

Undergraduate & Master's degree





Northwestern University



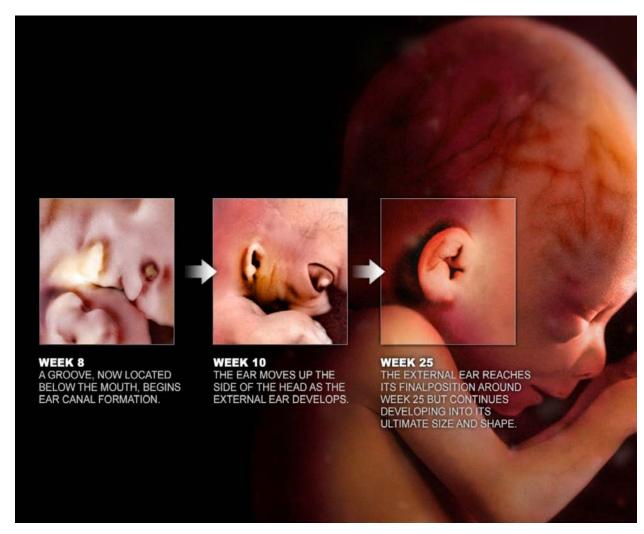
3rd year Ph.D student

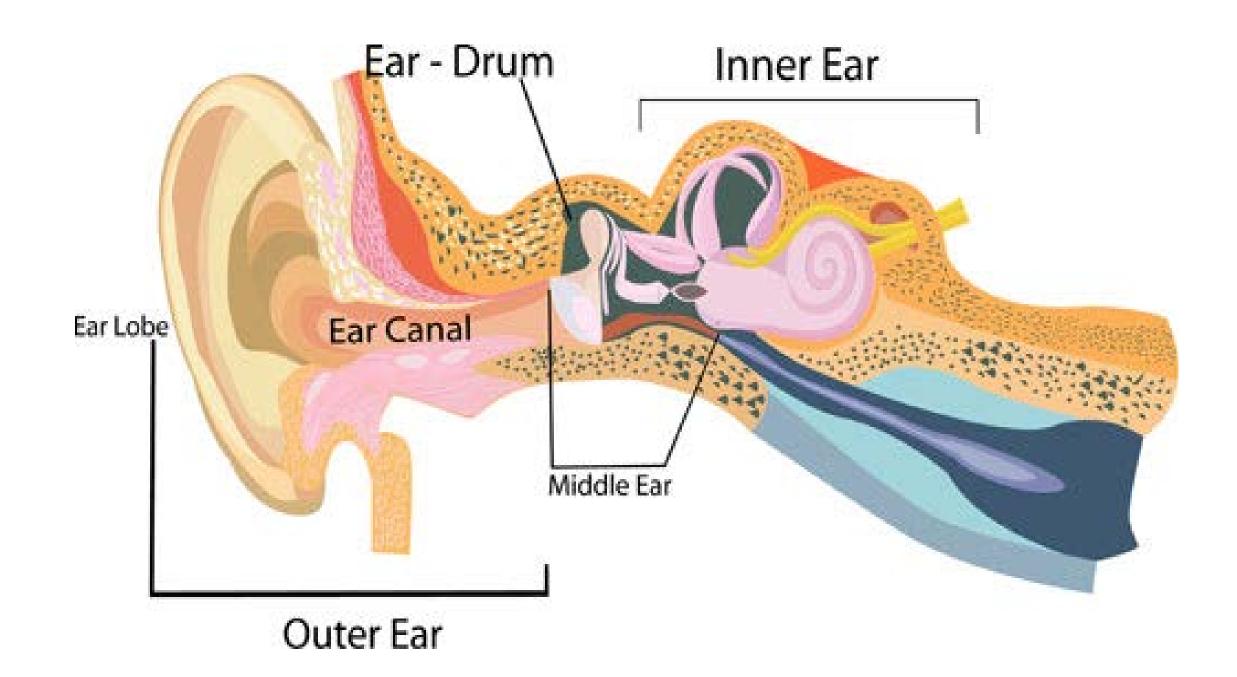
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KEY STAGES OF THE DEVELOPMENT OF THE HUMAN EAR

- □ Development of the auditory system begins in the third week of gestation.
- ☐ From 20 weeks, the fetus starts to hear sounds.
- ☐ Adequate intrauterine auditory stimulation is necessary for the development of the inner ear and auditory centers in the brain.
- Both intrauterine and postnatal sound exposures are critical for the proper development of the auditory system.





