



# Hearing Systems – Part 2 of 3

<https://hearingsystems.github.io/>

TU Ilmenau – Audio Signal Processing & Audio Systems

---

January 24, 2023

Dr.-Ing. Tamas Harczos

## •• Introduction

- audifon:
  - audifon GmbH & Co. KG develops, produces and sells hearing systems
  - Headquarter located in Kölleda, Thüringen (also place of production)
  - R&D offices in Köln and Ilmenau (System / Embedded SW Engineering)
  - About 240 employees
- myself:
  - First home computer generation (1980s)
  - Programming as an early hobby  
(Basic → Pascal → C/C++)
  - Interested in audio and audio signal processing
  - M.Sc. in Information Technology (Veszprém, Hungary)  
Ph.D. in Biomedical Technology (Ilmenau)



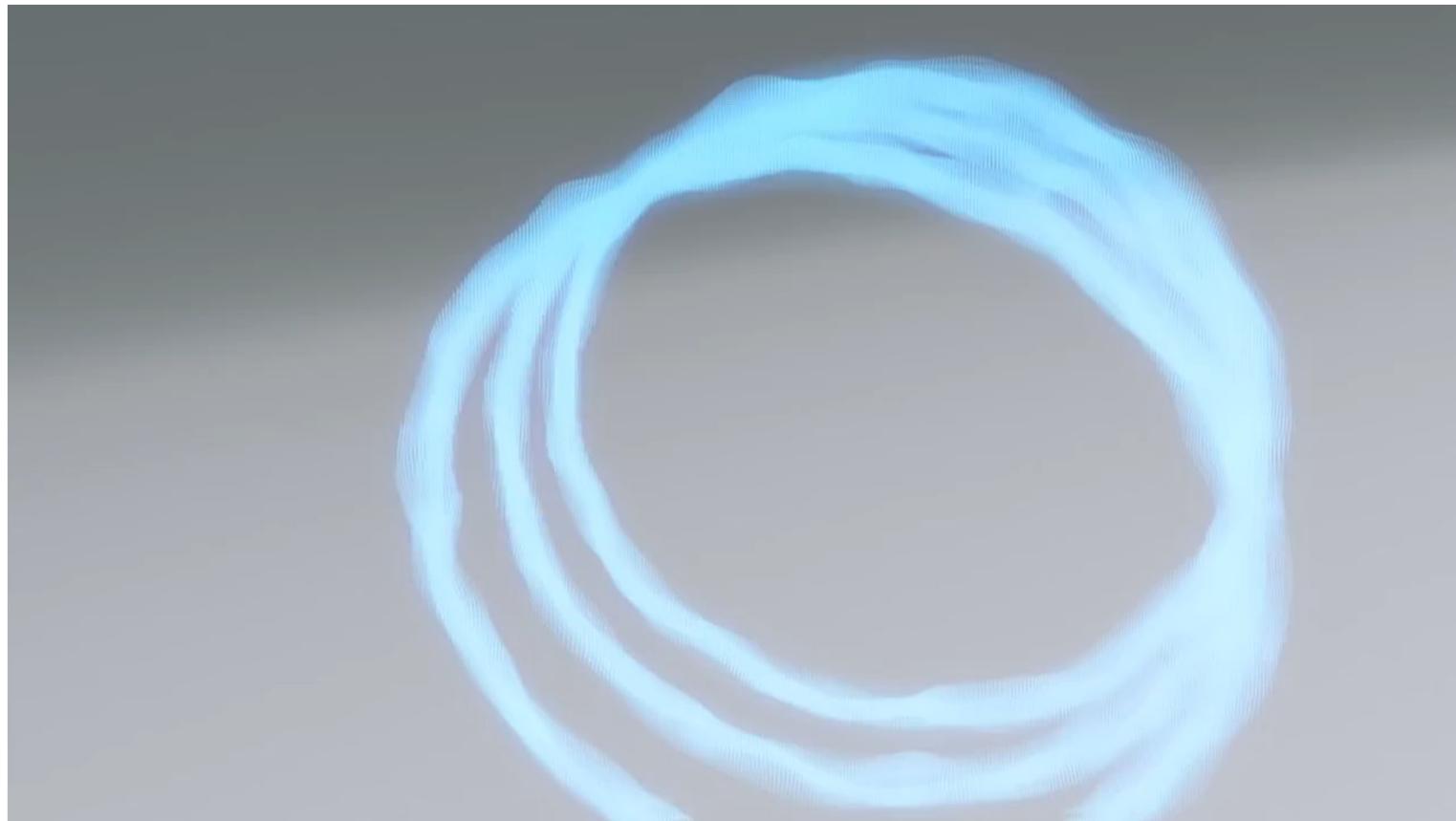
## •• Introduction

- Reminder:
  - Three lectures and one seminar.
  - Useful links:
    - <https://hearingsystems.github.io/> (presentation slides and recordings),
    - <https://moodle2.tu-ilmenau.de/course/view.php?id=1373>.
- Topics we will cover today:
  - *Recap of the basics:* units, human hearing, tonotopy.
  - A few more words on inner and outer hair cells and equal loudness contours.
  - Properties and characterization of hearing impairment: pure tone audiogram and speech in noise tests.
  - *Hearing aids:* early history, modern day form factors, features and requirements.

