



Employed through Nova Southeastern University.

Disclosures



Otherwise, the author has no relevant financial or nonfinancial relationship(s) to disclose.

Outline



Importance of Cognition in Audiology

Explanation of Cognition

Brain and Cognitive
Changes Throughout
Life

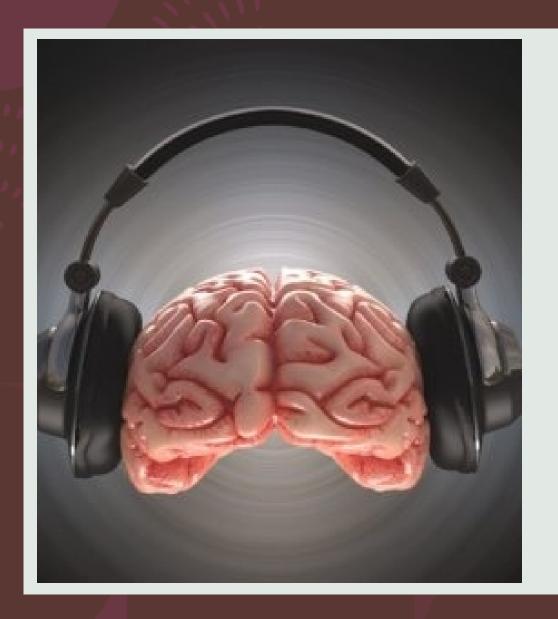
Cognition and Hearing loss

Audiology and Cognitive Screeners









But, what about the brain?





Hearing loss is one of the nine factors that can potentially contribute to the risk of dementia (Livingston, 2017)

Improvement in patient care

Audiologists may be the gatekeepers to cognitive care

It is in our scope of practice



Let's Take a Peek at the Brain and Cognition



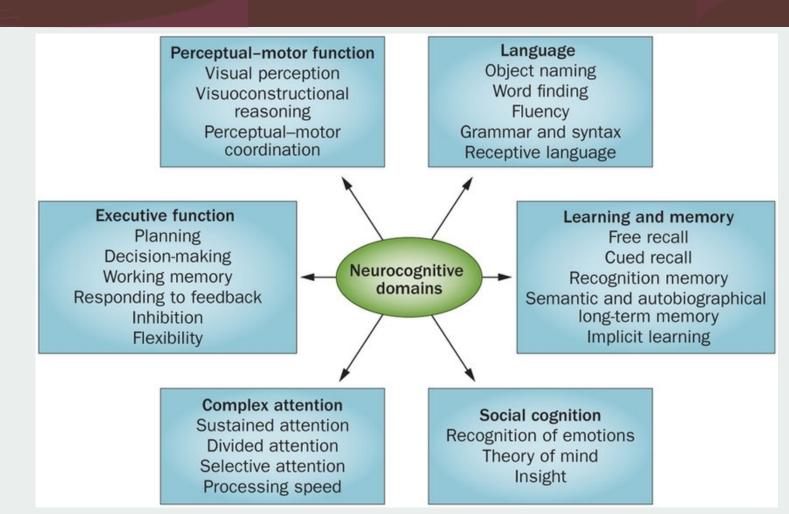




- Cognition now represents a web of complex processes.
- The term 'cognition' refers to the many different processes by which humans and animals understand and make sense of the world (Frith, 2008).

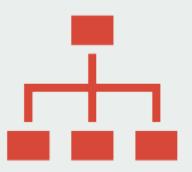
Cognitive Domains

 The Diagnostic and Statistical Manual of Mental Disorders 5th edition (DSM-V) states cognitive functions can be separated into six key domains.