Hearing Milestones in Early Childhood

Hearing and Understanding

0-3 Months

- Startles to loud sounds
- Quiets or smiles when spoken to
- Seems to recognize caregiver voice and quiets if crying
- Increases or decreases sucking behavior in response to sound

4-6 Months

- Moves eyes in direction of sounds
- Responds to changes in tone of your voice
- Notices toys that make sounds
- Pays attention to music

Hearing and Understanding

7 Months-1 Year

- Enjoys games like peek-o-boo and pat-a-cake
- Turns and looks in direction of sounds
- Listens when spoken to
- Recognizes words for common items like "cup", "shoe," "juice"
- Begins to respond to requests ("Come here," "Want more?")

1-2 Years

- Points to a few body parts when asked
- Follows simple commands and understands simple questions ("Roll the ball," "Kiss the baby," "Where's your shoe?")
- Listens to simple stories, songs, and rhymes
- Points to pictures in a book when named

Intact auditory system is necessary for a child's speech and language acquisition as well as cognitive development.

□ Hearing impairment may interfere with a child's speech and language acquisition as well as cognitive development.

CAUSES OF HEARING IMPAIRMENT IN CHILDREN

- ☐ **Genetic factors** about 50% of PCHI (Gene mutation -120 known genes (80 associated with syndromes and 40, non-syndromic HI; Inheritance patterns)
 - → Syndromic HI 30% of genetic HL (Has HL as one of the clinical symptoms)

Over 400 syndromes include HL as a feature.

e.g. Down syndrome, Turner syndrome, Usher syndrome, Waardenburg syndrome

→ Non-syndromic HI- Independent of any syndrome 80% of genetic deafness

Mutations in the GJB2, which produces the protein Connexin 26 is responsible for 50% of non-syndromic HL e.g. Adamorobe in Ghana

Prenatal- Infections during pregnancy (rubella, toxoplasmosis, cytomegalovirus)

Maternal therapy (certain medications taken during pregnancy- Alcohol, ototoxic drugs)

Perinatal- conditions and complications around the time of birth

Prematurity (NICU)