## •• Recap of the basics: scales and units

- Decibel (**dB**) alone is not a unit, it's a scale. It describes a relationship between two levels.
- The unit **dB FS** (Decibel full scale) relates to the maximum output of the given system.
  - 0 dB FS means maximum signal amplitude for a given system.
  - 1/100, 1/10, 1/2 of maximum amplitude: -40 dB FS, -20 dB FS, ca. -6 dB FS, respectively.
  - Conversion:  $dB = 20 \log_{10}(mag) \leftrightarrow mag = 10^{(dB/20)}$ .
  - A dB FS value does not necessarily relate to the loudness of a signal.
- The root mean square (RMS) of a signal is related to the energy residing in it.
  - The RMS of a recorded audio signal correlates to its sound pressure level.
- The unit **dB SPL** relates to the reference sound pressure  $p_0 = 20 \mu\text{Pa}$  in air.
  - $20 \mu\text{Pa}$  is often considered as the threshold of human hearing.
  - Distance (source to receiver) is important, 1 m is frequently used as standard distance for dB SPL measurements.
  - Doubling the distance reduces the SPL by about 6 dB (in free field).

- Recap of the basics: human hearing

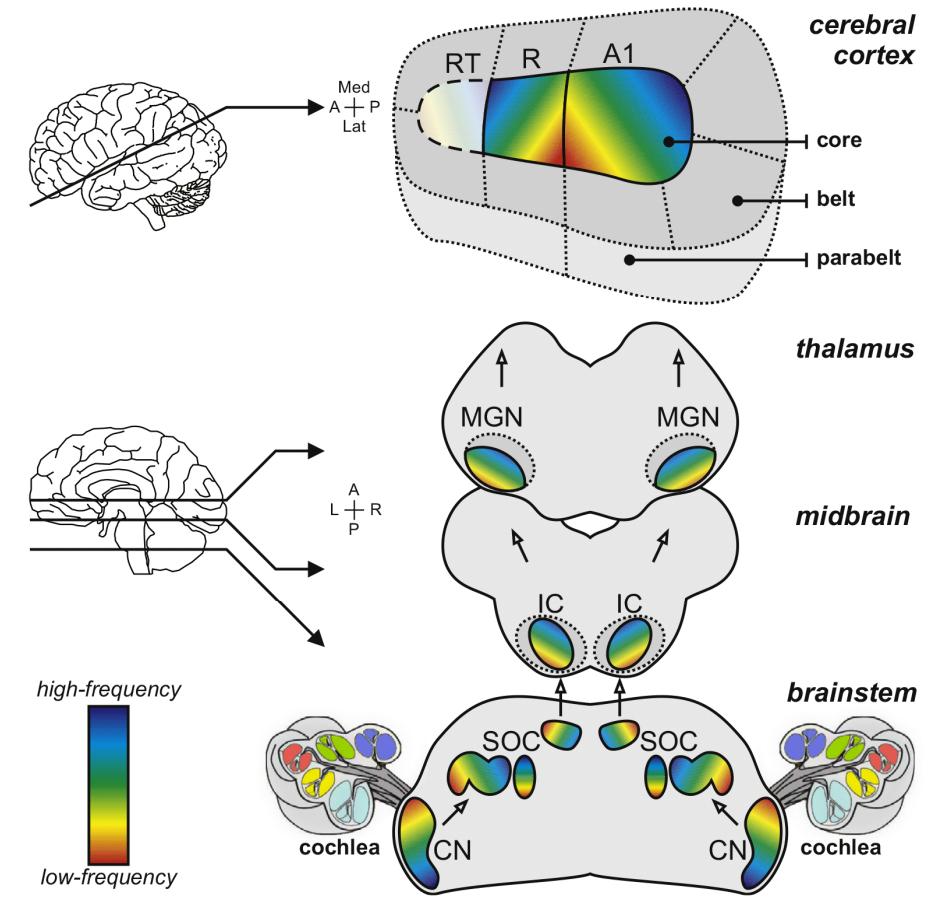


## •• Recap of the basics: tonotopy



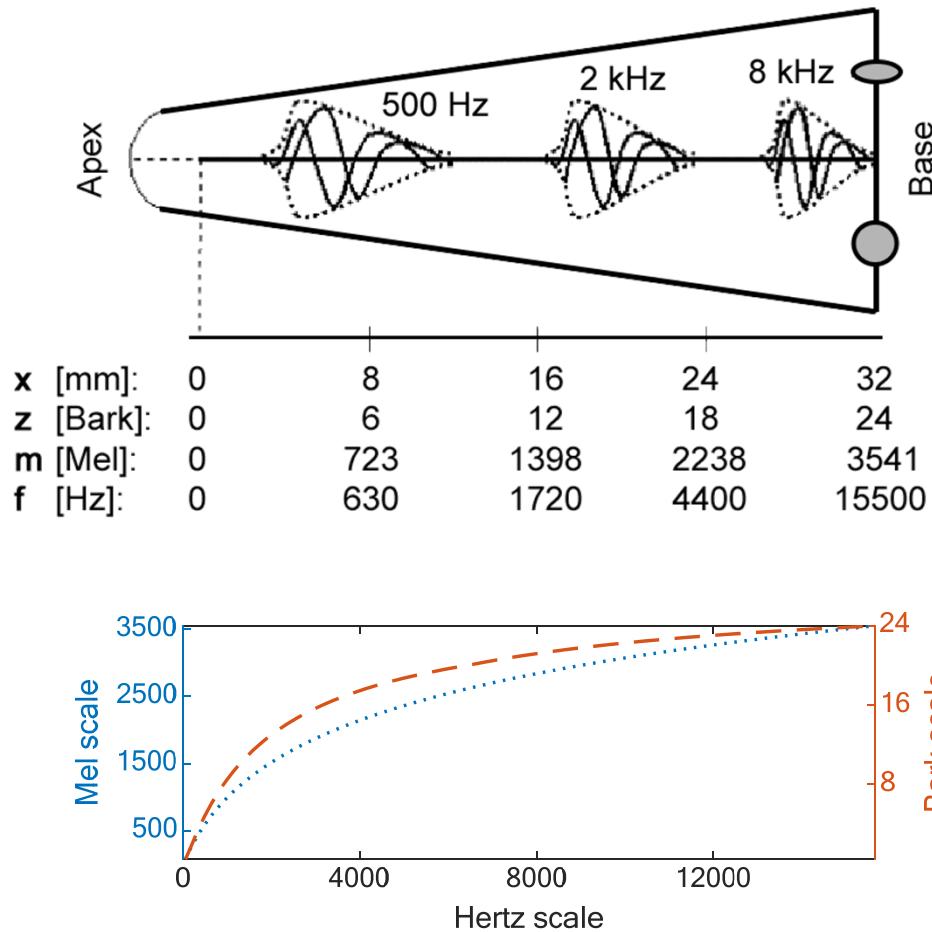
Source: [HHMI, 2000](#).

**Tonotopy** is the spatial arrangement of where sounds of different frequencies are processed in the auditory nervous system.



Source: [Saenz & Langers, 2014](#).

## •• A few more words on tonotopy



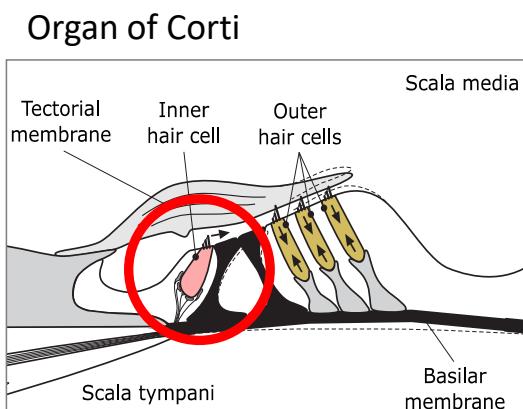
### Frequency scale of the ear :

- The human basilar membrane (BM) is approx. 32-35 mm long. Along the BM ca. 3500 IHCs and 12000 OHCs are distributed.
- Regardless of whether we take Bark or Mel scale, it is important to remember that place pitch is not distributed linearly along the cochlea;
  - $210 \pm 10$  Hz ( $\Delta = 0.2$  Bark): good discrimination, but
  - $4410 \pm 10$  Hz ( $\Delta = 0.03$  Bark): bad discrimination.

