



Thu, Apr 10, 2025, 12:00 PM EDT

The Neurocognitive Impact of Hearing Loss: Longitudinal Insights and Clinical Implications



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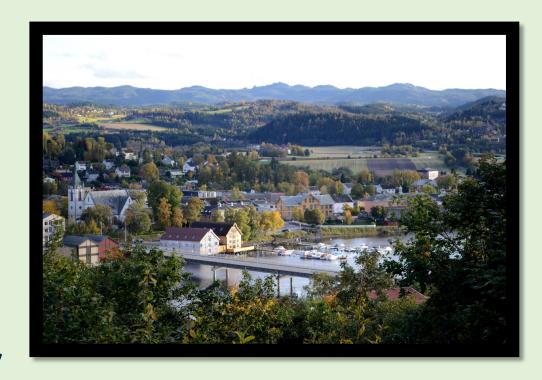






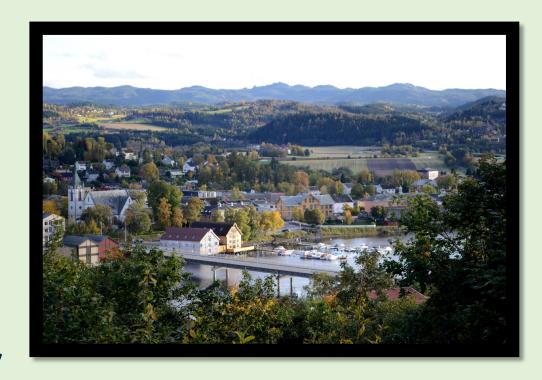


I have no potential conflict of interest to report



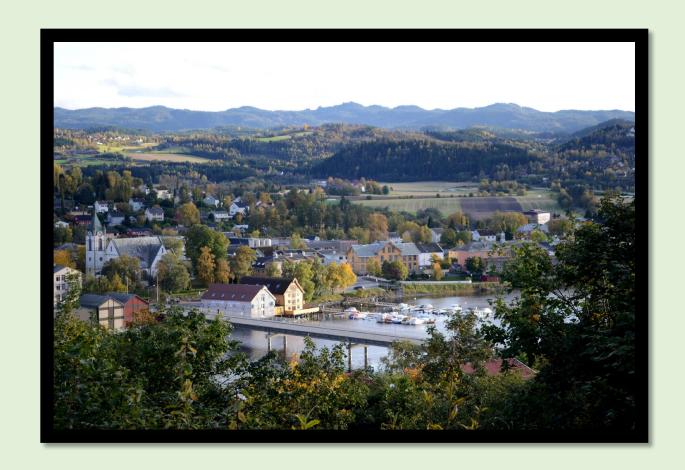
# What you will hear

- 1.  $H_1 = \underline{H}$ earing  $\underline{I}$ mpairment is an individual  $\underline{R}$  isk factor for  $\underline{D}$ ementia  $\underline{H}$
- 2. The latest update



# What you will hear

- 1.  $H_1$  = Hearing Impairment is an individual Risk factor for Dementia HIRD
- 2. The latest update
- 3. Do you listen?



# hear

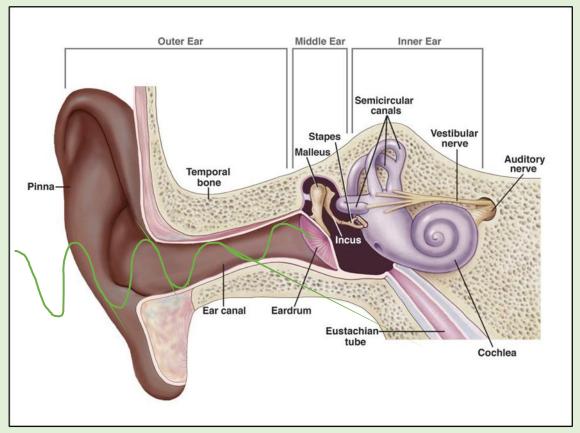
Hearing Impairment is an individual Risk factor for Dementia