Anoxia

Severe jaundice,

Low birth weight

Ototoxic drug treatments

Neonatal sepsis

Birth trauma

Postnatal- Factors that could cause HI after birth

Bacterial meningitis,

measles,

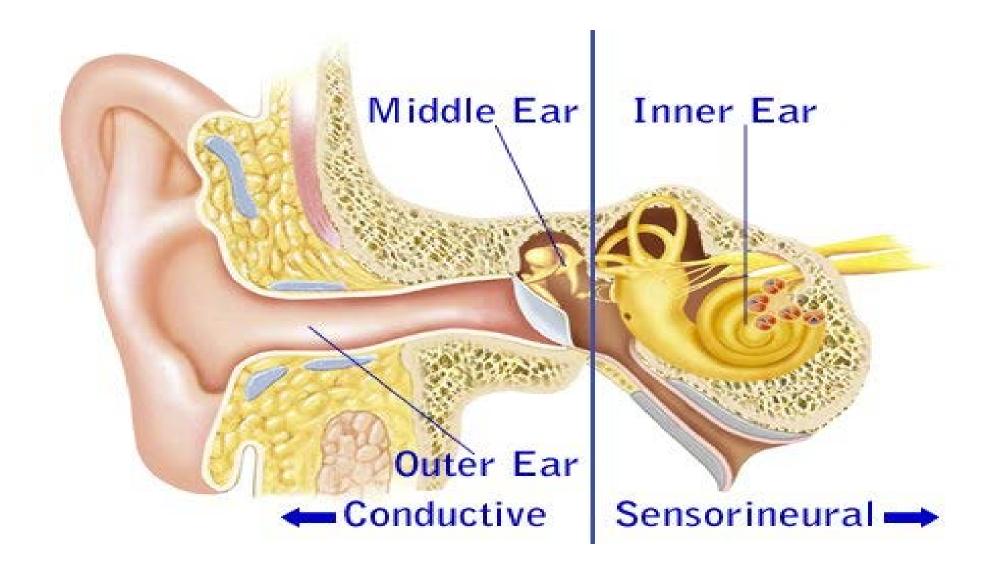
mumps

ototoxic treatments

chemotherapy



TYPES OF HEARING LOSS



HEARING LOSS TYPES





Noise damage

Sensorineural



Drug side effects



Auditory tumors

Mixed













Conductive

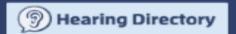


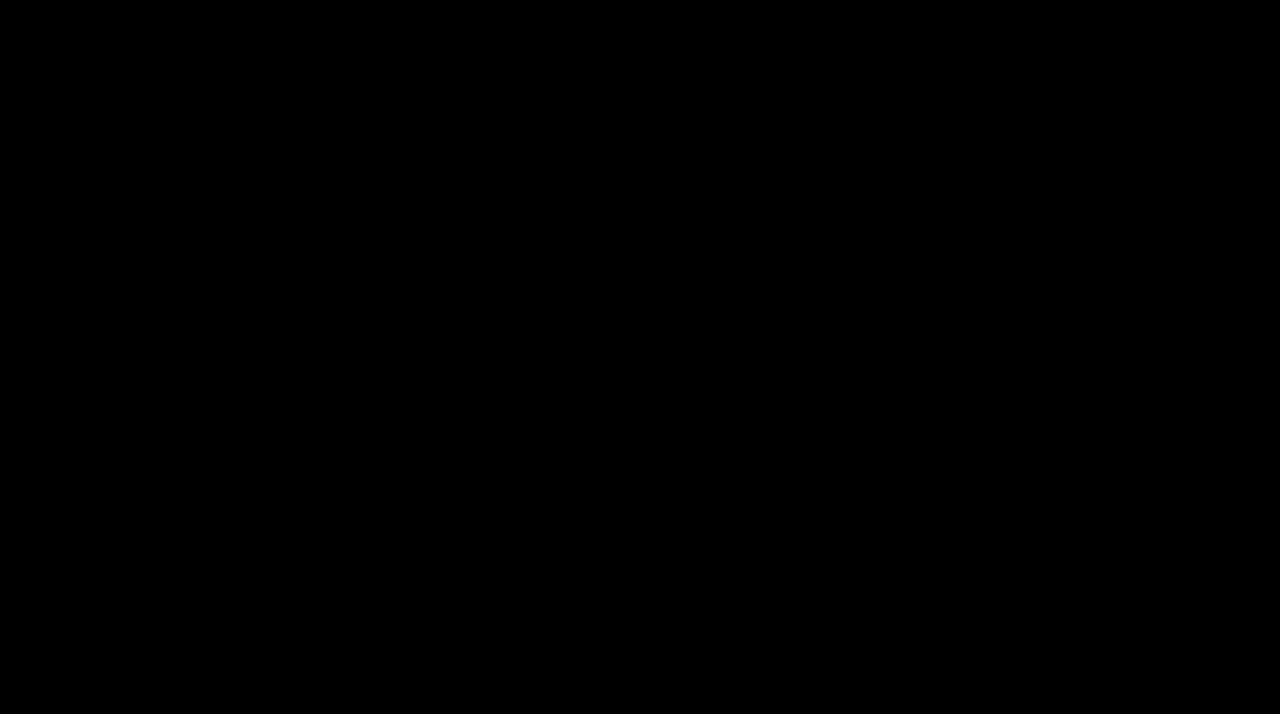






Blast/explosion





Difference Between Hearing and Listening

Hearing Listening
Hearing involves detecting sound waves and making them accessible t the brain- Audiologist
Acoustic accessImproving sound quality
Listening is the active process of focusing on and making sense of the sounds that are heard- Parents, teachers, Speech Therapists.
 ☐ Focus and attention ☐ Making sense of sound

Implications of Hearing Disruptions

- ☐ Hearing impairment impacts language exposure and access in children
- ☐ Children without appropriate language exposure and access fall behind their hearing peers in multiple areas:
 - → Delays in speech and language development
 - → Cognition (memory, attention, and problem-solving skills)
 - → Reading
 - → Social-emotional development
 - → Lower academic achievement
 - → Difficulties in social integration and forming meaningful relationships.