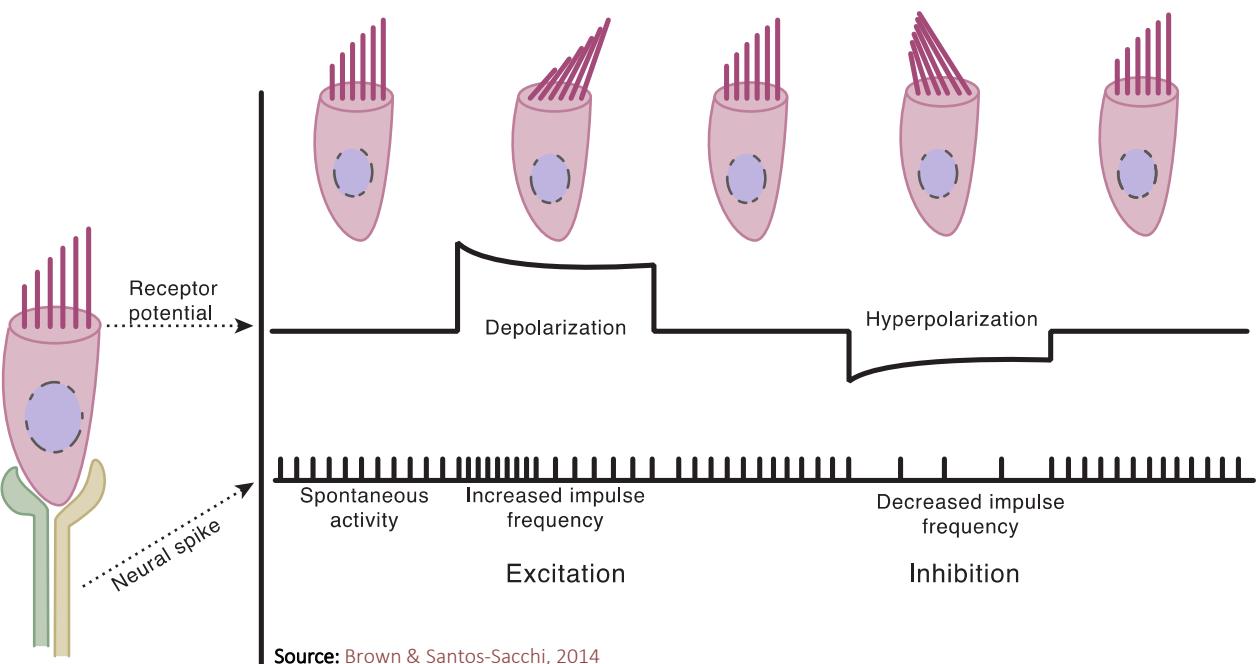


- Pitch difference of 1 Bark roughly equals to 1.3 mm on the BM; you only have around 150 IHCs along that cochlear section.

## •• How hearing works: Inner hair cells



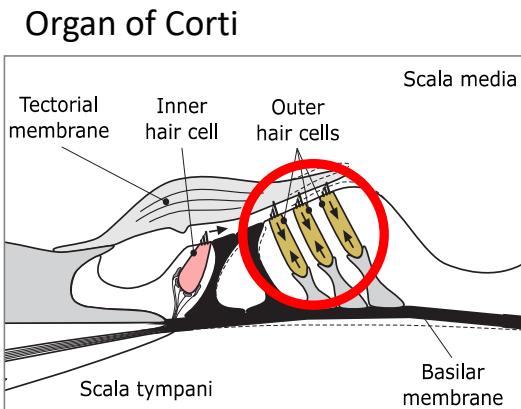
Adapted from: [Baumgarte, 2000](#)



### Inner hair cells:

- do mechanoelectrical transduction (converting motion to electricity);
- are the sensory cells in our auditory system.

## •• How hearing works: Outer hair cells



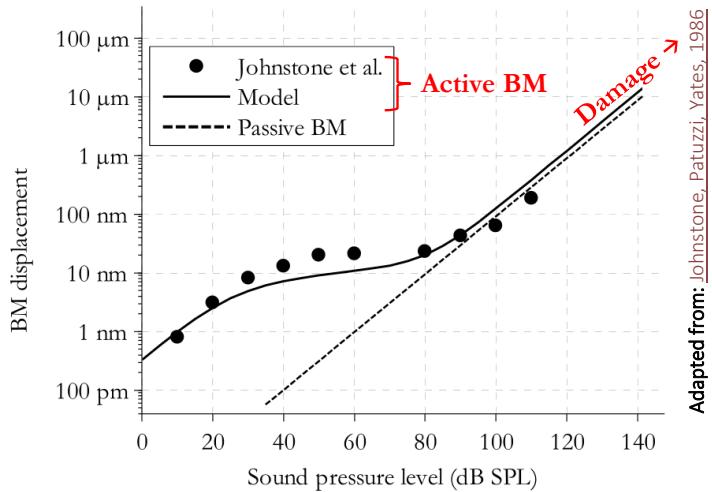
Adapted from: [Baumgarte, 2000](#)

OHC motility



Source: [J. Ashmore for BBC 'Ear we go', 1987](#)

BM nonlinearity



Adapted from: [Johnstone, Patuzzi, Yates, 1986](#)

