

# Using hearX<sup>®</sup> in Add Health Wave VI

**Allison E. Aiello, PhD**

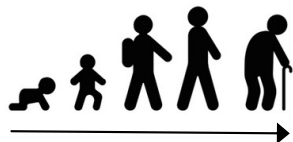
James S. Jackson Healthy Longevity Professor of Epidemiology  
National Longitudinal Study of Adolescent to Adult Health Wave VI, Deputy Director  
Columbia Aging Center, interim Director

# A Team Project

- **MPI:** Robert Hummer, Director
- **Team:** Cherese Parker, Tim Monbureau, Rebecca Stebbins, Mary Jane Hill, Farizah Rob, Aanya Bahl, Kamaryn Tanner, Maya Krishnamoorthy, Jasmine Lo, Devdatt Golwala, Youngjoon Bae, Chantel Martin, and Denis Leang
- **Consultants:** Jennifer Manly, David Bennett, Brenda Plassman, John Batsis, **Nicholas Reed,** and **Clarice Myers**
- **NIH Program Official and Project Scientist:** Amelia Karraker and Emily Hooker



# Add Health: An Innovative Study of Life-course, Health, and Aging among Americans



**Prospective, Longitudinal Design of Individuals in Grades 7-12 Clustered in 132 Schools, 1994-95**



**Intergenerational Insight (including linked parent data)**



**Nationally Representative Cohort (N=20,745)**



**Innovative Sampling Design, Biosocial and in-depth health measures**



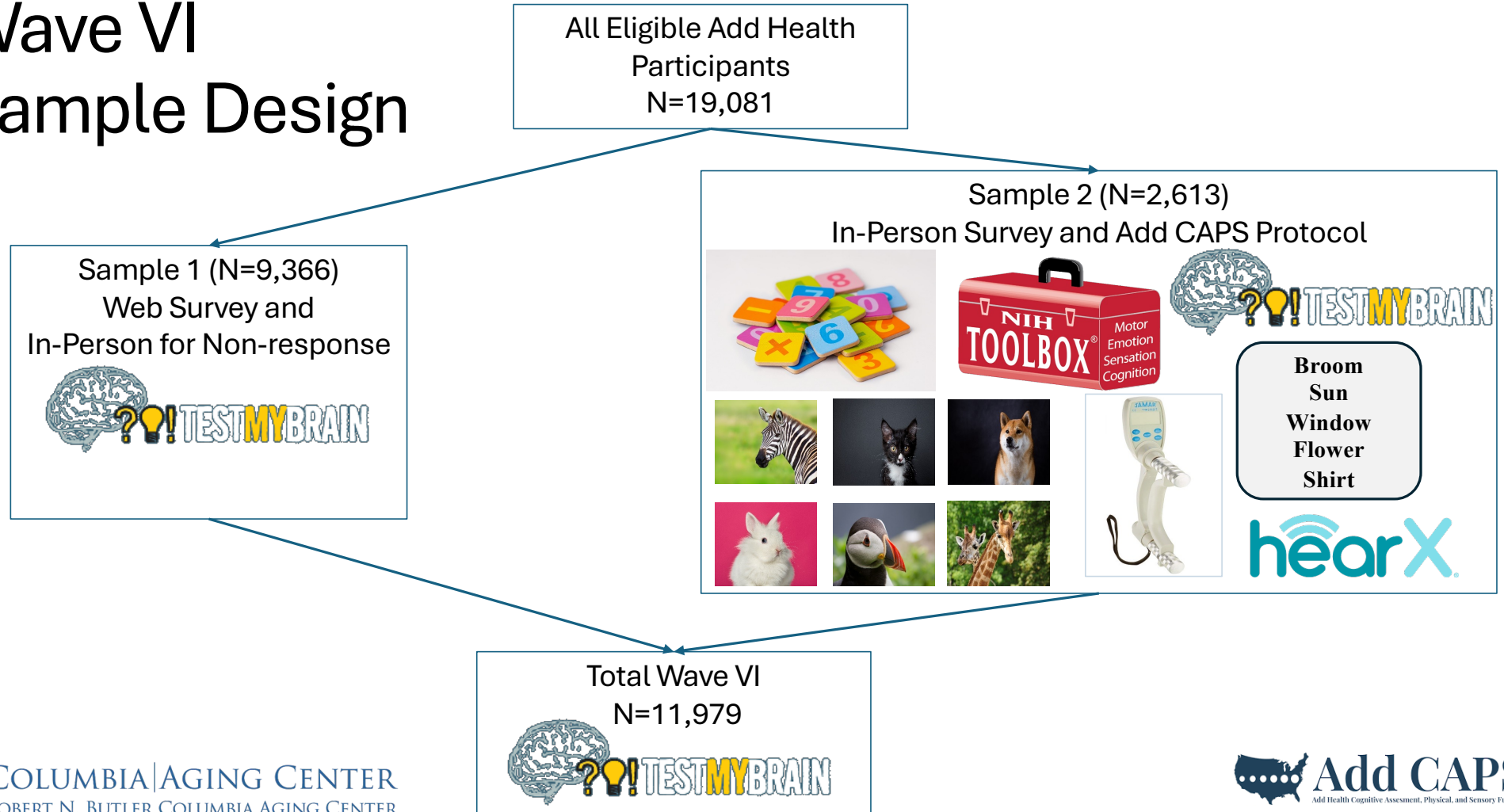