These delays can persist into adulthood.

☐ Hearing impairment affects about 34 children globally.

Joint Committee on Infant Hearing (JCIH)

Key recommendations

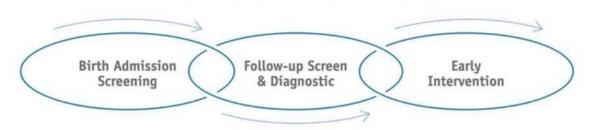
- □ Universal Newborn Hearing Screening (UNHS)
- □ Follow-Up and Diagnosis
- □ Early Intervention
- Ongoing Monitoring/regular surveillance/risk factor monitoring
- Comprehensive Support

Early Hearing Detection and Intervention

Goal of EHDI (Early Hearing Detection and Intervention):

- □ Primary Objective:
 - → Ensure that all infants with hearing impairment are identified as early as possible.
 - → Initiate appropriate intervention by 3–6 months of age.

Three Key Components of Early Hearing Detection & Intervention Programs



Benchmark

- → 1-3-6 benchmark (screening completed by 1 month, audiologic diagnosis by 3 months, enrollment in early intervention by 6 months)
- → 1-2-3 benchmark is better
- → 6 weeks- 4 months- 8 months (South Africa)
- → Ghana??

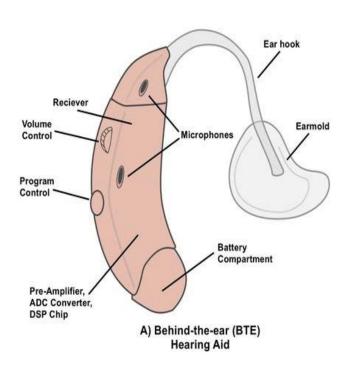
When timelines are met, the linguistic competence and literacy development are maximized

Hearing Screening

- □ OAE testing is fast and cheap but is easily influenced by ear canal obstruction or middle ear effusion and is not able to detect retrocochlear hearing impairment.
- □ AABR is slower, more expensive and requires patient immobility (natural sleep in newborns), but is able to detect retrocochlear losses.



INTERVENTION: HEARING AIDS





B) In-the-ear (ITE) Hearing Aid

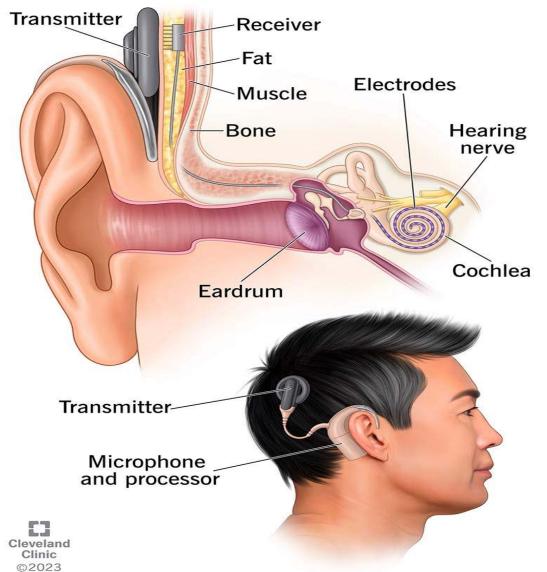


C) Completelyin-the-canal (CTC) Hearing Aid



INTERVENTION: COCHLEAR IMPLANTS

Cochlear Implant





What should you do?

Monitor typical developmental milestones for hearing ☐ Be vigilant and observe how the child responds to sounds and speech Create a language-rich environment (consistent communication, reading aloud) Seeking specialized services from Audiologists, Speech therapists, **Pediatricians**

Conclusion

- ☐ Hearing is essential for the acquisition of speech, language, and learning development
 ☐ Hearing loss is the most common sensory deficit and one of the most common
 - congenital abnormalities.
- ☐ Hearing loss harms the development of newborns and results in them living with a significant handicap if not detected and treated early.
- □ Early detection of hearing loss and prompt intervention are of utmost importance to minimize the negative impact of hearing loss.