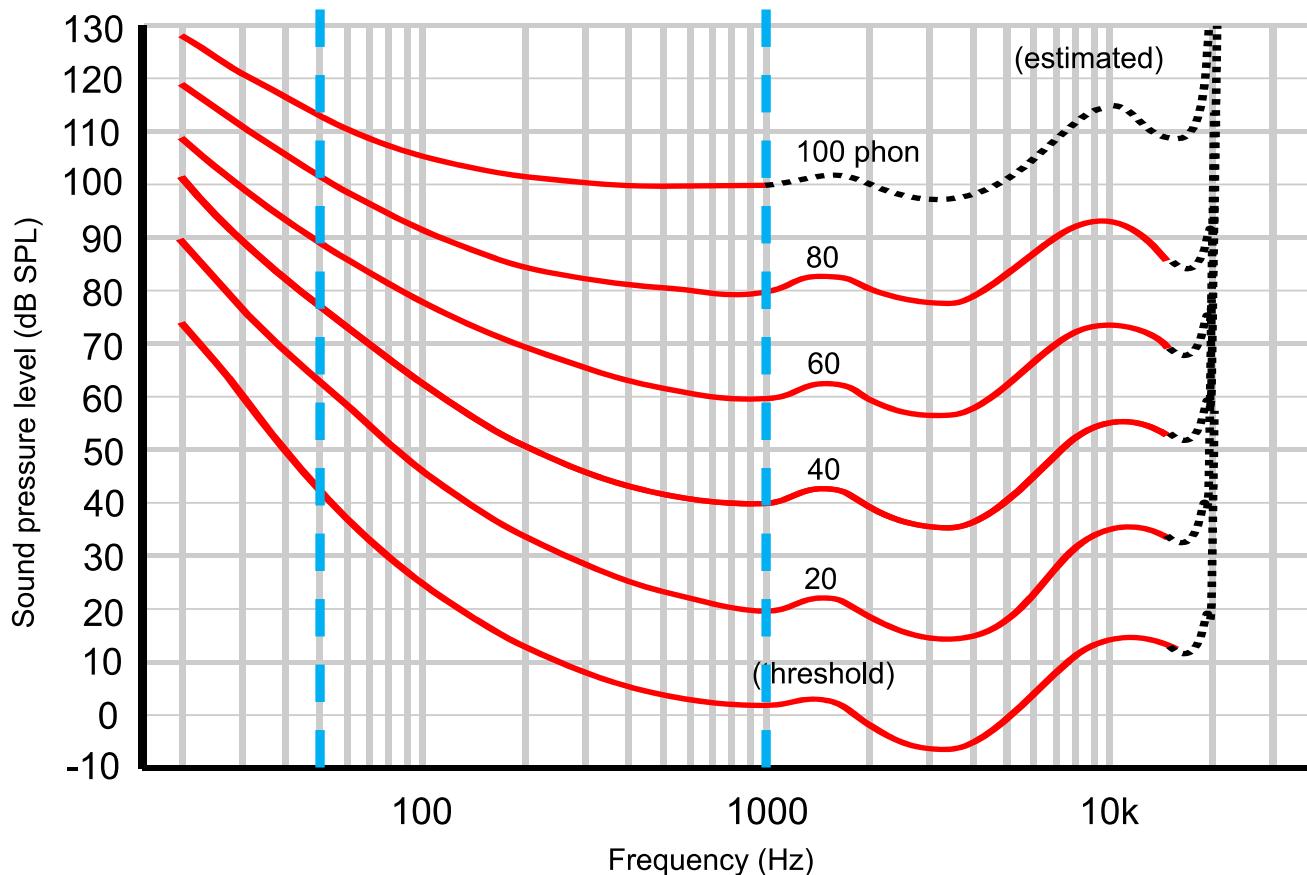
### Outer hair cells (OHCs):

- actively amplify/dampen the movement of the basilar membrane (BM), thus increase the loudness range (dynamic range) of the ear;
- increase frequency selectivity at the basilar membrane;
- protect inner hair cells by stiffening upon loud signals (until damaged).