listen

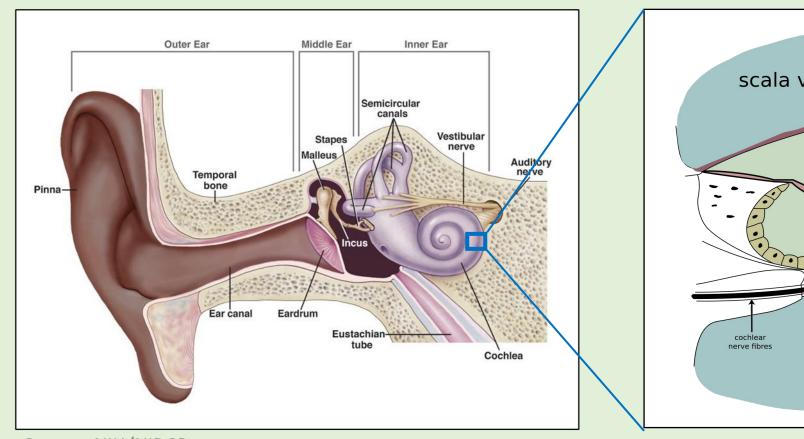


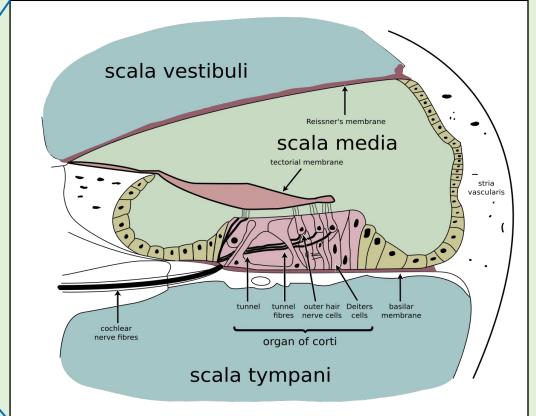
The HIRD Project

### Poll 1



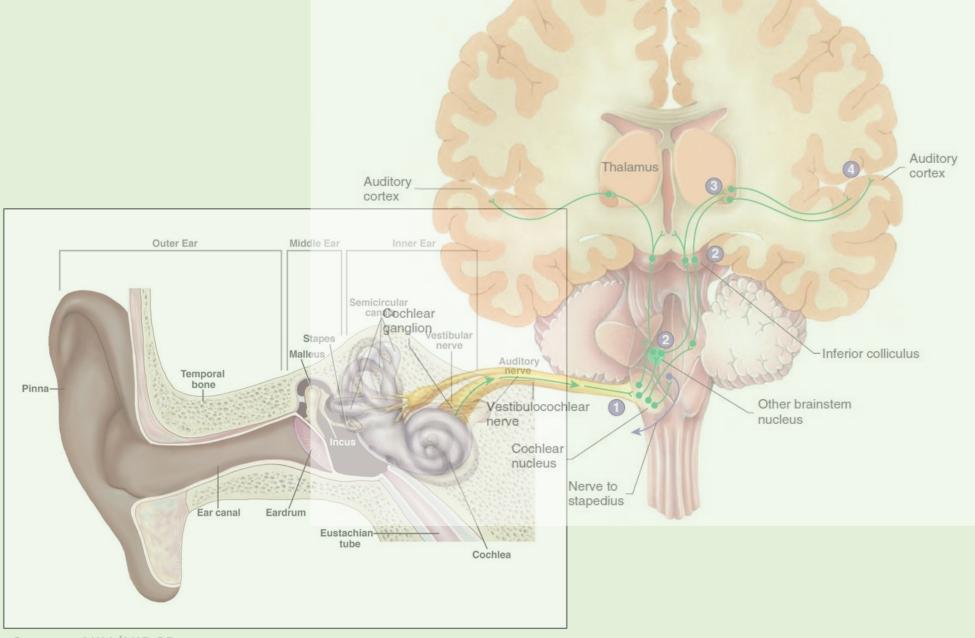
Source: NIH/NIDCD





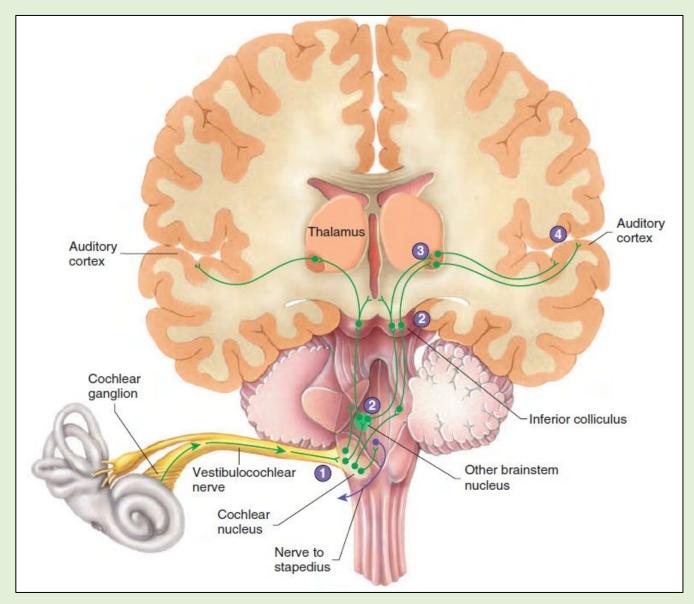
Source: NIH/NIDCD

Source: Oarih Ropshkow/CC BY-SA 3.0



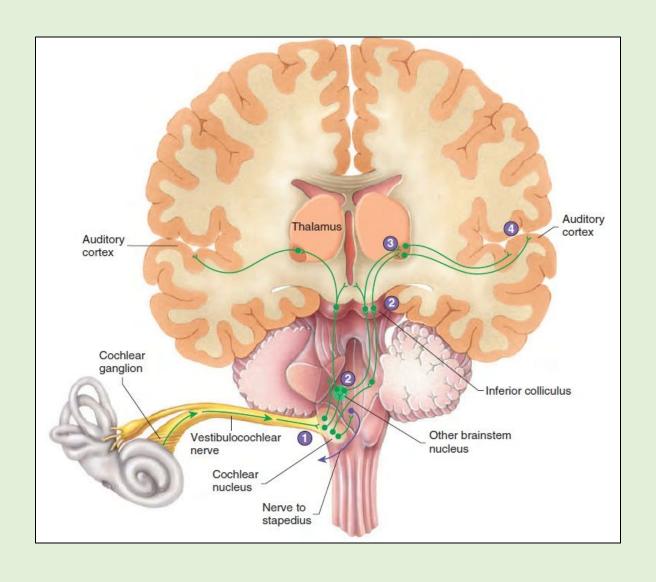
Source: NIH/NIDCD

- motor coordination
- balance
- language
- emotions
- integration with other senses
- memory
- learning

