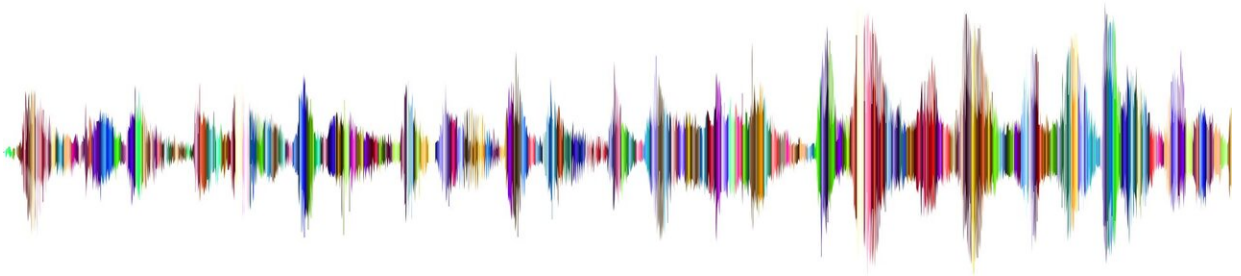


# North-south divide, not age, linked to hearing loss

December 17 2020, by Mike Addelman

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An increase of over 10% in the prevalence of hearing loss in the English over 50s may not be age-related, a new study by University of Manchester researchers has shown.

Instead the study, published in *BMC Geriatrics*, found hearing loss could be linked to social and lifestyle differences in the north and south of the country.

The 74,699 people with hearing loss interviewed in eight waves of the English Longitudinal Study of Aging from 2002–2017, analyzed by the team had similar age profiles over time.

The number of people with hearing loss increased by 10% over 15 years, however, the mean age of the people analyzed stayed the same.

However, over the same period, the samples had markedly different hearing outcomes in terms of where respondents lived. Deprivation and alcohol misuse related to hearing loss were much more prevalent in the north, suggesting a possible hearing north south divide.

Dalia Tsimpida, who led the study, said a socio spatial approach is crucial for planning sustainable models of hearing care based on actual need, and for reducing hearing health inequalities.

Local estimates of hearing loss prevalence in England are currently based on projected population age demographics and audiological data solely collected from Nottingham and Southampton in the 1980s.

However the study is the first to investigate geographical patterns and trends of hearing loss based on a representative cohort of older adults and not through population age projections.

Ms Tsimpida, Research Associate in the Centre for Primary Care and Health Services Research said: "Hearing loss has been labeled as something which is more likely to affect the elderly. However, this study shows for the first time that the increasing trend in hearing loss prevalence is not related to the aging of the population, as widely believed, but potentially to social and lifestyle changes.

"We don't know why that might be—and this study does not and cannot imply a biological causality.

"But nevertheless, this is a [significant milestone](#) in hearing research and a breakthrough that gives us considerable insight into what is actually happening.

"The survey is representative of the English older population; the findings provide a good representation for England as a whole."

Ms Tsimpida's study is co-authored by her supervisors Dr. Maria Panagioti, Professor Evangelos Kontopantelis and Professor Darren Ashcroft.

The Research Associate in the Centre for Primary Care and Health Services Research added: "These findings have important implications for health policy and planning for health services in England based on actual needs and not on the age of the populations through projections.

"People need to receive the full range of quality healthcare services that meet their needs; the current focus on age profiles alone is not suitable for planning sustainable models of hearing care.

"The Clinical Commissioning Groups (CCGs) who are currently responsible for the NHS audiology services in England should take into consideration socioeconomic factors and modifiable lifestyle behaviors for hearing loss, along with their spatial patterning in England.

"More informed modeling may have influenced North Staffordshire CCG's 2015 decision to cease the free provision of hearing aids for people with mild or moderate hearing loss: an area where [hearing](#) loss burden is now one of the greatest in England."

**More information:** Dialehti Tsimpida et al. Regional patterns and trends of hearing loss in England: evidence from the English longitudinal study of ageing (ELSA) and implications for health policy, *BMC*

*Geriatrics* (2020). [DOI: 10.1186/s12877-020-01945-6](https://doi.org/10.1186/s12877-020-01945-6)

Provided by University of Manchester

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