

Hearing loss associated with hospitalization, poorer self-reported health

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The authors found that compared with individuals with normal hearing, individuals with hearing loss were more likely to have a positive history for cardiovascular risk factors, have a history of hospitalization in the past year, and have more hospitalizations.

"Hearing loss (HL) is a <u>chronic condition</u> that affects nearly 2 of every 3 adults aged 70 years or older in the United States. Hearing loss has broader implications for older adults, being independently associated with poorer cognitive and physical functioning. The association of HL with other health <u>economic outcomes</u>, such as health care use, is unstudied," writes Dane J. Genther, M.D., of Johns Hopkins University School of Medicine, Baltimore, and colleagues, in a Research Letter. The authors investigated the association of HL with hospitalization and burden of disease in a nationally representative study of adults 70 years of age or older.

The researchers analyzed combined data from the 2005-2006 and 2009-2010 cycles of the National Health and <u>Nutrition Examination</u> <u>Survey</u> (NHANES), an ongoing epidemiological study designed to assess the health and functional status of the civilian, noninstitutionalized U.S. population. Air-conduction pure-tone audiometry was administered to all individuals aged 70 years or older, according to established NHANES protocols. Hearing was defined using <u>World Health Organization</u> criteria. Data on hospitalizations (during the previous 12 months) and on burden of disease (during the previous 30 days) were gathered through computer-assisted or interviewer-administered questionnaires.



The authors found that compared with individuals with normal hearing (n=529), individuals with HL (n=1,140) were more likely to have a positive history for <u>cardiovascular risk factors</u>, have a history of hospitalization in the past year (18.7 percent vs. 23.8 percent), and have more hospitalizations (1.27 vs. 1.52). "Fully adjusted models accounting for demographic and cardiovascular risk factors demonstrated that HL (per 25 dB) was significantly associated with any hospitalization, number of hospitalizations, more than 10 days of self-reported poor physical health, and more than 10 days of self-reported poor mental health," the researchers write.

"Additional research is needed to investigate the basis of these observed associations and whether hearing rehabilitative therapies could help reduce hospitalizations and improve self-reported health in <u>older adults</u> with HL."

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