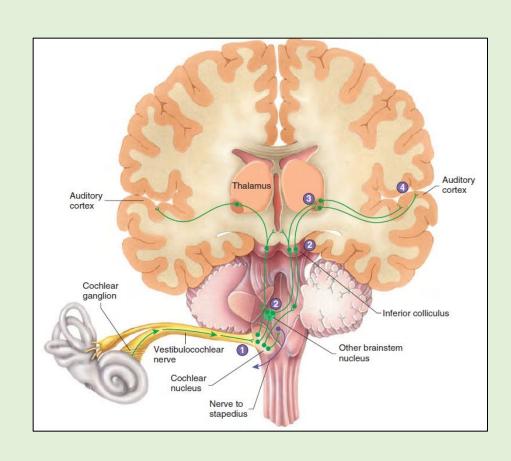


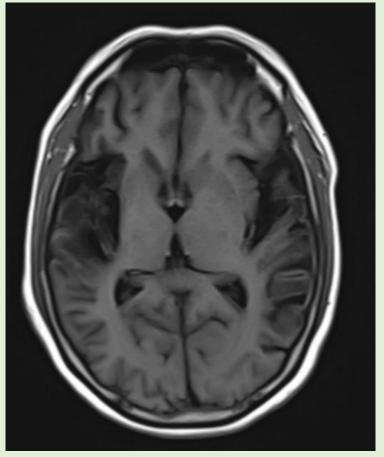
Source: BrainKart.com

### 1. Sensory Deprivation Hypothesis



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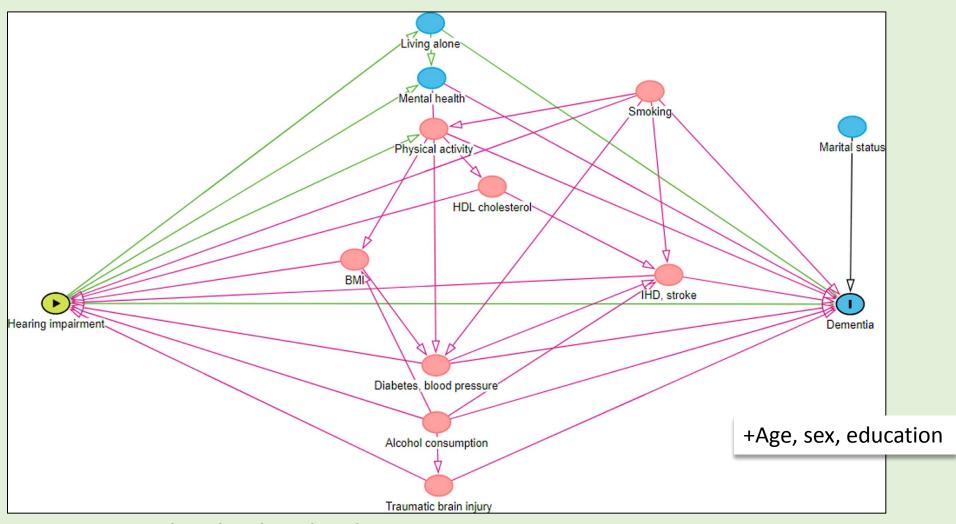


Source: Kumar K,Radiopaedia.org https://radiopaedia.org/cases/174778

## What we believe

- 1. Sensory Deprivation Hypothesis
- 2. Shared aetiology
- 3. Cognitive load
- 4. Social isolation and depression

