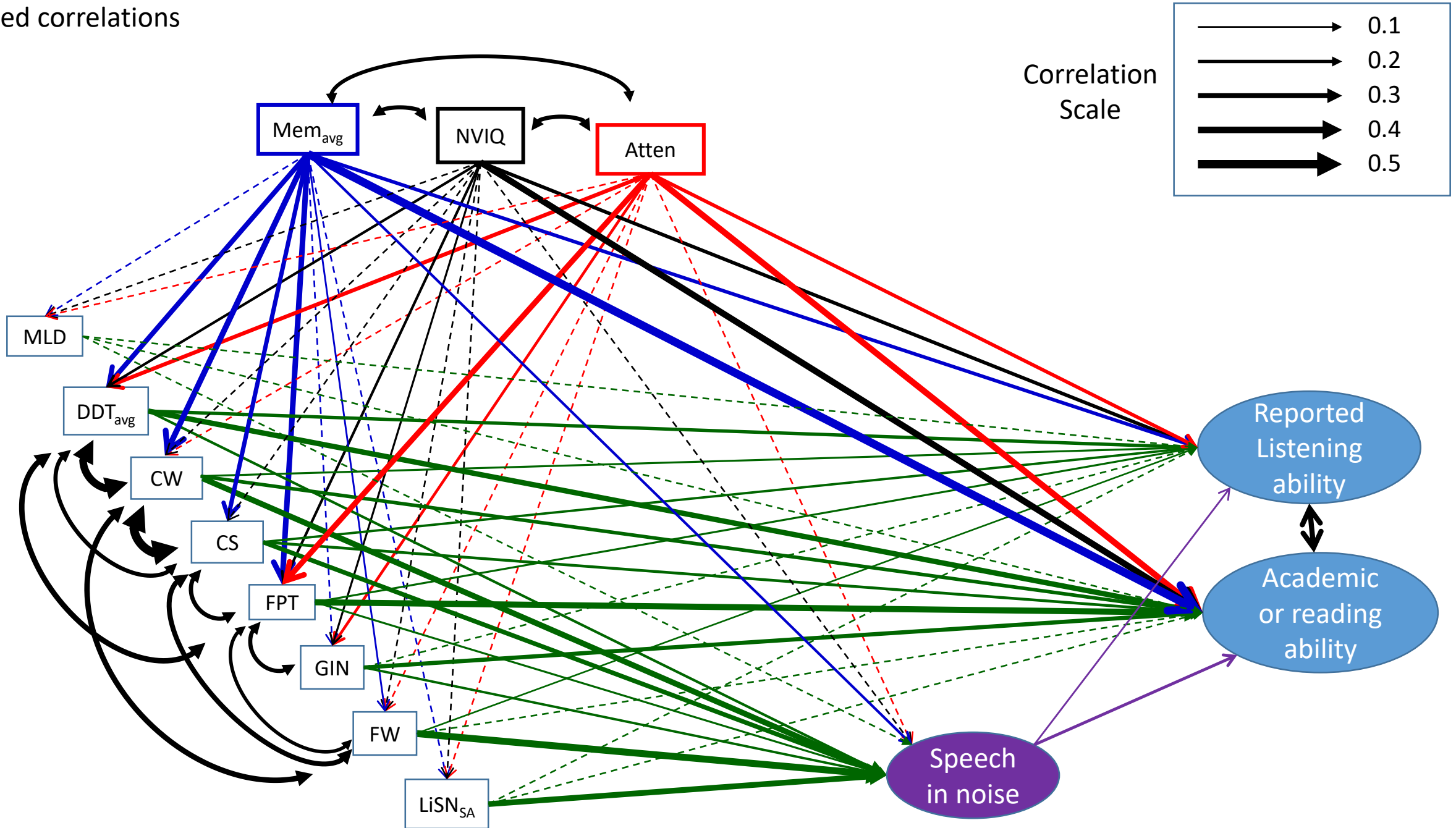
Riccio et al (2005)
Dillon & Sirimanna (2014)
Sharma et al (2009)
Stavrinou et al (2018)
Tomlin et al (2015)

Weihing et al (2015)
Wilson et al (2011)

