



Dr. Jace Wolfe – The Early Bird Gets The Worm

Dr. Teresa Caraway: "Early bird gets the worm." What does that mean for hearing aids?

Dr. Jace Wolfe: Simply put, what that means is that hearing aids should be fitted as soon as a hearing loss is identified. Our goal is to make sure hearing aids are fitted by at least six months of age, but we have technology available that allows us to diagnose or identify hearing loss during the first several days or weeks of a child's life. And as soon as hearing loss is identified, really, hearing aids should be fitted within a few days after the identification of the hearing loss.

There are plenty of research studies that show that the earlier a child receives his or her hearing aids, if they have hearing loss, the better their spoken language outcomes are at three years of age, at the time they enter school, and beyond that period. So the early bird gets the worm for certain. The sooner you get your hearing aids, the earlier the age at which you're fitted with hearing aids, the better your spoken language outcomes will be.

Dr. Teresa Caraway: Absolutely, because babies are learners from day one and every day counts, doesn't it?

Dr. Jace Wolfe: No doubt. Yeah, very well spoken.

Dr. Teresa Caraway: That's great. Okay. Now, we also say, "Early bird gets the worm," and what does that mean in terms of cochlear implants?

Dr. Jace Wolfe: Well, we've always known that children who receive their cochlear implant at a earlier age will have better outcomes, but there's just been a overwhelming amount of evidence or research that's been published over the last couple of years or so, that show just how important that is. The target age to provide a cochlear implant for a baby with hearing loss in the United States has been about 12 months of age, or around the child's first birthday. But there's a large body of research that shows that if you can provide cochlear implants even earlier than that, outcomes, spoken language outcomes, will be even better.

Specifically, most studies show that by really as early as six months of age, six to nine months of age, we should be trying to provide a cochlear implant for children with severe to profound hearing loss. And when we do, it's amazing how much better their

08/2018

ability to produce speech is, how much more clearer the clarity of their speech is, and their vocabulary, their ability to be able to express themselves with their own language and ability to understand others' language if they get that cochlear implant early and in time, and we are able to stimulate the auditory areas of the brain to grow those neural networks that are really necessary for complex language to develop.

Dr. Teresa Caraway: Absolutely, and that really begins the underpinning of placing that child on a path to literacy, being able to read 3rd grade level reading by 3rd grade.

Dr. Jace Wolfe: You're exactly right. You hit the nail on the head. If we can provide a cochlear implant by six months of age, there's really no delay in speech and language development, so we're not playing catch up any longer, we're on a developmental curve. The child never falls behind, and by the time they're a year of age, or 18 months of age, their spoken language should be similar to a child with normal hearing of the same age. When they get to preschool and kindergarten, once again, their language should be similar to their peers with typical or normal hearing and they should be prepared to set the curve in their classroom.

Dr. Teresa Caraway: Yeah, so such a time is this, if you happen to be born deaf or hard of hearing today, and the opportunities that are available.

Dr. Jace Wolfe: Oh yeah, we can shoot for the moon.

Dr. Teresa Caraway: Absolutely.