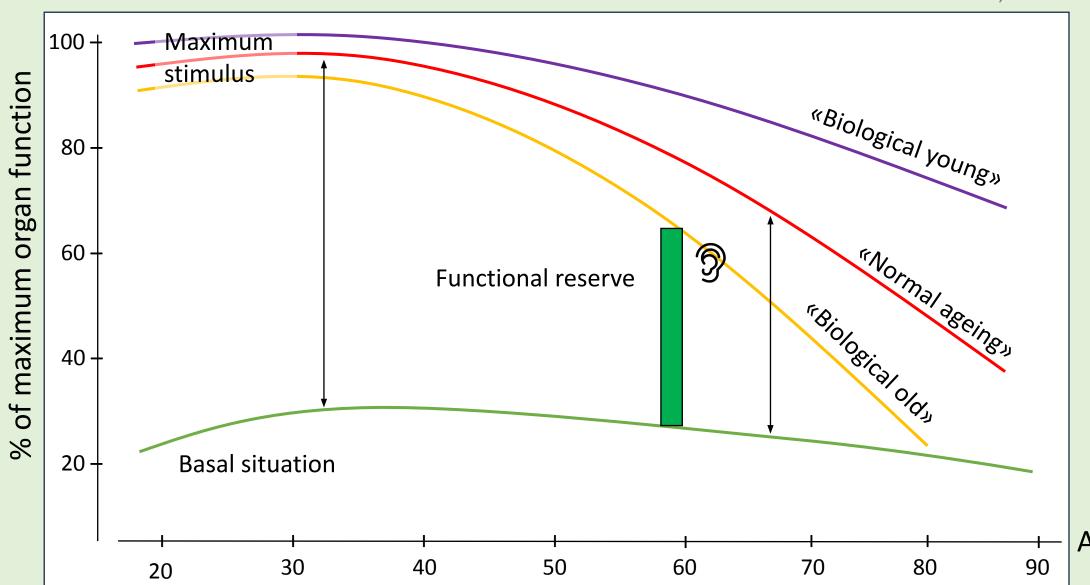
### 2. Shared aetiology



Source: Myrstad et al, eClinicalMedicine, 2022.

## 3. Cognitive load

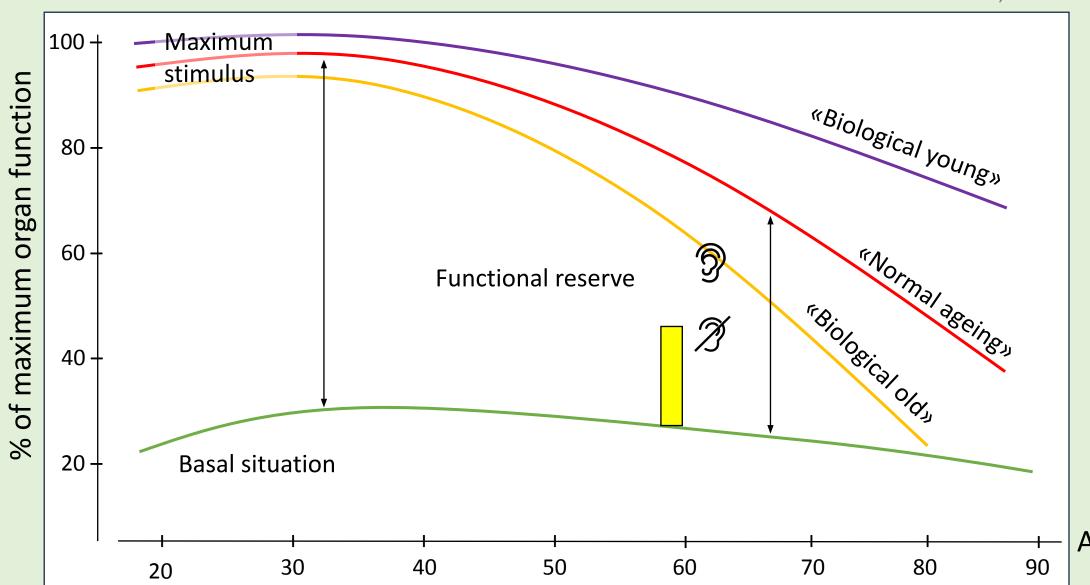
Figure reproduced from Wyller TB, Geriatri, 2018



Age (years)

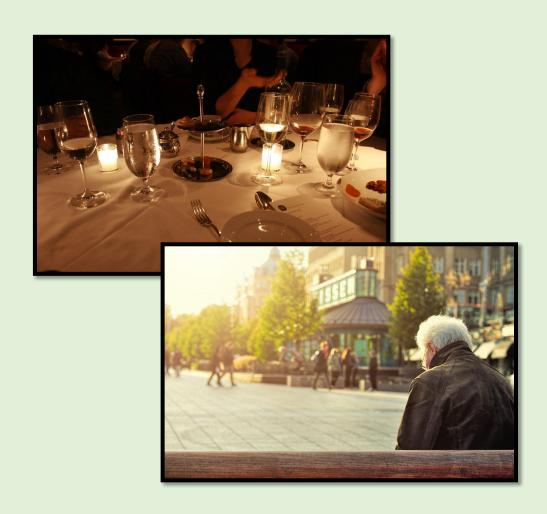
## 3. Cognitive load

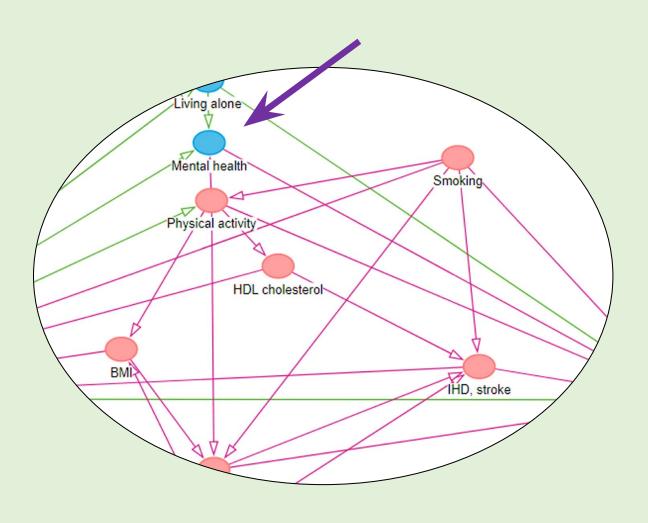
Figure reproduced from Wyller TB, Geriatri, 2018



