

Self-reported hearing handicap in adults aged 55–81 modulated by hearing abilities, frailty, mental health, and willingness to use hearing aids*

Quality of life in the older population can be affected by hearing loss:

- ▶ limitations in daily activities
- ▶ challenged independence



Determine the individual factors related to self-reported hearing handicap and hearing-related quality of life in older age

212 participants

Aged 55–81 years



Outcome Measures



Hearing Handicap Inventory for Elderly / Adults (HHIE/A)



Hearing Aid Status (non-/use or non-/willingness to use hearing aids)



Frailty Index of Accumulated Deficit (FI-CD)



Visual acuity, contrast sensitivity, and color vision



Audiological Assessment



Balance examinations



General Health and Health-related Quality of Life Questionnaire

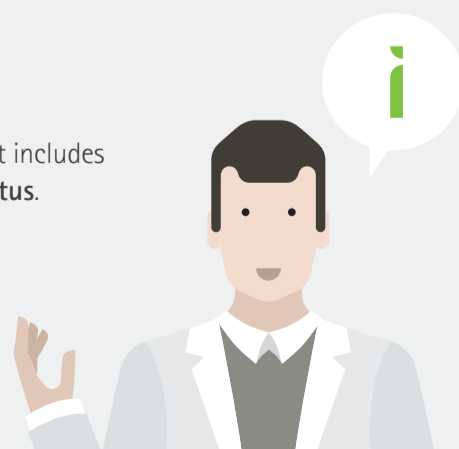


Higher HHIE/A scores = higher self-perceived handicap

Indicator	HHIE/A score	Self-perceived handicap
Better hearing = lower HHIE/A score	↘	↘
Higher FI-CD scores = higher HHIE/A score	↗	↗
Lower mental health rating = higher HHIE/A score	↗	↗
Higher willingness to use hearing aids = higher HHIE/A score	↗	↗

Considerations for Practice

- ▶ Self-perceived hearing loss handicap is **not restricted to hearing levels**, but includes other personal factors such as **age, frailty, general, and mental health status**.
- ▶ The results from this study support **approaching care** from a holistic perspective: audiologists should **consider other health-related factors** when evaluating the impact of hearing loss on clients' overall well-being.



*Nuesse, T., Schlueter, A., Lemke, U., & Holube, I. (2021) Self-reported hearing handicap in adults aged 55 to 81 years is modulated by hearing abilities, frailty, mental health, and willingness to use hearing aids, *International Journal of Audiology*, DOI: 10.1080/14992027.2020.1858237