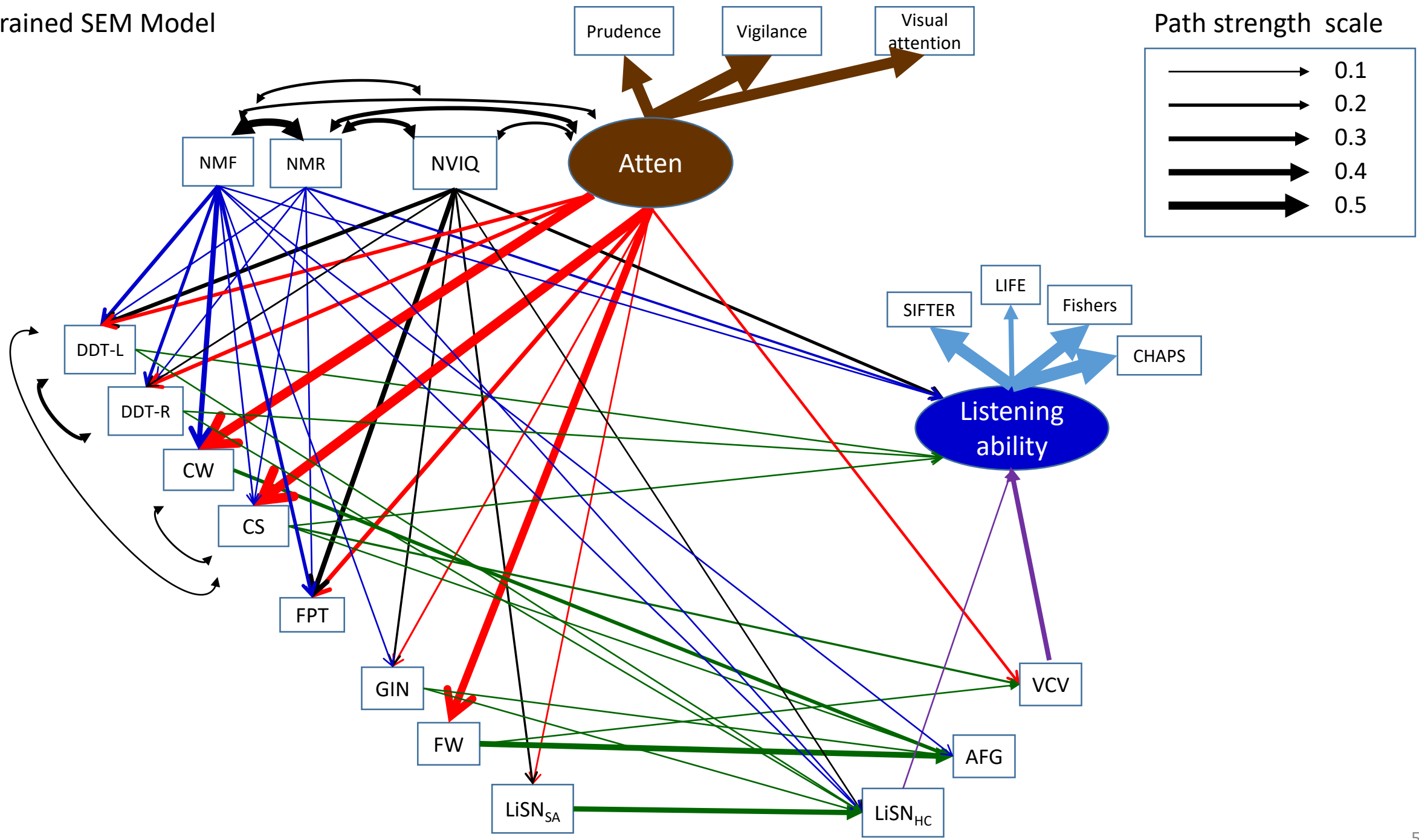
A model



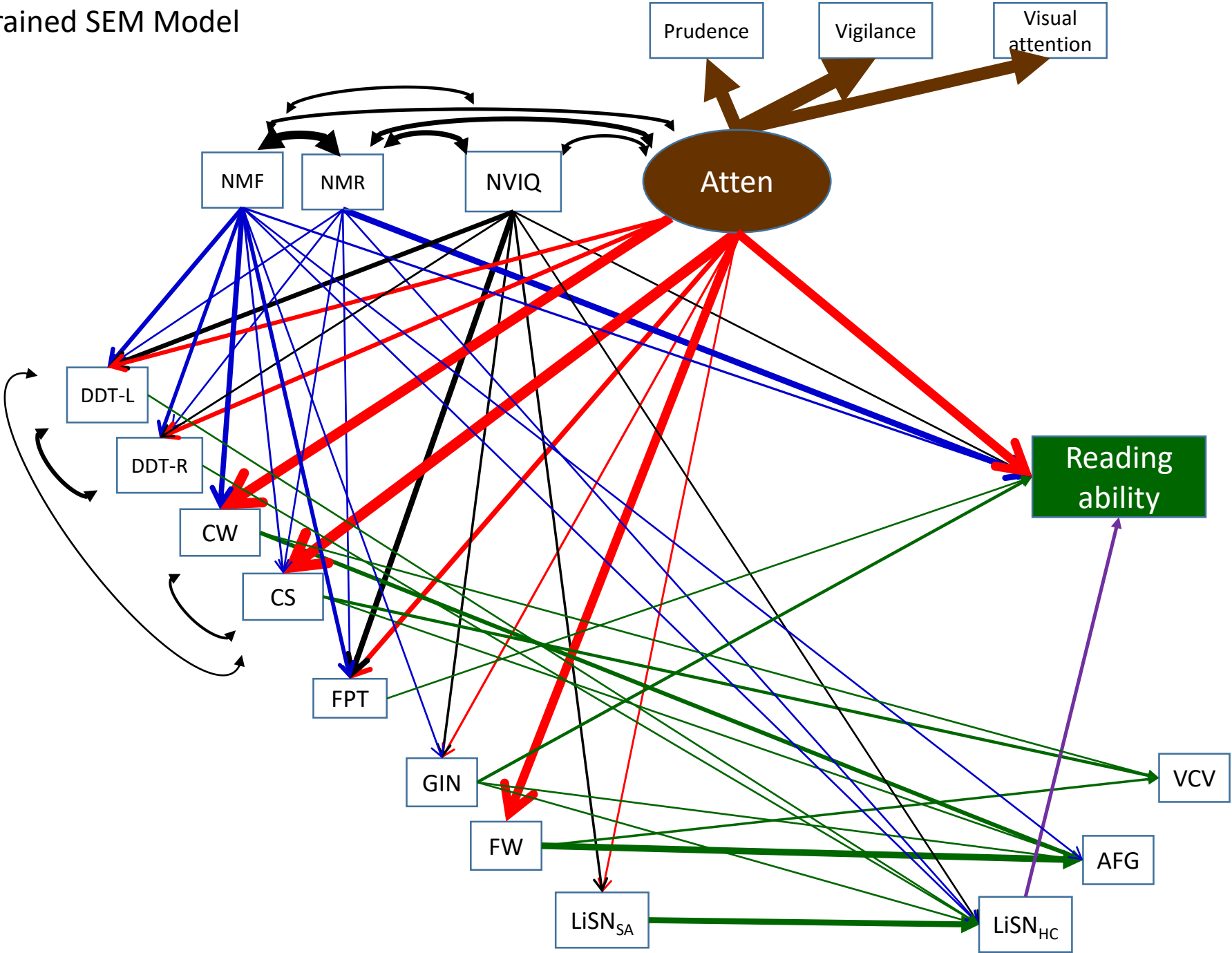
Observed correlations



Constrained SEM Model



Constrained SEM Model



Are listening difficulties *mostly*: Language, Auditory processing, or Cognition ?



University of Melbourne

Spatial processing disorder: 3 / 105

3%

Tomlin et al (2015)

Australian Hearing

Spatial processing disorder 130 / 666

20%

Cameron et al (2015)

P=0.000 000 000 000 1

Next steps

- Top level tests
 - Language specific
 - Language independent
- High-level auditory processing tests
- More specific auditory processing tests
 - Tests administered depend on high level results
 - Tests scores
 - Independent of memory, attention, and language, by design; or
 - Corrected for memory, attention, and language