Age (years)

### 4. Social isolation and depression





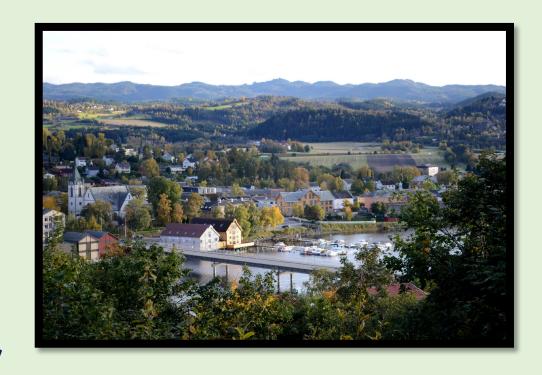
### What we believe

Genetic factors?
Hearing aids?



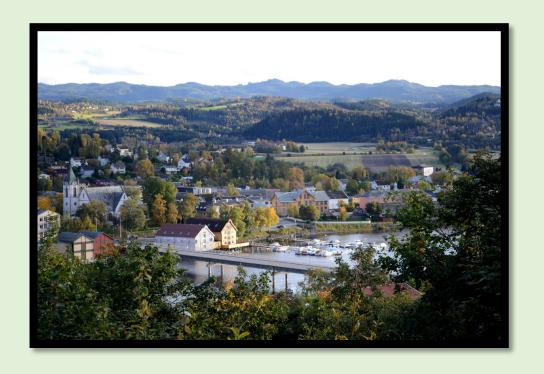


### Poll 2



# What you will hear

- 1.  $H_1$  = Hearing impairment is an individual risk factor for dementia
- 2. The latest update
- 3. Do you listen?



## What we should have heard

Hearing impairment

Dementia

### What we should have heard

### Hearing impairment

- audiometrically verified at baseline

#### Dementia

- not further specified

### Design

- 5 years follow-up
- adjustment for confounding variables

### What we should have heard

#### Previous research

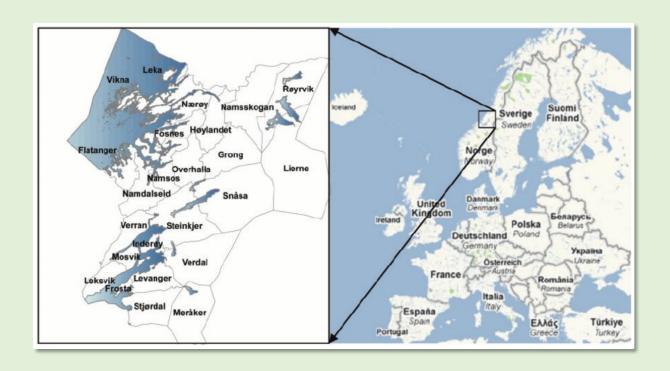
- audiometrically verified at baseline
- 5 years follow-up
- adjustment for confounding variables

#### Limitations

- no representative community cohort
- only male gender
- relatively short follow-up
- no dementia subtypes

### The HUNT Study

- audiometrically verified at baseline
- 20+ years follow-up
- adjustment for confounding variables
- reliable dementia diagnostics
- dementia subtypes
- population-based cohort