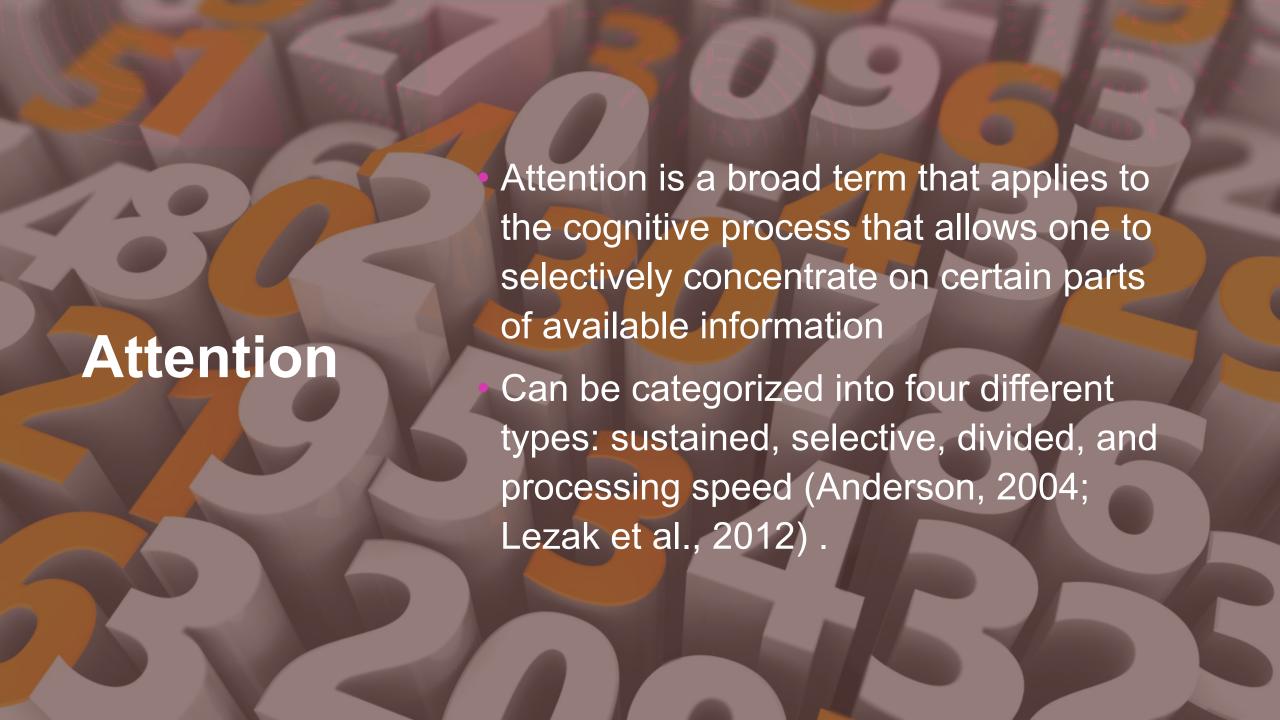
Executive Functioning





Allows a person to engage in appropriate, independent, purposive, and self-serving behavior.

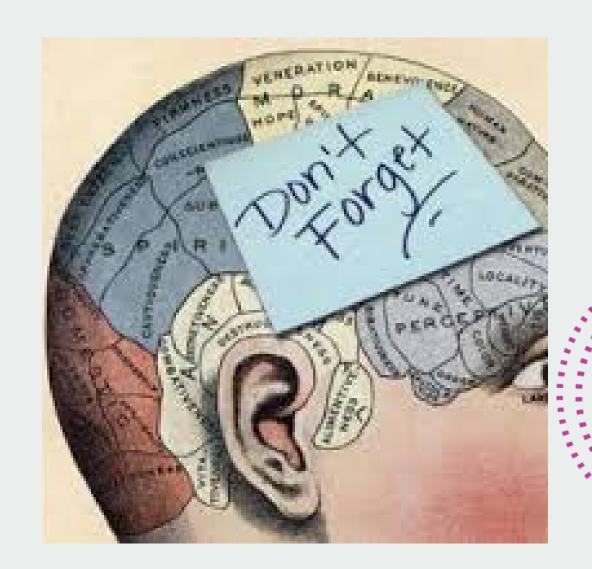
Executive functioning includes the ability to self-monitor, organize, plan, reason, and problem-solve





Memory

- Memory is the ability to encode, store, and retrieve information
- Memory can be broken down into three structural components: the sensory register, short-term store, and long-term store