**Multilevel Data Collection**



**New: Cutting Edge Multimode Early Midlife Cognitive, Physical, and Sensory Function**

\*Wave VI ages 39 to 51 years, with an average age of 44 years

# Wave VI Sample Design



# Planning for Audiology Research in Add Health

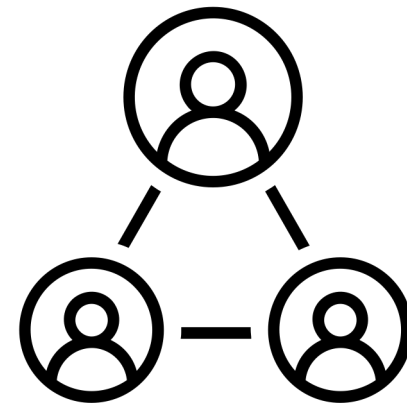
- Contracts in place for hearX
- Audiology consultants were key
  - Protocol development, staff training, and implementation
  - Data QC program development and implementation to detect implausible audiometric results
- Special thank you to Nick Reed and Clarice Myers for serving as the Add Health Wave VI Audiology consultants



Source: OpenAI. *ChatGPT*, version GPT-5, OpenAI, 2025, <https://chat.openai.com/>

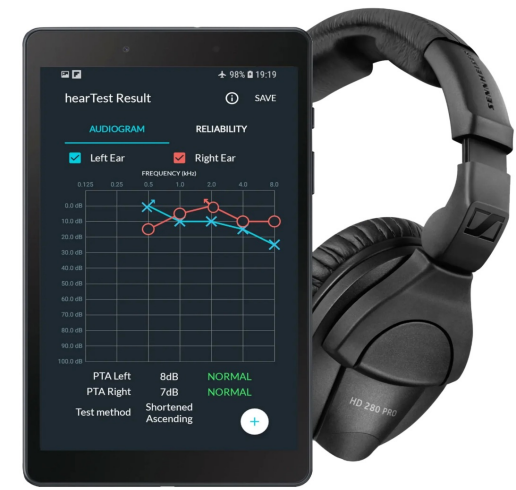
# Participant Eligibility for Hearing Assessment

- Participants were eligible to participate if they met the following criteria:
  - ✓ Sample 2 interview completed in-person
  - ✓ No current ear infection
  - ✓ No current ear pain
  - ✓ No use of hearing aid(s)
  - ✓ No use of cochlear implant(s)