# The Trøndelag Health Study (HUNT)

HUNT1 1984-1986

HUNT2 1995-1997

HUNT3 2006-2008

HUNT4 2017-2019

## Hearing impairment prevalence

#### Hearing treshold level

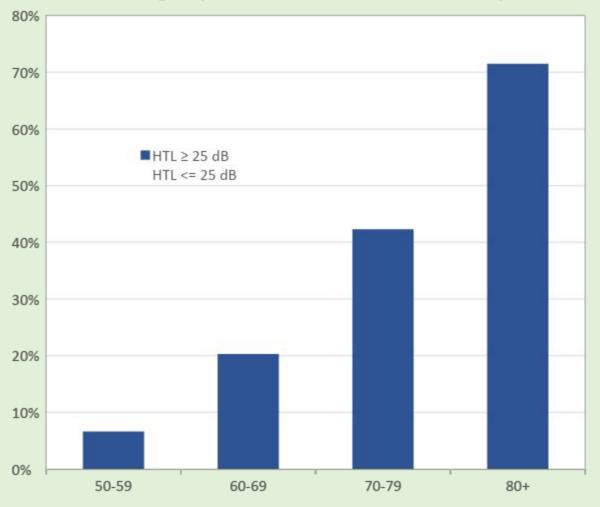
≤25dB: Normal hearing

26-40: Mild impairment

≥35 dB: Disabling hearing loss

>40: Severe impairment

#### Hearing Impairment Prevalence Germany



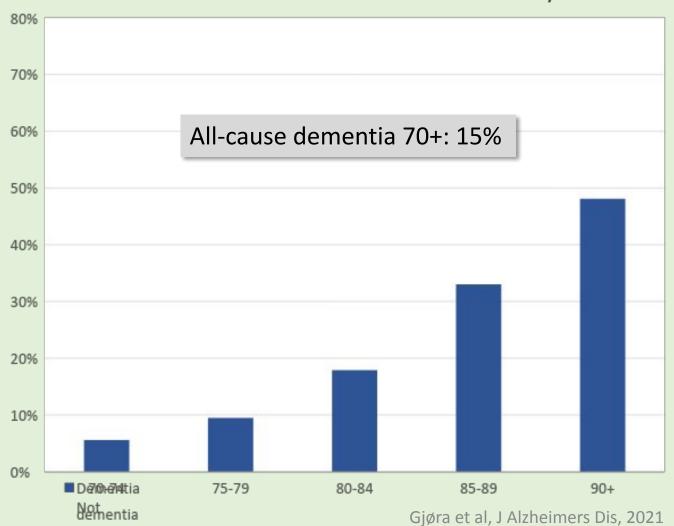
Löhler et al, Eur Arch Otorhinolaryngol, 2021

## Dementia diagnostics and prevalence

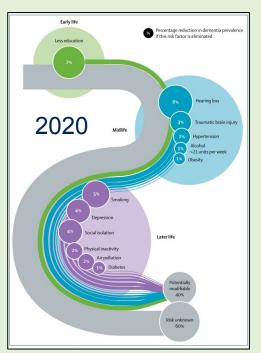
#### MoCA

- CERAD WLMT
- SIB-8
- I-ADL, P-ADL
- PSMS
- NPI-Q
- CDR
- HADS

#### Standardised Dementia Prevalence Norway







2024

Middife

Hearing loss

7%

High LDL cholesterol

3% Transmatic brain injury

28 Diabetes

22 Diabetes

22 Diabetes

23 Hipportension

15 Doestry

18 Excessive alcohol

Late life

Sin Social isolation

28 Visual loss

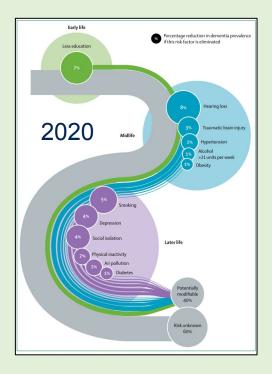
Percentage reduction in cases of demonstral if the risk factor is climonated.

Livingston et al, The Lancet

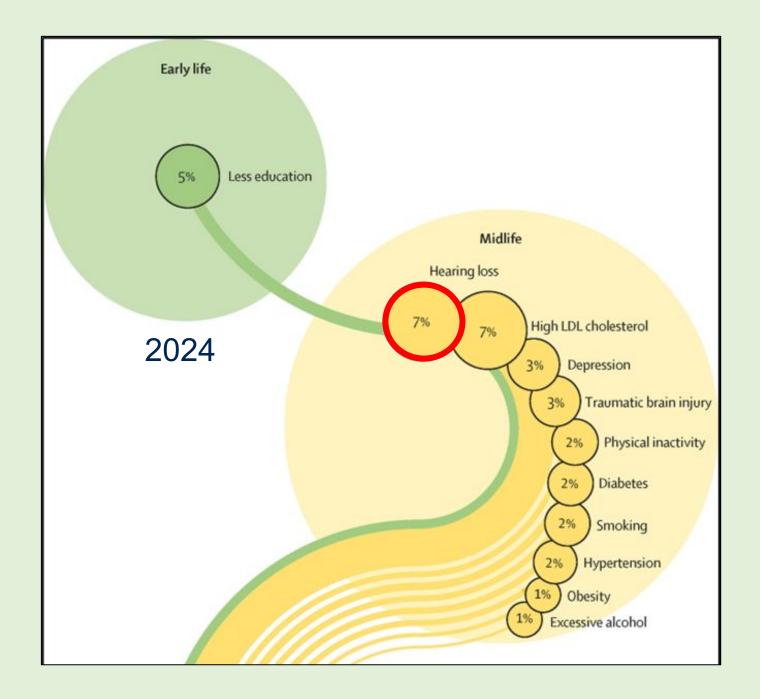
## What we should have HIRD

(Hearing Impairment is an individual Risk Factor for Dementia)