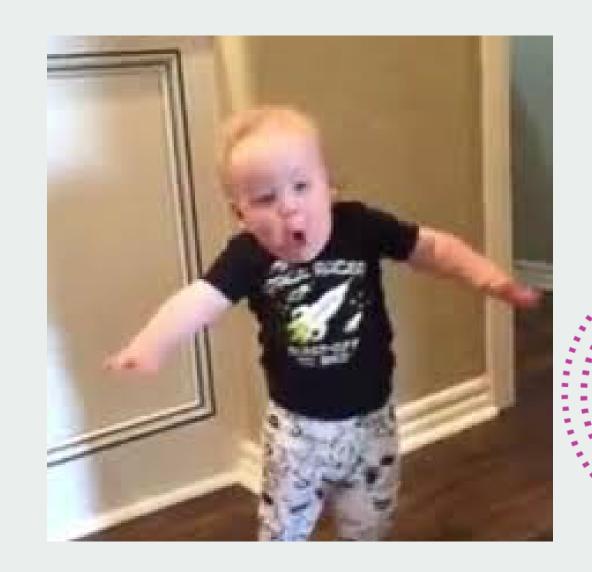
Language

Language is a system that consists of the development, acquisition, maintenance and use of complex systems of communication.



Perceptual Motor Function

Combination of sensory and motor skills which allows an individual to synchronize body movements (Lezak et al., 2012).





Social Cognition

Social cognition refers to the brain's processing of social information.

- Ability to determine others' emotions.
- How to respond to those emotions appropriately.



Now That We Have Cognition Background...







Just like many bodily functions and structures, there are changes that occur to the aging brain.

Aging results in the brain experiencing changes in size, vasculature, and cognition.

Loss of gray and white matter

Decrease in cortical density and neurotransmitter systems

General Changes to the Aging Brain

Brain changes do not occur similarly across all brain regions.

As the age of the person increased, the MRIs revealed a decrease in the volumes of the frontal lobes (0.55% per year) and the temporal lobes (0.28% per year) (Coffey et al., 1992).

Now, What May We See in Our Patients?



Normative Cognitive Changes





As we age, there are subtle cognitive changes that occur.

These small changes can have impacts on a person's quality of life and everyday function.

Normative Cognitive Changes

Executive Functioning

 Most aspects of EF will decline with age

Attention

 All subthemes notice a decline throughout the lifespan

Memory

- Memory is the most common cognitive complaint
- Decline noted but may remain stable until later stages of life

<u>Language</u>

- Abilities remain relatively intact throughout the lifespan.
- Vocabulary may improve or remain stable

Perceptual Motor

 Declines will be seen across all subthemes

Social Cognition

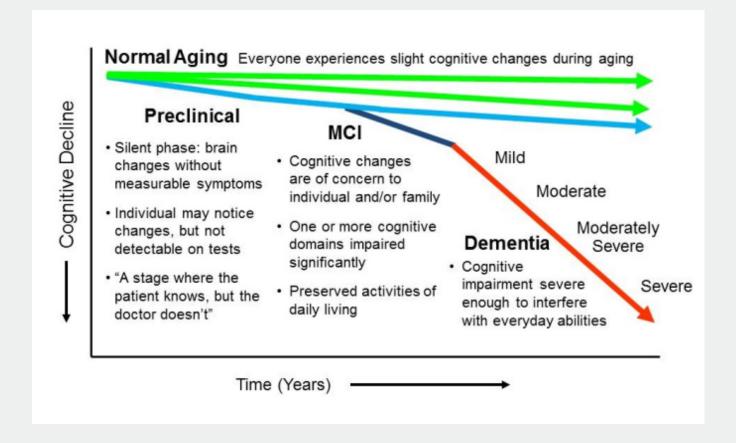
 Respond less accurately to false belief stories and were unable to determine intentions



Sadly, We Will Also See Non-Normative Changes



Non-Normative Changes



Hearing Loss and Cognition

Most research agrees that hearing loss has an impact on cognition.

Normative Cognitive Changes

Cognitive abilities, including memory and executive functions, decline with aging and are strongly involved in the speech communication process.

For many older listeners, cognitive decline and hearing loss is a critical factor in causing difficulty understanding speech, particularly in challenging environments (Salthouse, 1991; Frisina, 2009, Verhaeghen, 2011; Besser et al., 2013; Ronnberg et al., 2013).





Lower cognitive functions (Lin, 2011)



Higher rate of cognitive decline



All-cause dementia



Higher risk developing cognitive impairment compared to those without hearing loss.