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MANCHESTER
1824

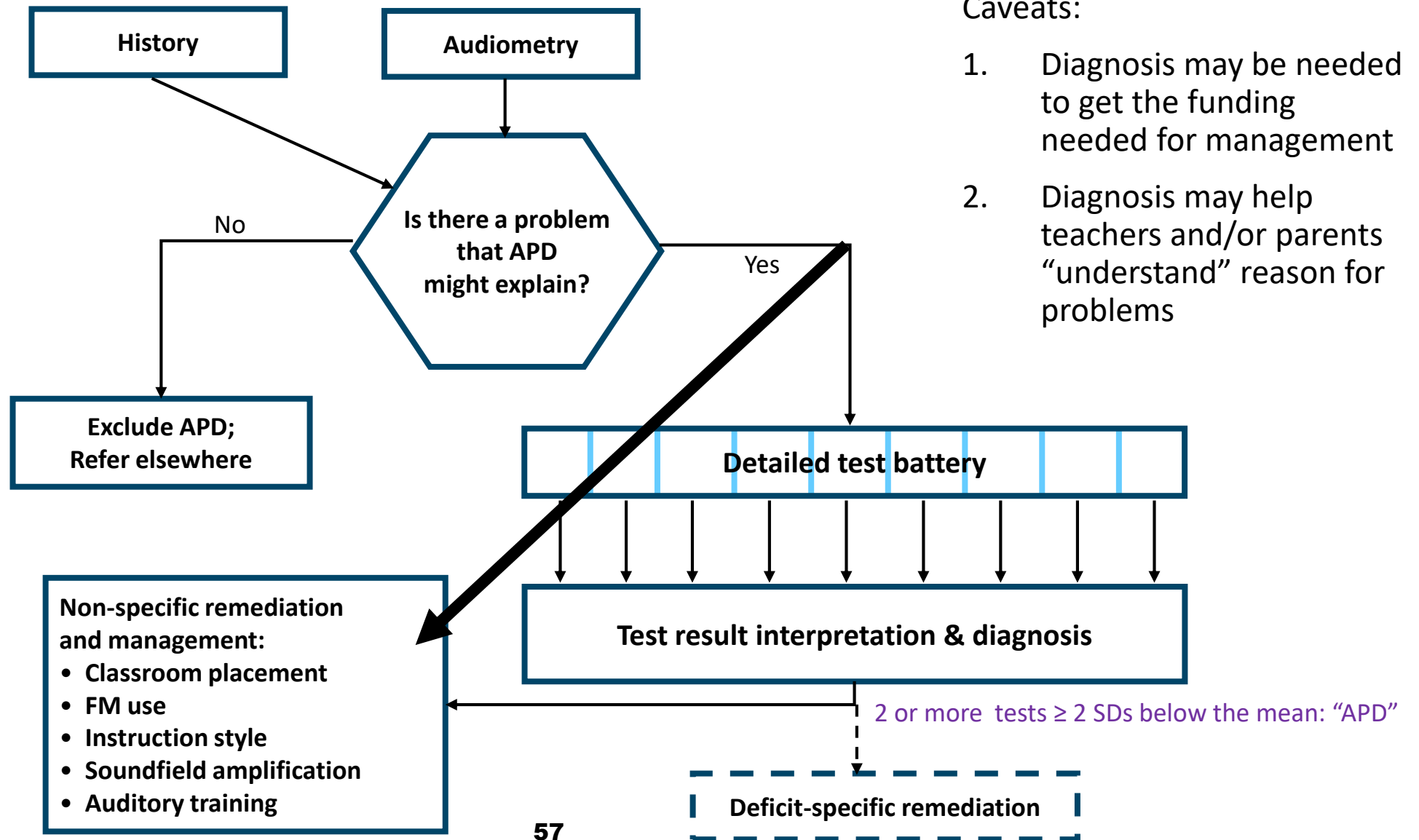
The University of Manchester

NAL
National Acoustic Laboratories

Thanks for listening

Questions?

Traditional approach to APD testing



Caveats:

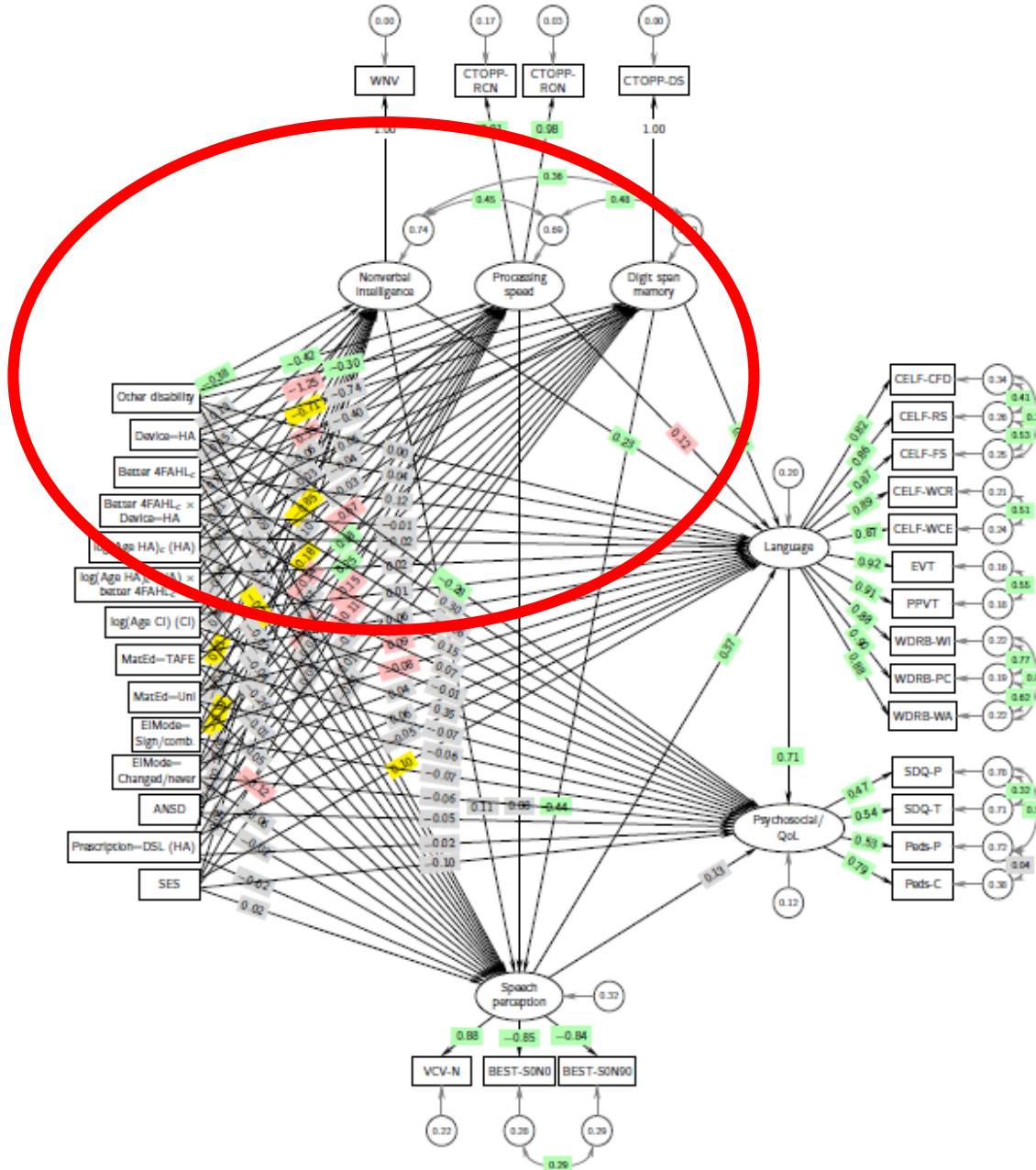
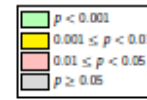
1. Diagnosis may be needed to get the funding needed for management
2. Diagnosis may help teachers and/or parents "understand" reason for problems

Early management, cognitive abilities, speech perception, language, and psychosocial.