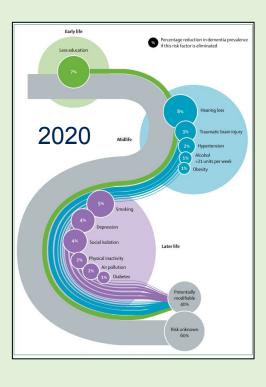




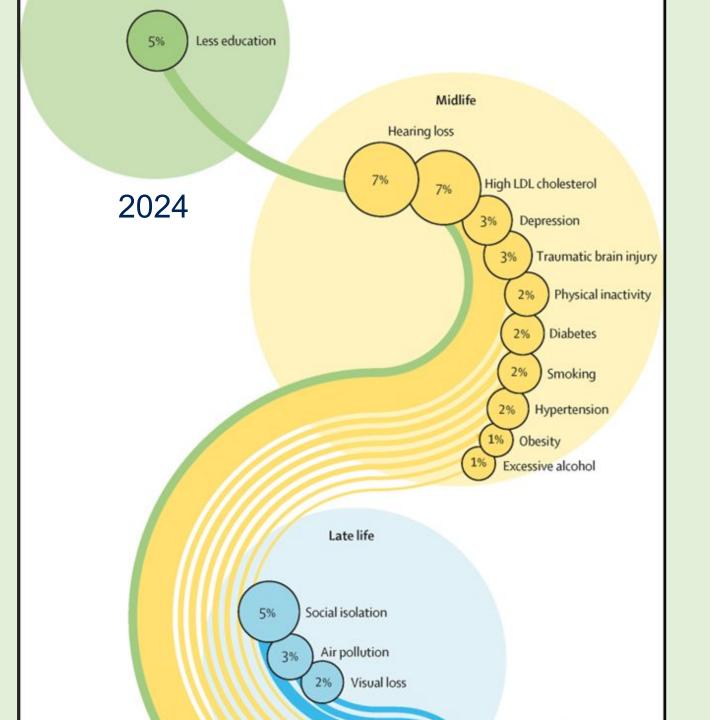
The Lancet







The Lancet



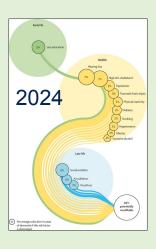


RR 1.94 (95% CI 1.38 to 2.73)

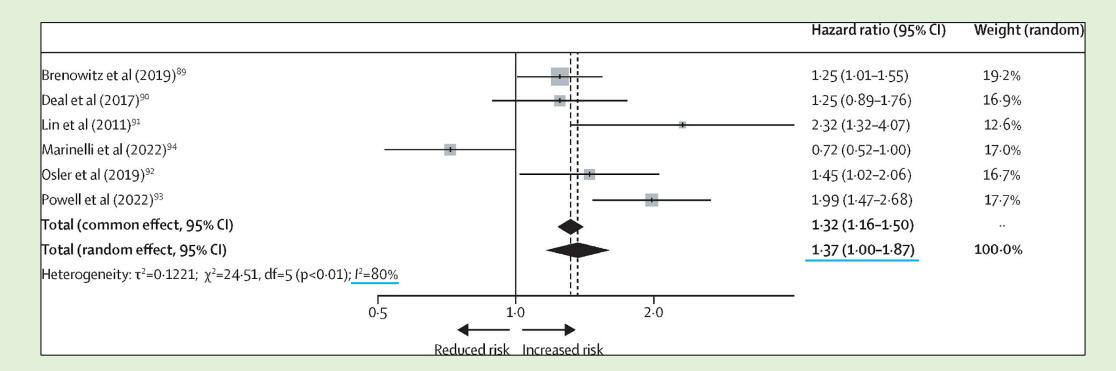
Study	RR (95% CI)	Weight % (random)	Risk ratio		
Lin et al (2011) <sup>66</sup>	2.32 (1.32-4.07)	27.3%			
Gallacher et al (2012) <sup>67</sup>	2.67 (1.38-5.17)	21.3%			
Deal et al (2016) <sup>65</sup>	1.55 (1.10-2.19)	51.4%	-		
Random effects model	1.94 (1.38-2.73)	100%	-		
Heterogeneity: I <sup>2</sup> =29%, tau <sup>2</sup> =0·0278, p=0·2445					
		0.2	0·5 1 2 5		



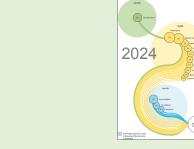
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HR 1.37 (95% CI 1.00 to 1.87)





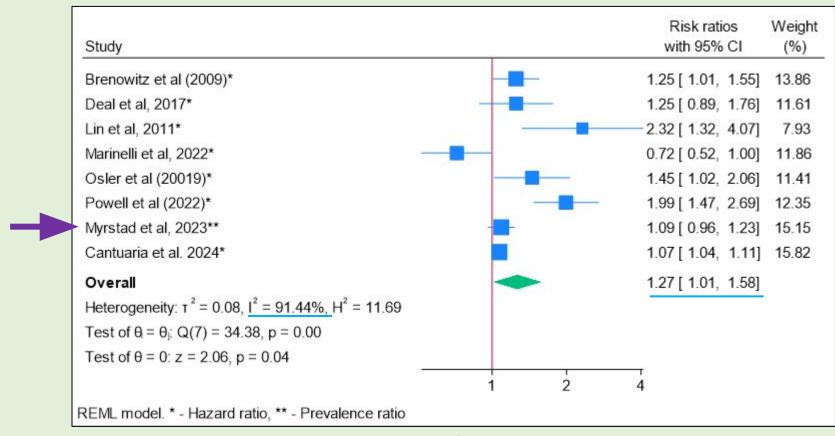


2025

RR 1.94 (95% CI 1.38 to 2.73)

HR 1.37 (95% CI 1.00 to 1.87)

RR 1.27 (95% CI 1.01 to 1.58)

