

## Dr. Jace Wolfe – Deciding Between Hearing Aids and Cochlear Implants

Dr. Teresa Caraway: I think a lot of people are curious about how you decide when a

child stays in hearing aids and when a child needs a cochlear

implant or cochlear implants.

Dr. Jace Wolfe:

Yeah, that's a great question. Sometimes the decision is fairly easy. If a child has no response on their ABR hearing test, or if the hearing testing suggests a severe to profound hearing loss, then the overwhelmingly high likelihood is that the child will make better progress with a cochlear implant compared to hearing aids.

The decision can become a little more murky or cloudy if a child has a moderate degree of hearing loss. In that case, we consider the hearing loss for certain, but other factors that become very important are the speech and language progress that the child is making. It's absolutely critical that the child is with an experienced listening and spoken language specialist that can give the cochlear implant team information about the progress that the child is making, about his or her speech and language and functional auditory performance in real world situations.

And then also, too, it's really important to question the family about the child's functional auditory performance in the real world. There are standardized questionnaires, like the Little EARS Questionnaire or the PEACH Questionnaire, the audiologist or the listening and spoken language specialist should administer with the family to determine how the child is hearing or listening in real world situations.

Then also a medical doctor comes into play, as well. The medical doctor needs to do an evaluation to look at the anatomy of the auditory system, make sure the cochlear nerve is viable and receptive of a cochlear implant, and that there aren't any concerns about the anatomy of the temporal bone that houses the auditory system.

But all those factors come into play. When we work as a team, we can make the right decision about what's going to give the best access to the child's auditory centers of the brain, so that they can develop typical spoken language.

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Dr. Teresa Caraway: Yeah, so coming together as a collaborative team, parent is

important, pediatric audiologist, listening and spoken language specialist, and a medical physician, all coming together, focusing

on that child to maximize the outcome.

Dr. Jace Wolfe: That's right. It takes a village.

Dr. Teresa Caraway: It takes a village.