

DEMENTIA & HEARING LOSS

Untreated hearing loss increases risk of dementia by 200-500%.

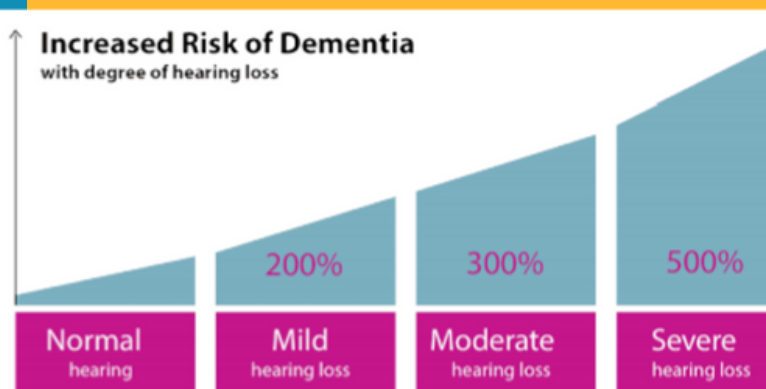


Figure 1: Summary of Data from Lin et al.,



DID YOU KNOW?

The single most modifiable factor for preventing dementia is the treatment of hearing loss.

HOW IS HEARING LOSS RELATED TO COGNITIVE DECLINE?

Over 48 million people in the U.S. are impacted by hearing loss.

For most, age-related hearing loss is inevitable, affecting more than one in three individuals between the ages of 65 and 74. That number grows to over half of all seniors over the age of 75. Age-related hearing loss, also known as presbycusis, is often gradual and due to a loss of sensory hair cells within the cochlea. Loss of these cells disrupts communication between the ear and brain, which can impact several essential brain areas utilized for communication, such as hearing, memory, speech and language.

In 2011, Dr. Frank Lin and his colleagues at Johns Hopkins reported that individuals with hearing loss have significantly greater risk for developing dementia than their normal hearing peers. In fact, their research showed that untreated hearing loss increases the risk of dementia by 200-500% (see graph above).

HOW CAN UNTREATED HEARING LOSS LEAD TO COGNITIVE DECLINE?

1. Onset of physiological factors simultaneously affecting the memory and hearing centers.
2. Cognitive Overload (re-prioritization of brain cells)
3. Cerebral Atrophy (use it or lose it!)
4. Psycho-social factors (social isolation, depression)

Management of hearing loss has shown a reduction in rates of dementia as well as reversal of cognitive effects.

DON'T DELAY, TAKE ACTION!

Every person over 60 years of age should be referred for a comprehensive audiological evaluation.

- * If hearing loss is detected, management of loss and re-evaluation every 1-2 years is recommended.
- * If hearing loss is not detected, re-evaluation every 3-5 years, or sooner if new concerns arise.
- * Medicare and most private insurance carriers allow for a hearing evaluation annually with physician referral.

References:

Allen et al. (2003). The Effects of Improving Hearing in Dementia. *Age and Ageing* (32(2):189-93).
Gurgel et al. (2014). Relationship of Hearing loss and Dementia. *Otol Neurotol* (35(5): 775-781).
Lin et al. (2011). Hearing Loss and Incident Dementia. *Arch Neurology* (68(2): 214-220).



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