Békésy György, 1899-1972  
Biophysicist  
Nobel-prize 1961 awardee

## •• Equal-loudness contours

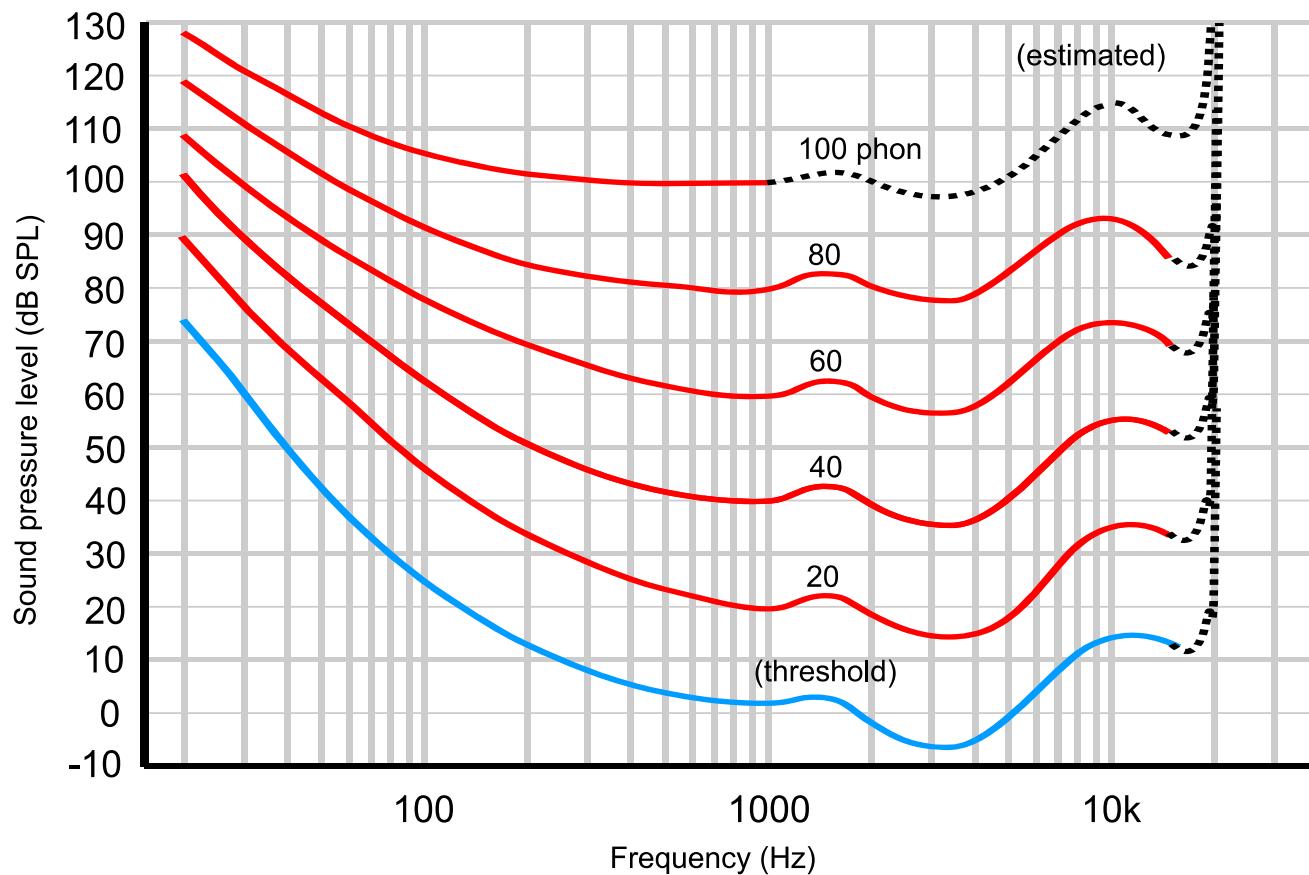


- 1933: Fletcher & Munson (*JASA*)
- 1956: Robinson & Dadson (*BJAP*)
- 2003: Multisite study, averaged over many normal hearing (NH) listeners → ISO 226:2003
- At 1000 Hz: dB SPL ≈ loudness.
- At other frequencies, e.g. at 50 Hz (mainly at higher levels) not.

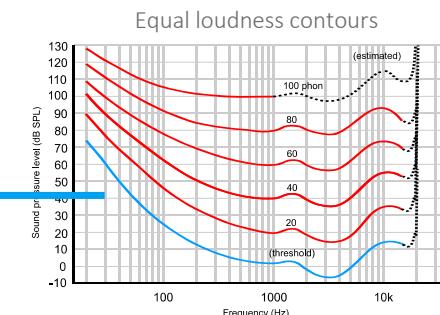
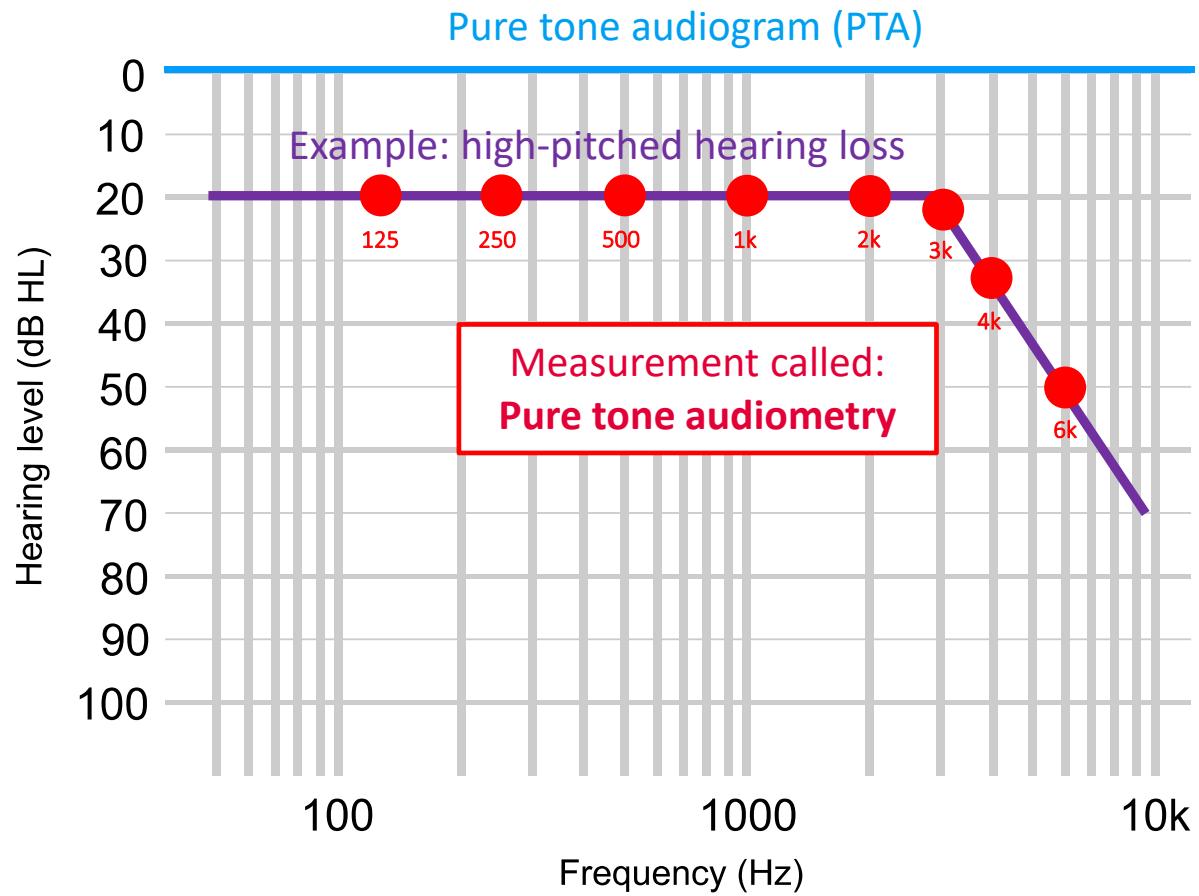
Loudness perception is  
**frequency dependent**  
and **non-linear**.