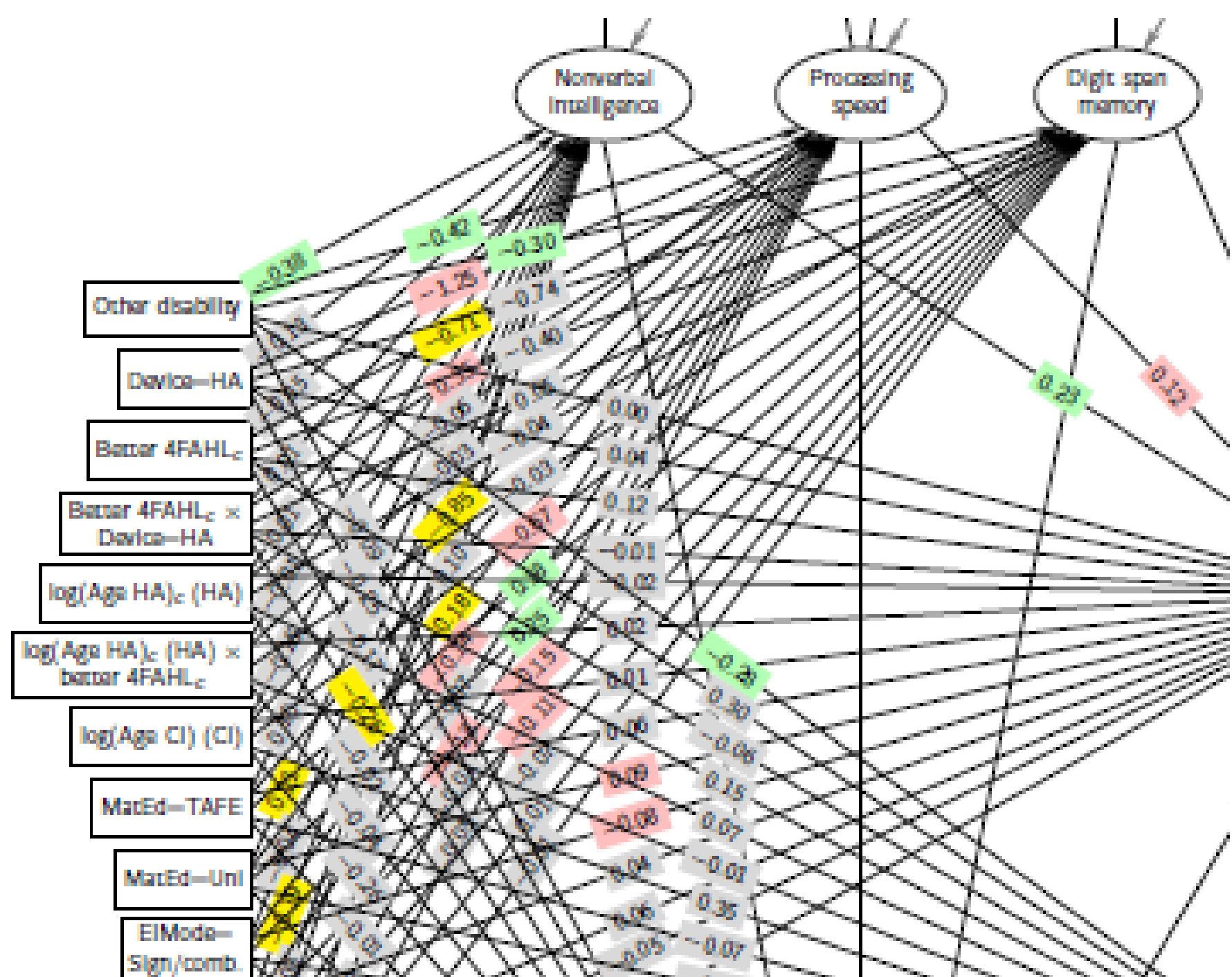
Model 13a (All) - Colours based on p-values for standardised parameters

4/6/2019

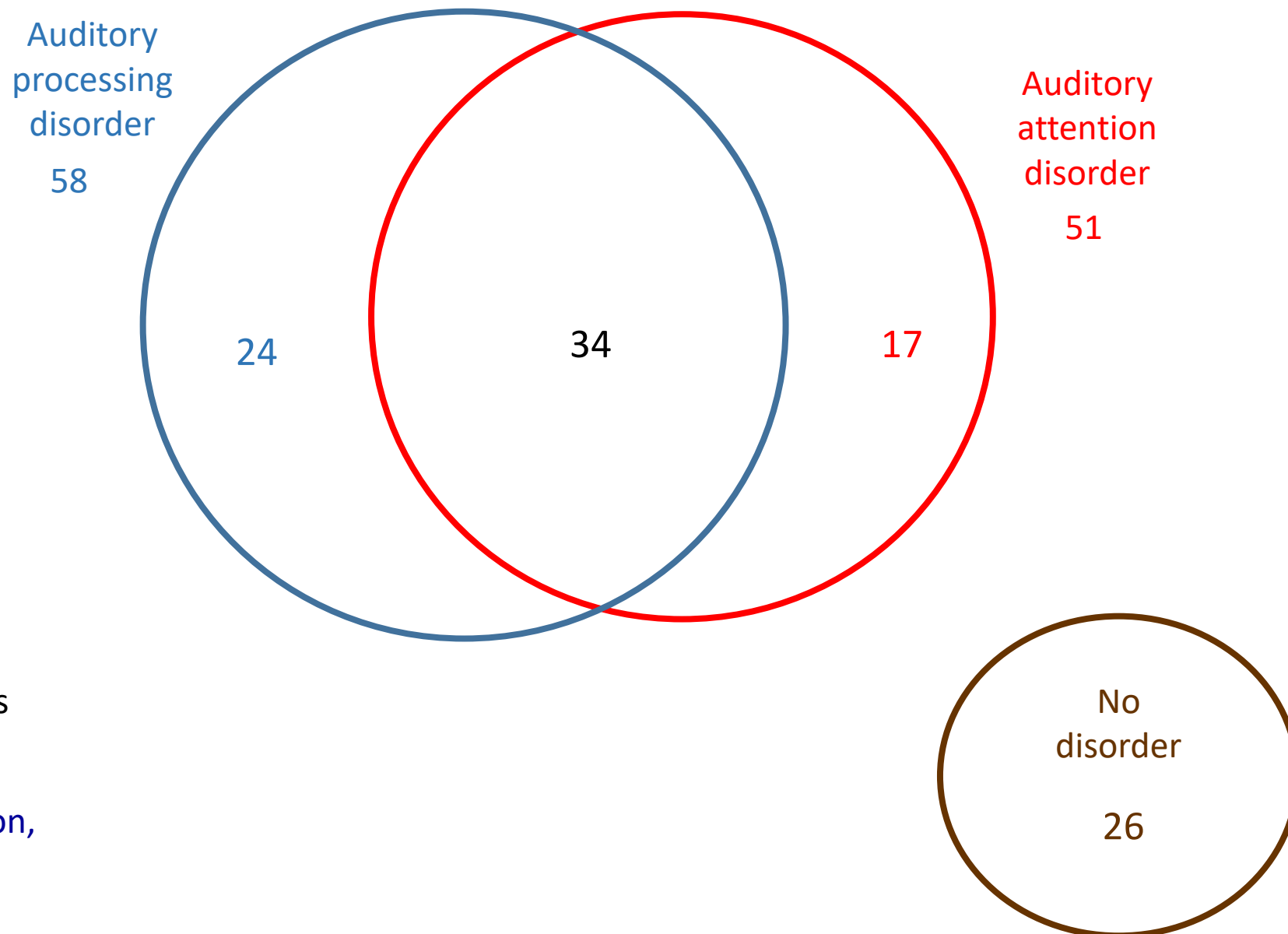
367 observations used, $\chi^2 = 661.40$, $df = 377$, $p < 0.001$, SRMR = 0.037, RMSEA = 0.046, CFI = 0.965, TLI = 0.953