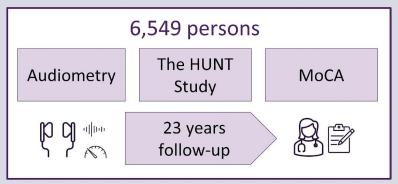


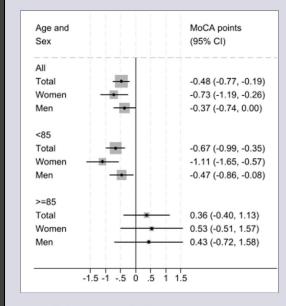
Made by Bo Engdahl, Norwegian Institute of Public Health



## Hearing impairment reduces performance in MoCA





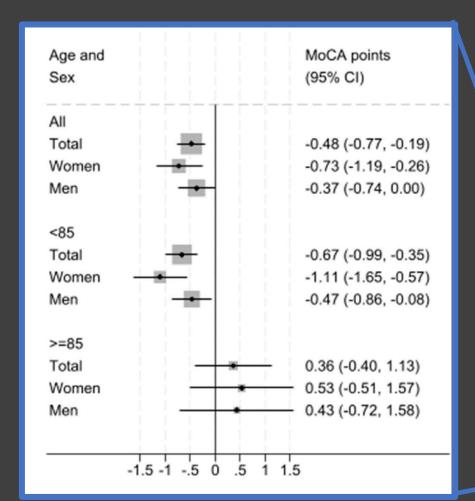


Alzheimer's & Dementia\*
THE JOURNAL OF THE ALZHEIMER'S ASSOCIATION

We found a 0.67 point reduction in the Montreal Cognitive Assessment Scale in persons under 85 years with ≥25 dB hearing impairment

- Hearing loss predicts reduced cognitive performance over 20+ years
- The association remained after excluding hearing-dependent tasks in the MoCA
- These findings emphasize the importance of addressing hearing loss in cognitive assessment

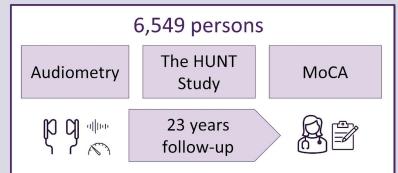
Myrstad C, Engdahl BL, Costafreda SG, Krokstad S, Livingston G, Selbæk G. Hearing and cognitive scores measured with the Montreal Cognitive Assessment Scale in The HUNT Study, Norway. Alzheimers's Dement. 2024. DOI: 10.1002/alz.14514. Open Access

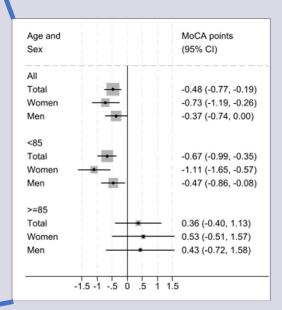




## Hearing impairment reduces performance in MoCA







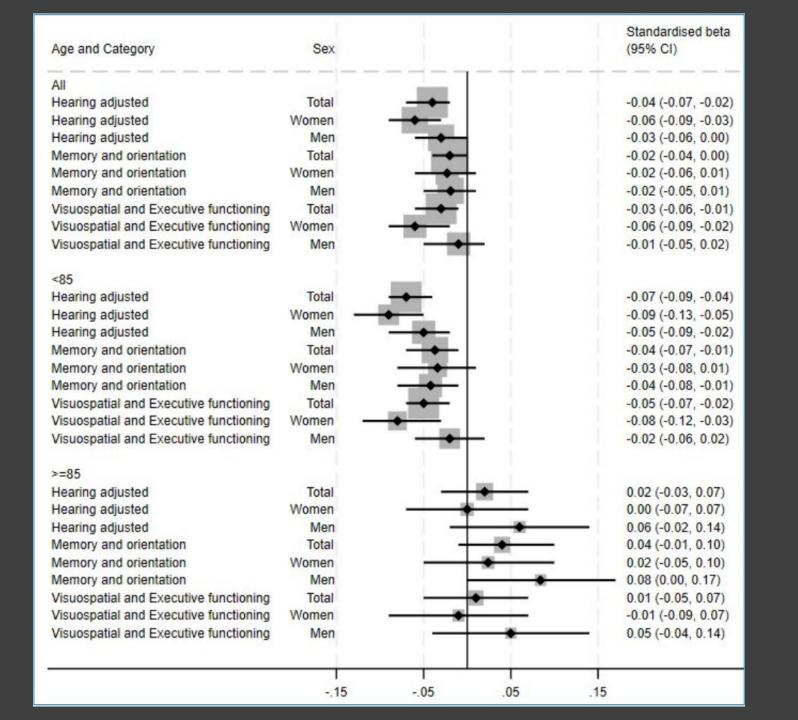
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Alzheimers's Dement. 2024. DOI: 10.1002/alz.14514. Open Access





# What you HIRD

- ✓ Hearing impairment is a major cause of dementia
- ✓ Don't let hearing impairment decide how to live your life
- Recognize hearing impairment as a disease and start treatment

Hearing impairment was associated with an increased risk of dementia RR 1.27 (95% CI 1.01 to 1.58)

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