



Hearing Aids May Help People Live Longer: New Research Suggests

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In older adults, hearing loss is a prevalent and undertreated medical condition that has been repeatedly linked to cognitive decline, dementia, and poor physical health [1]. However, it is still unclear if receiving rehabilitation via hearing aids can lower mortality risk and enhance general physical health.

Janet S. Choi and colleagues [2] evaluated the association between hearing aid use and all-cause mortality using data from a study cohort in the US National Health and Nutrition Examination Survey. More severe hearing loss was linked to a higher risk of mortality, according to their observation of a dose-response relationship between mortality risk and hearing loss. Simultaneously, they discovered that the mortality risk was lower for regular users of hearing aids than for never users, even after controlling for demographics, medical history, and degree of hearing loss risk. These findings collectively imply that regular use of hearing aids may lower the risk of death. They discovered no difference in adjusted mortality risk between non-regular users and never users of hearing aids, which is consistent with this hypothesis.

Numerous prior epidemiological studies that found a link between hearing loss and all-cause mortality support these conclusions. Nonetheless, there has been inconsistent research on the relationship between using hearing aids and a lower death rate [3,4]. While some research has linked the use of hearing aids to a lower risk of death, other studies have found no protective effects of hearing aids. The lengthy follow-up period (median 10.4 years; range 0.1–20.8) and the use of objective audiometric testing—as opposed to self-reported hearing loss, which can be biased—are two of Choi and colleagues' study's strengths over these earlier studies.

Nevertheless, it is still unclear what mechanism underlies the correlation between lower mortality and hearing aids. For instance, people who have access to hearing care may also be healthier and have a higher socioeconomic status—factors that may be linked to a lower risk of death on their own. Alternatively, hearing aids improve mortality risk by lowering the risk of dementia, which makes sense given the consistent links found between hearing loss and cognitive decline.

In light of the contradictory findings in the literature, more research is required to determine whether and how hearing aids could lower the risk of mortality. The effects of hearing aids on mortality could be further investigated by measuring audiometric hearing loss, hearing aid use, thorough neuropsychological evaluations, and potential confounders. Overall, Choi and colleagues' findings suggested that wearing hearing aids regularly could reduce the risk of increased mortality in persons with hearing loss. To determine whether hearing loss is a modifiable risk factor for dementia and mortality, more research is necessary. Extensive longitudinal research and randomized controlled trials examining populations predisposed to unfavorable health outcomes would be beneficial in assessing the impact of hearing aid usage on the cognitive, motor, and mental functioning of elderly individuals.

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