Impact of early ...



Relation between APD and Attention Disorder



101 children with listening difficulties

Gyldenkaerne, Dillon, Sharma and Purdy (2014); JAAA.

Instead of “What disorder(s)
does this person have”

*How strongly do deficits in each of:
cognition, auditory processing, and language
impede speech understanding*

With a common unit of measure!



Bornstein & Musiek (1992)

Vanniasegaram, Cohen & Rosen (2004)

Dawes, Bishop, Sirimanna, Bamiou (2008)

Sharma, Purdy & Kelly (2009)

Rosen, Cohen, Vanniasegaram (2010)

Umat, Mukari, Ezan & Din (2011)

Ahmed, Ahmed, Bath, Ferguson, Plack & Moore (2014)

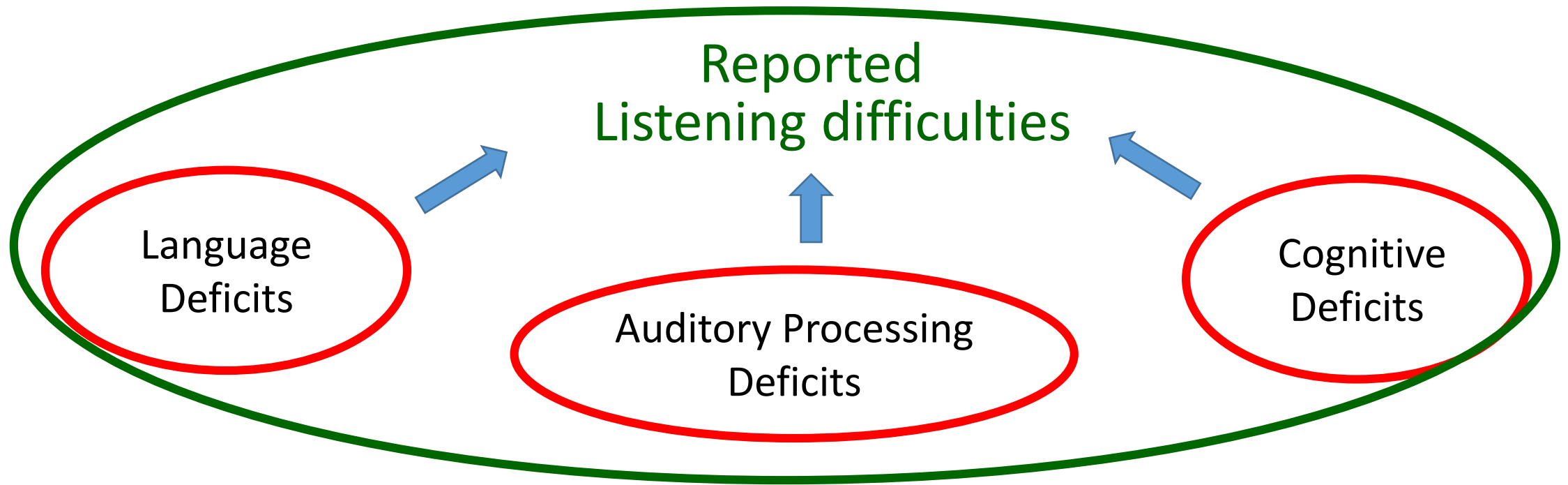
Gyldenkaerne, Dillon, Sharma, Purdy (2014)