## •• Scales and units in audio signal processing: dB HL

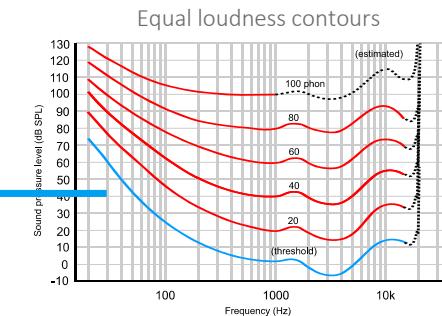
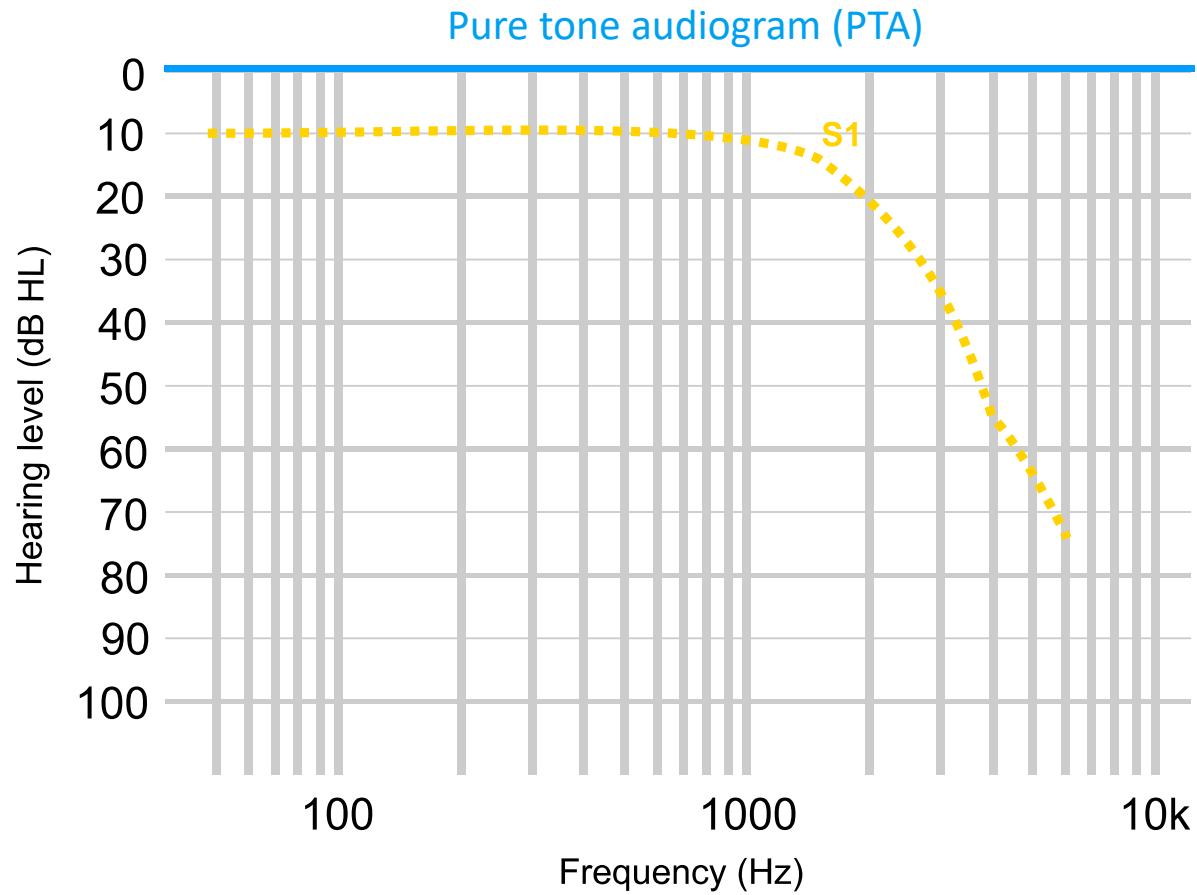
Equal loudness contours