Executive Functioning

- Overall EF declined
- Working memory declined

Attention

- Overall attention declined
- Processing speed declined

Memory

- Semantic memory declined
- Immediate recall declined
- Episodic memory

Language

 Fluency was not impacted

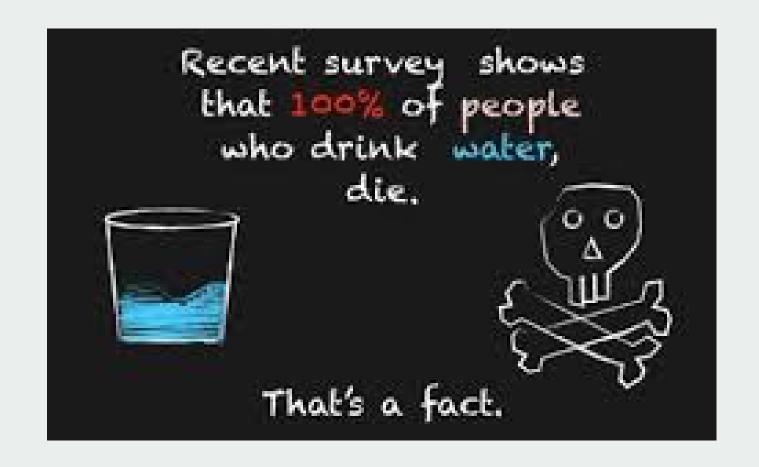
Perceptual Motor

 Visuospati al ability declined

<u>Social</u> Cognition

 Differences in social cognitive tasks.

But...CORRELATION DOES NOT MEAN CAUSATION



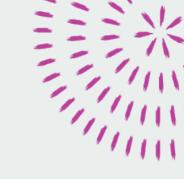
Three Main Possibilities to Explain the Relationship

Perhaps, there is a casual impact of hearing on cognition fx

OR, cognition does indeed impact hearing

OR, the two things are not directly related, but they share a common third factor

How to incorporate this into your own practice?





Cognitive Screeners



Montreal Cognitive Assessment (MoCA)

Mini-Mental State Exam (MMSE)

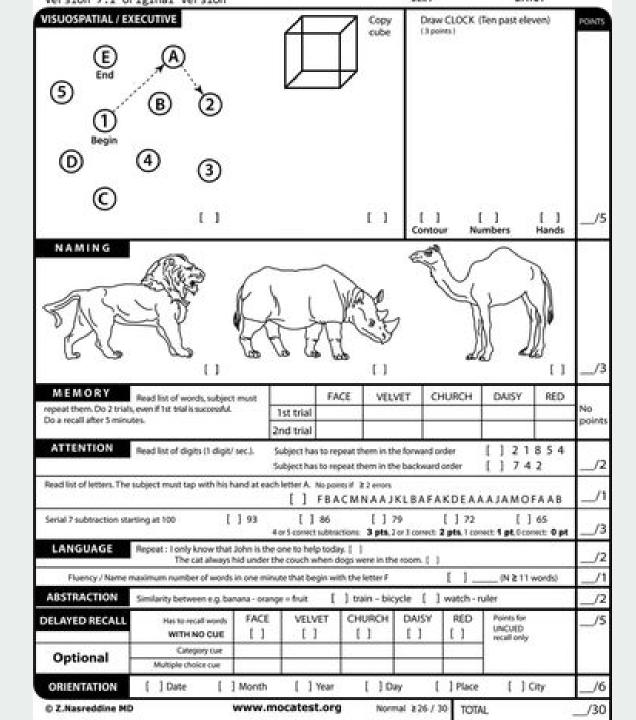
Mini-Cog

General Practitioner
Assessment of
Cognition (GPCOG)

St. Louis University
Mental Status Exam
(SLUMS)

Short Informant
Questionnaire on
Cognitive Decline in
the Elderly (Short
IQCODE)

MoCA





| Maximum | Score | |
|-----------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5 5 | () | Orientation What is the (year) (season) (date) (day) (month)? Where are we (state) (country) (town) (hospital) (floor)? |
| 3 | () | Registration Name 3 objects: 1 second to say each. Then ask the patient all 3 after you have said them. Give 1 point for each correct answer. Then repeat them until he/she learns all 3. Count trials and record. Trials |
| 5 | () | Attention and Calculation Serial 7's. 1 point for each correct answer. Stop after 5 answers. Alternatively spell "world" backward. |
| 3 | () | Recall Ask for the 3 objects repeated above. Give 1 point for each correct answer. |
| 2 1 3 1 1 | () () () () () | Language Name a pencil and watch. Repeat the following "No ifs, ands, or buts" Follow a 3-stage command: "Take a paper in your hand, fold it in half, and put it on the floor." Read and obey the following: CLOSE YOUR EYES Write a sentence. Copy the design shown. |
| | | Total Score |

MMSE

How Else to Help Your Patients





Compile a list of local health care providers who specialize in cognitive and memory disorders.