Boothalingam, Allan, Allen & Purcell (2015)

Saxena, Allan & Allen (2015)

Ahmed & Ahmed (2016)

Neijenhuis, de Wit, Luinge (2017)



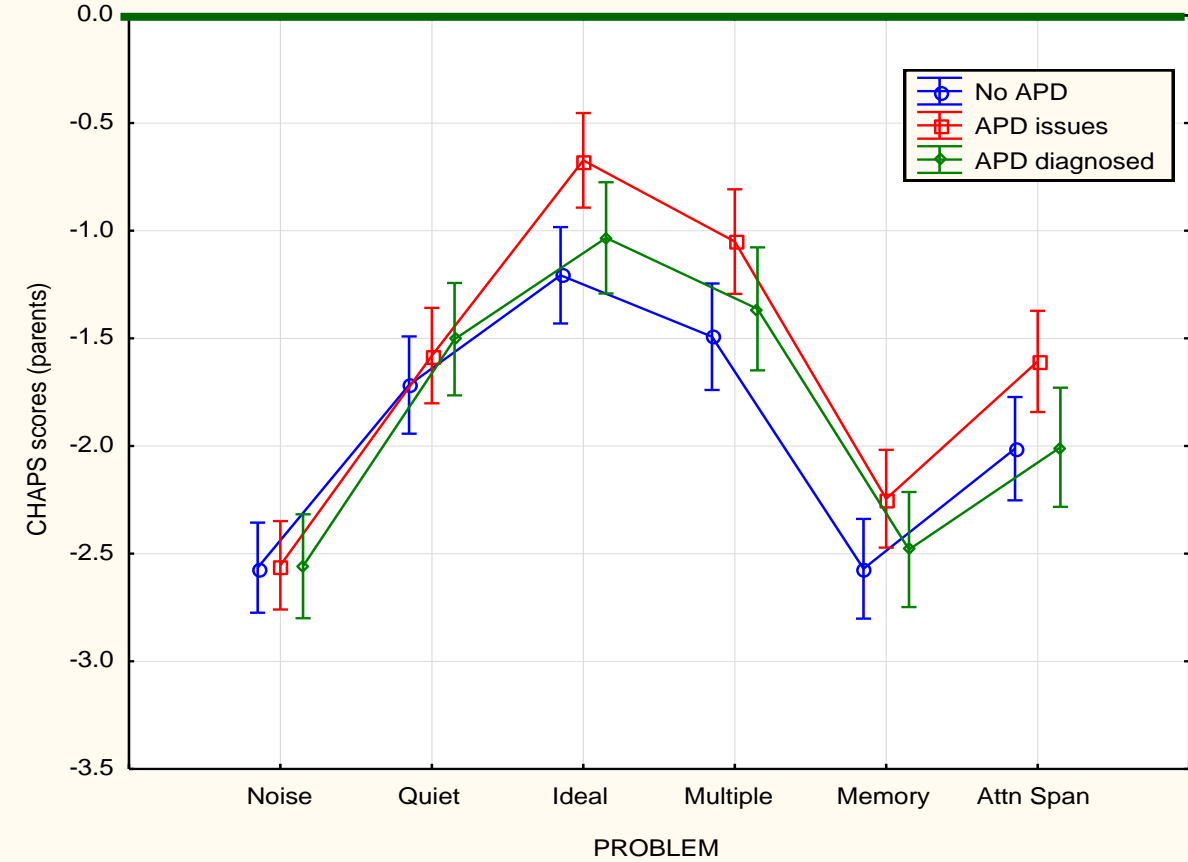
Dawes, Bishop, Sirimanna, Bamiou (2008):

“Children diagnosed with APD reported similar symptoms and similarly had high rates of co-morbid learning problems *[as those not diagnosed with APD]*”.

CHAPS questionnaire results – Great Ormond Street APD Clinic, London

Children's
Auditory
Performance
Scale

Parents



Same difficulty
Slightly more difficulty
More difficulty
Considerably more difficulty

Teachers

