## continued

If you are viewing this course as a recorded course after the live webinar, you can use the scroll bar at the bottom of the player window to pause and navigate the course.

## continued

This handout is for reference only. It may not include content identical to the powerpoint. Any links included in the handout are current at the time of the live webinar, but are subject to change and may not be current at a later date.
"Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD

Programming Cochlear Implants for Listening To and Playing Music: Realistic Expectations vs. Hopeful Aspirations

Dr. Brad Ingrao<br>e-audiology.net

## Doc, I want to be able to...

- Enjoy music with my Cl
- Play music with my Cl for fun
- Play music with my Cl professionally

Q: Are these possible?
A: It depends
"Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD Let's Get Right To It...


Music Simply Will Not Be the Same

## Variables to Consider

- Audiologic History
- Musical Training
- Musical Genre(s)
- Is it Live, or is it Memorex?
- Electrical Hearing Age
- Patient Motivation
"Can We Try That in Bb?" Hearing Loss and Music
© 2014 Brad Ingrao, AuD


## Audiologic History

- Duration of hearing loss
- Progression of Hearing Loss
- Technology History
- Cortical Stimulation Gaps
- Initial hearing loss to hearing aids
- Candidacy to Implantation
- Rehab History
©-audiology.net


## Musical Training

- Age of first exposure
- Genre variety
- Formal training
- Single vs. multiple instruments
- Willingness to switch instruments


## "Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD

## Musical Genres

- Experience playing/listening to multiple vs. single genres
- Measured hearing abilities in different genres
- Willingness to change genres


## Live vs. Recorded

- Recorded Music
- Recording Fidelity
- Playback fidelity (compression, speakers, amp, etc.)
- Sound Level at Cl
- Live Music
- Acoustic vs. amplified
- Mic/Pre-amp technology
- Sound Level at CI
"Can We Try That in Bb?" Hearing Loss and Music
© 2014 Brad Ingrao, AuD


## Electrical Hearing Age

- 0 to 12 months - Speech in Quiet
- 12 - 36+ month - Speech in Noise
- 36+- ? ? ? ? Music


## Patient Motivation

Are they willing to...

- Pay for additional face time with you
- Diagnostics
- Rehab
- Counseling
- Pay for professional musical training
- Be flexible re: genre, instruments, venues, etc.
©-audiology.net


## "Can We Try That in Bb?" Hearing Loss and Music <br> © 2014 Brad Ingrao, AuD

## What about the Research?

- Research on music and Cl's shows
- Rhythm is more accurately perceived
- Large inter-subject variability
- Errors in pitch and timbre perception are also quite variable
- Most show improvement with training
- HOWEVER
- Many of these studies have VERY small cohorts, so be cautious.


## So, What Do We Do???

- Ensure mapping is suitable
- Remember that we are HABILITATING not Rehabilitating
- Resist the urge to run before walking
- Provide real world solutions to offset limitations


## "Can We Try That in Bb?" Hearing Loss and Music <br> © 2014 Brad Ingrao, AuD

## Mapping Goals

- Broadband Audibility
- Loudness Balance Across Channels
- Maximum pitch specificity potential
- Varies by manufacturer
- Maximum usable dynamic range
- This will take time to build
- Verify all the above in the booth (may not be covered by insurance)


## HAB not ReHAB

- Cl patients are building an electrically based auditory system
- Focus should be on consistent, broadband audibility
- Beware of over tweaking
- Re-starting adaptation
- Risk of overstimulation
- Over-reliance on placebo effect


## "Can We Try That in Bb?" Hearing Loss and Music <br> © 2014 Brad Ingrao, AuD

## Crawl, Walk, Run

- Musical development plan should mirror normal auditory development
- Rhythm
- Simple pitch (within the range of best audibility)
- Intervals
- Chords, etc.


## Real World Solution 1

- Determine threshold of A/D limiter
- Have pt. download SLM app and calibrate
- Play their selected music through FF speakers
- Note SLM app level where they first detect distortion
- Instruct on how to use this data, the app and inverse square law to adjust in the real world


## "Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD

## Real World Solution 2

- Counsel to focus on how music makes them feel, rather than what it sounds like
- Pick 10 favorite songs
- Write down how that song used to make them feel
- Identify the attribute responsible for that (rhythm, pitch, instrumentation)

C-audiology.net

## Real World Solution 2 (con't)

- Pack away their 10 favorites
- Download or buy 10 RANDOM albums/CDs
- Listen to the songs and identify those that contain the attributes listed
- Keep the ones that work, trade in the ones that don't
- Repeat and build a new top 10
©-audiology.net


## "Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD

## Backup Plan

- Consider alternative instruments and genres with simpler harmonic structures
- Diatonic instruments
- Drums
- Download "visualizer" app
- appreciate music visually as well as auditorily
- Use visual tuner when playing


## Some Resources

- Munich Music Questionnaire
http://s3.medel.com/pdf/US/bridge/MUMU Questionnaire EN.pdf
- Musical Ears and Music Notes
http://s3.medel.com/pdf/US/bridge/23054_30_Bridge+Catalogue+US.pdf
- HOPE Notes
http://hope.cochlearamericas.com/listening-tools/HOPE-notes
- ABCLIX
https://itunes.apple.com/us/app/ab-clix/id642933228? $\mathrm{mt}=8$


## "Can We Try That in Bb?" Hearing Loss and Music © 2014 Brad Ingrao, AuD

## Summary

- Hearing loss forever alters music perception
- Neither Cl's nor Audiologists can currently "fix" this
- Your patients must control how they deal with those realities
- The world of music is vastly larger than most people think
- If they are willing, they WILL find their music


## Questions?

## bingrao@e-audiology.net