Based on screening results, discuss the need for a referral





While cognitive screening tests are clinical tools that have been used for years, they are receiving increased recognition from audiologists.

The demographic change is bringing in more older clients who are likely to have impaired hearing as well as cognition, audiologists should know more about abnormal cognitive changes with aging, their impact on communication, and the use of cognitive screening tests.



References

Alexopoulos G. (2005). Depression in the elderly. Lancet; 365(9475):1961-70.

Alzheimer's Disease International. World Alzheimer report. Alzheimer's Disease International, 2009. 15

American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5). Arlington, VA: American Psychiatric Publishing.

Anderson, John R. (2004) Cognitive psychology and its implications (6th ed.) Worth Publishers

Association between depression and mortality in older adults: the Cardiovascular Health Study.

Anderson C. A., Lazard D. S., Hartley D. E. (2016). Plasticity in bilateral superior temporal cortex: effects of deafness and cochlear implantation on auditory and visual speech processing. Hear. Res. 343, 138–149.

Anderton B. (2002) Ageing of the brain. Mech Ageing Dev; 123: 811–817

Atkinson, R.C.; Shiffrin, R.M. (1968). Chapter: Human memory: A proposed system and its control processes. The psychology of learning and motivation. Psychology of Learning and Motivation. 2: 89–195.

Baddeley, A. (1966). The influence of acoustic and semantic similarity on long-term memory for word sequences. The Quarterly Journal of Experimental Psychology. 18 (4): 302–309

Baddeley A. (2010). Working memory. Curr. Biol. 20, R136–R140

Bainbridge, K., Hoffman, H., Cowie, C. (2008). Diabetes and hearing impairment in the United States: Audiometric evidence from the National Health and Nutrition Examination Survey, 1999-2004. Ann Intern Med. July 2008;149(1):1-10.

Barnes C. (2003). Long-term potentiation and the ageing. Philos Trans Royal Soc Lond B Biol Sci; 358:765–772.

Bartoshuk L M. Taste. Robust across the age span? Ann N Y Acad Sci198956165-75

References

| iartzokis, G. et al. (2001). Age-related changes in frontal and temporal lobe volumes in men: a magnetic resonance imaging study. Arch. Gen. Psychiatry. 58, 461–465 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ieck, A., Steer, R., & Brown, G. (1996). Beck depression inventory-II. Pearson Clinical. |
| errios, G. (1982) Disorientation States in Psychiatry. Comprehensive Psychiatry 23: 479-491 |
| ottiroli, S., Cavallini, E., Ceccato, I., Vecchi, T., & Lecce, S. (2016). Theory of mind in aging: Comparing cognitive and affective components in the faux pas test. Archives of Gerontology and Geriatrics, 62, 152–162. |
| ioustani M, Peterson B, Hanson L. et al (2003). Screening for dementia in primary care: a summary of the evidence for the U.S. Preventive Services Task Force. Ann Intern Med 38927–937. |
| trayne C. (2007)The elephant in the room—healthy brains in later life, epidemiology and public health. Nat Rev Neurosci;8:233-9. |
| regman A. S. (1990). Auditory Scene Analysis: The Perceptual Organization of Sound. Cambridge, MA: Bradford Books; MIT Press. |
| turdon, P., Dipper, L., Cocks, N. (2016). Exploration of older and younger British adults' performance on the awareness of social inference test (TASIT). Int J Lang Commun Disord, 51, 5, 589-593 |
| iusse A, Hensel A, Gühne U, Angermeyer MC, Riedel-Heller SG. (2006). Mild cognitive impairment: long-term course of four clinical subtypes. Neurology 2006;67: 2176-85. |
| Callahan, C., Hui, S., Nienaber, N., Musick, B., Tierney. (1994). Longitudinal study of depression and health services use among elderly primary care patients. |
| Carlson, M., Hasher, L., Zacks, R., Connelly, S. (1995) Aging, distraction, and the benefits of predictable location. Psychology and aging;10:427–36. |
| center for Behavioral Health Statistics and Quality. (2017). 2016 National Survey on Drug Use and Health: Methodological summary and definitions. Rockville, MD: Substance Abuse and Mental Health Services Administration. |
| offey, C., Wilkinson, W., Parashos, I., et al. (1992). Quantitative cerebral anatomy of the aging human brain: a cross-sectional study using magnetic resonance imaging. Neurology;42:527-536 |
| Courchesne, E., Chisum, H., Townsend, J., Cowles, A., Covington, J., Egaas, B., Press, G. (2000). Normal Brain Development and Aging: Quantitative Analysis at in Vivo MR Imaging in Healthy Volunteers. Radiology., 216(3), 672-682. |
| cowell, P., Turetsky, B., Gur, R., Grossman, R., Shtasel, D., Gur, R. (1994). Sex differences in aging of the human frontal and temporal lobes. J Neurosci; 14: 4748-4755. |
| creed F, Morgan R, Fiddler M, Marshall S, Guthrie E, House A (2002) Depression and anxiety impair health-related quality of life and are associated with increased costs in general medical inpatients. Psychosomatics. 2002 Jul-Aug; 43(4):302- |