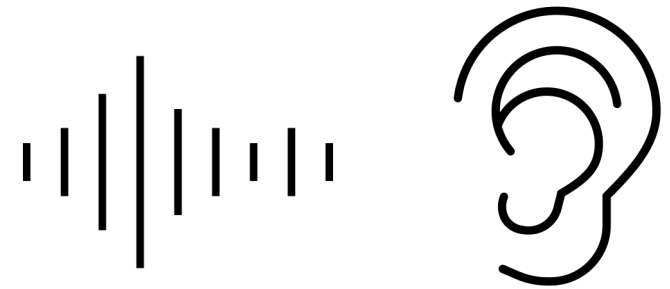
- hearTest via a portable Android-based audiometer (hearX®, USA Inc., Boston, MA)
- hearTest results produced a Pure Tone Average (PTA) for each ear
- Only works with Android device supplied directly from hearX
  - limited options for adding other programs



Source: hearX® – hearTest product page  
<https://hearxgroup.com/products/hearTest>

# Audio Testing Range in Add Health

- Full frequency range of 125 – 8,000 Hz available. The following frequencies were used in our study
  - 500 Hz
  - 1000 Hz
  - 2000 Hz
  - 4000 Hz
  - 8000 Hz
  
- Five Saves Time!



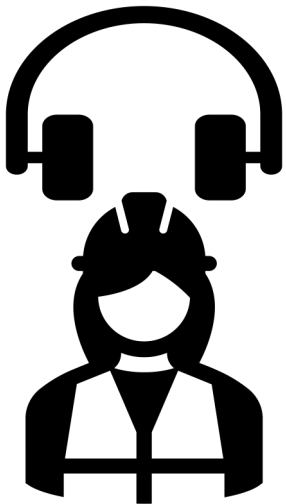
# Add Health Participant Perspectives



This is neat! How's my hearing?



Why is the interviewer standing behind me?



Should I take my hat off?



What are the sources of noise in my house?

# High Response Rates for hearTest Assessment

Group	N	%
Total Participants in Sample 2	2,613	-
Eligible for Hearing Test	2,476	94.8%
Completed	2,439	98.5%

# Equipment Considerations



Annual headphone calibration is required



Handles on the hearX® case broke easily

# Interviewer Input and Duration Recorded

Issue	Number	Percentage (HearX Eligible, N = 2476)
Administration or Instruction	19	0.77%
Technical Issues	17	0.69%
Interruption	4	0.16%
Fatigue or Low Effort	1	0.04%
Pain or Physical Impairment	3	0.12%

- Duration: 3 mins 30 seconds on average for hearX

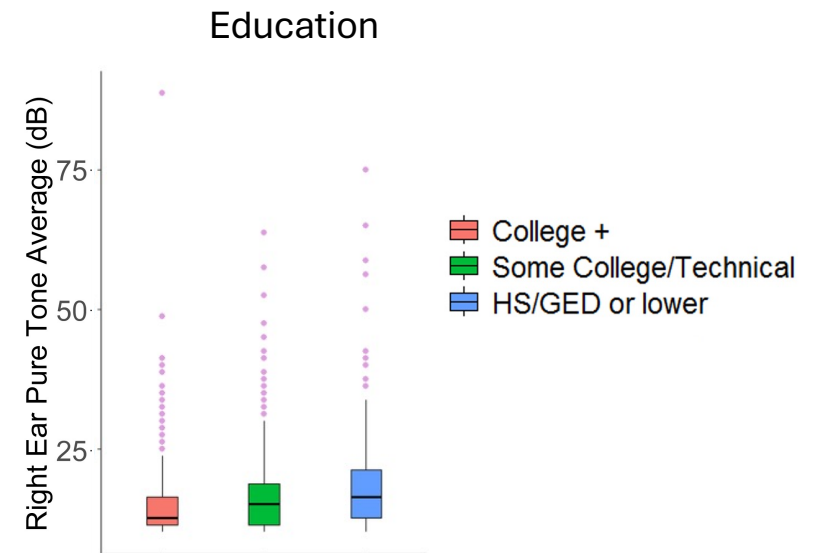
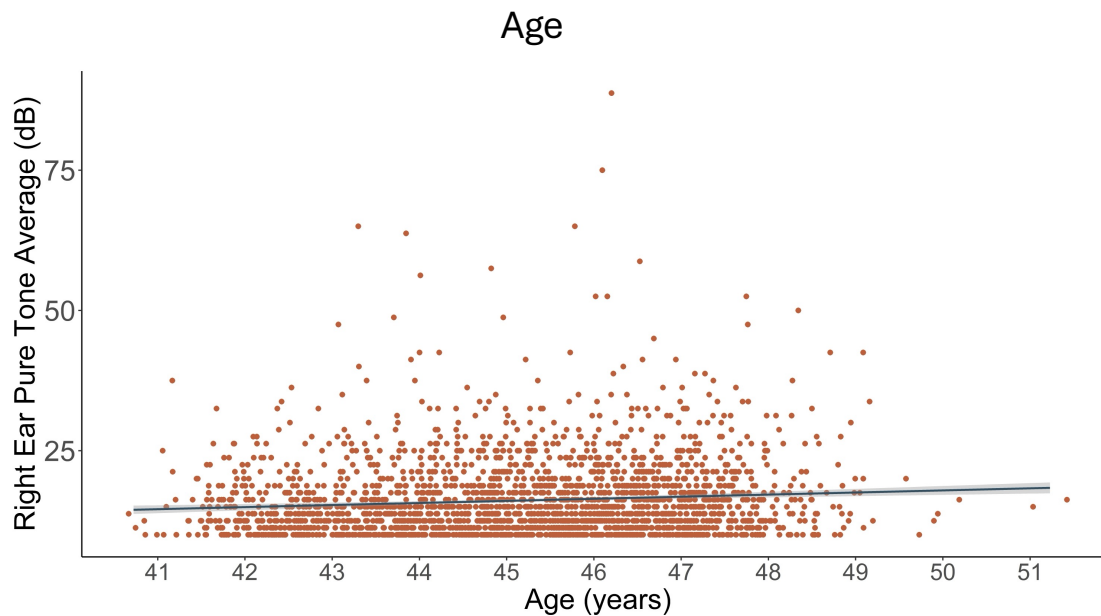
# Platform Flags are Common in the Field

- Noise flags generated from the platform are common at the lowest frequency, but expected in a dynamic setting

Frequency	Left Ear	Right Ear
500 Hz	1180 (48 %)	1217 (50 %)
1000 Hz	505 (21 %)	499 (20 %)
2000 Hz	9 (0.4%)	14 (0.5%)
4000 Hz	12 (0.5%)	15 (0.6%)
8000 Hz	59 (2.4%)	60 (2.4%)

# Hearing Scores by Age and Education, Add Health

(N=2,439)



➤ Correlated positively with self-reported hearing scale ( $r=0.25$ ,  $p < 0.0001$ )

# Summary

- hearTest was a well-accepted assessment in Add Health
  - Excellent response rates
  - Few concerns
- Training interviewers to use hearTest was straightforward
  - Minor issues included case breaking and noise in households
- The data fall within the expected ranges and correlations

# Acknowledgements

Wave VI of Add Health is supported by two cooperative agreements from the National Institute on Aging (1U01AG071448, principal investigator Robert A. Hummer, and (1U01AG071450, principal investigators Allison E. Aiello and Robert A. Hummer) to the University of North Carolina (UNC) at Chapel Hill. Co-funding for Wave VI was provided by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), the National Institute on Minority Health and Health Disparities, the National Institute on Drug Abuse, the NIH Office of Behavioral and Social Science Research, and the NIH Office of Disease Prevention. Waves I-V of Add Health are from the Add Health Program Project, grant P01 HD31921 (Kathleen Mullan Harris) from NICHD, with cooperative funding from 23 other federal agencies and foundations. Add Health was originally designed by J. Richard Udry, Peter S. Bearman, and Kathleen Mullan Harris at UNC. Add Health is currently directed by Robert A. Hummer; it was previously directed by Kathleen Mullan Harris (2004-2021) and J. Richard Udry (1994-2004). For more information: (<http://addhealth.cpc.unc.edu>).

# Thank you and Questions