References

| iartzokis, G. et al. (2001). Age-related changes in frontal and temporal lobe volumes in men: a magnetic resonance imaging study. Arch. Gen. Psychiatry. 58, 461–465 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ieck, A., Steer, R., & Brown, G. (1996). Beck depression inventory-II. Pearson Clinical. |
| errios, G. (1982) Disorientation States in Psychiatry. Comprehensive Psychiatry 23: 479-491 |
| ottiroli, S., Cavallini, E., Ceccato, I., Vecchi, T., & Lecce, S. (2016). Theory of mind in aging: Comparing cognitive and affective components in the faux pas test. Archives of Gerontology and Geriatrics, 62, 152–162. |
| ioustani M, Peterson B, Hanson L. et al (2003). Screening for dementia in primary care: a summary of the evidence for the U.S. Preventive Services Task Force. Ann Intern Med 38927–937. |
| trayne C. (2007)The elephant in the room—healthy brains in later life, epidemiology and public health. Nat Rev Neurosci;8:233-9. |
| regman A. S. (1990). Auditory Scene Analysis: The Perceptual Organization of Sound. Cambridge, MA: Bradford Books; MIT Press. |
| turdon, P., Dipper, L., Cocks, N. (2016). Exploration of older and younger British adults' performance on the awareness of social inference test (TASIT). Int J Lang Commun Disord, 51, 5, 589-593 |
| iusse A, Hensel A, Gühne U, Angermeyer MC, Riedel-Heller SG. (2006). Mild cognitive impairment: long-term course of four clinical subtypes. Neurology 2006;67: 2176-85. |
| Callahan, C., Hui, S., Nienaber, N., Musick, B., Tierney. (1994). Longitudinal study of depression and health services use among elderly primary care patients. |
| Carlson, M., Hasher, L., Zacks, R., Connelly, S. (1995) Aging, distraction, and the benefits of predictable location. Psychology and aging;10:427–36. |
| center for Behavioral Health Statistics and Quality. (2017). 2016 National Survey on Drug Use and Health: Methodological summary and definitions. Rockville, MD: Substance Abuse and Mental Health Services Administration. |
| offey, C., Wilkinson, W., Parashos, I., et al. (1992). Quantitative cerebral anatomy of the aging human brain: a cross-sectional study using magnetic resonance imaging. Neurology;42:527-536 |
| Courchesne, E., Chisum, H., Townsend, J., Cowles, A., Covington, J., Egaas, B., Press, G. (2000). Normal Brain Development and Aging: Quantitative Analysis at in Vivo MR Imaging in Healthy Volunteers. Radiology., 216(3), 672-682. |
| cowell, P., Turetsky, B., Gur, R., Grossman, R., Shtasel, D., Gur, R. (1994). Sex differences in aging of the human frontal and temporal lobes. J Neurosci; 14: 4748-4755. |
| creed F, Morgan R, Fiddler M, Marshall S, Guthrie E, House A (2002) Depression and anxiety impair health-related quality of life and are associated with increased costs in general medical inpatients. Psychosomatics. 2002 Jul-Aug; 43(4):302- |