## •• Scales and units in audio signal processing: dB HL



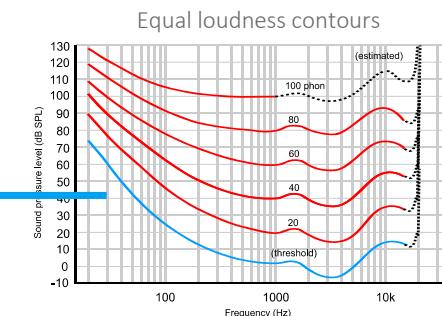
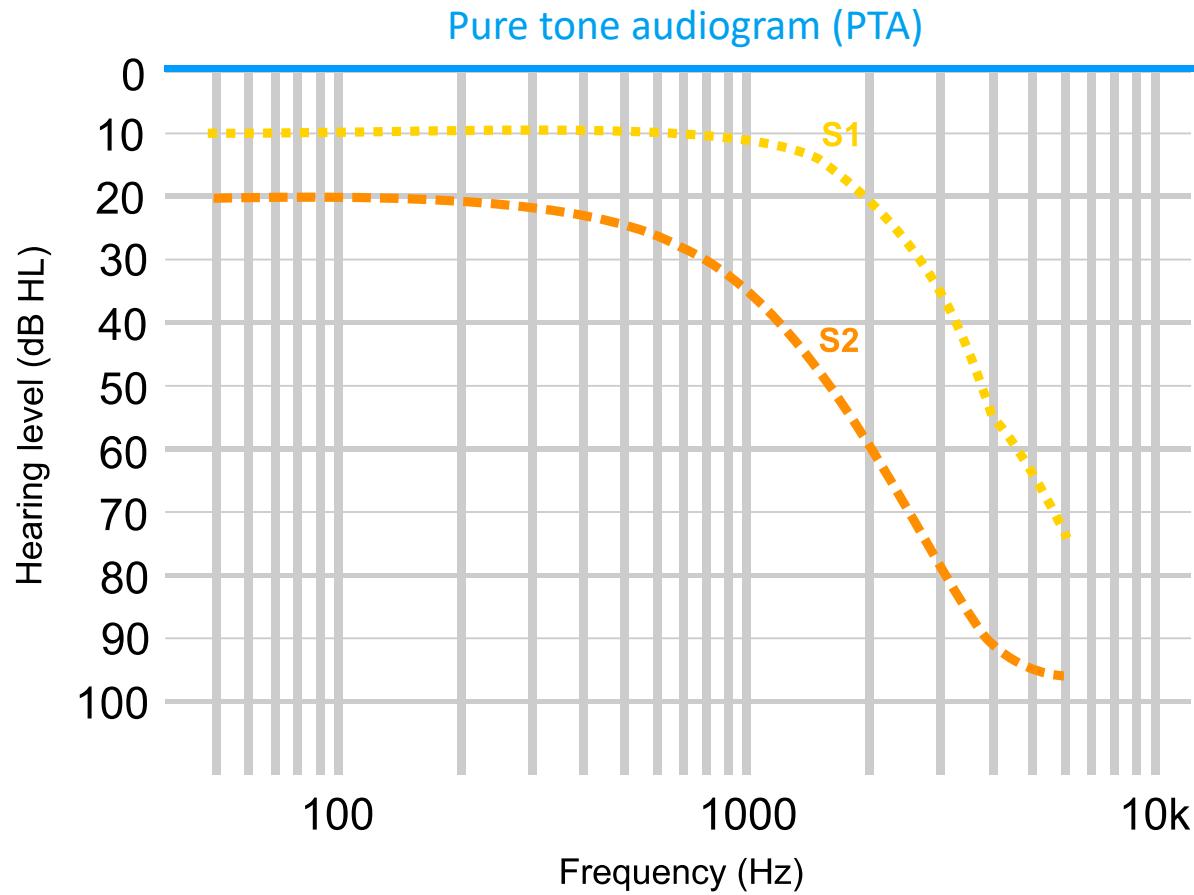
## •• Scales and units in audio signal processing: dB HL



Bisgaard standard audiograms:

- S1: very mild (*degree of hearing loss*)

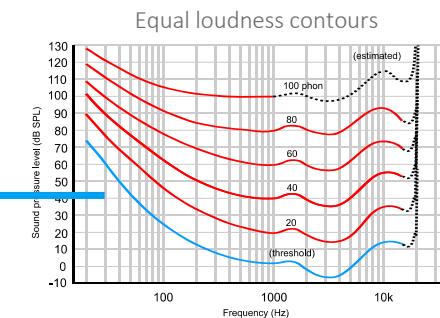
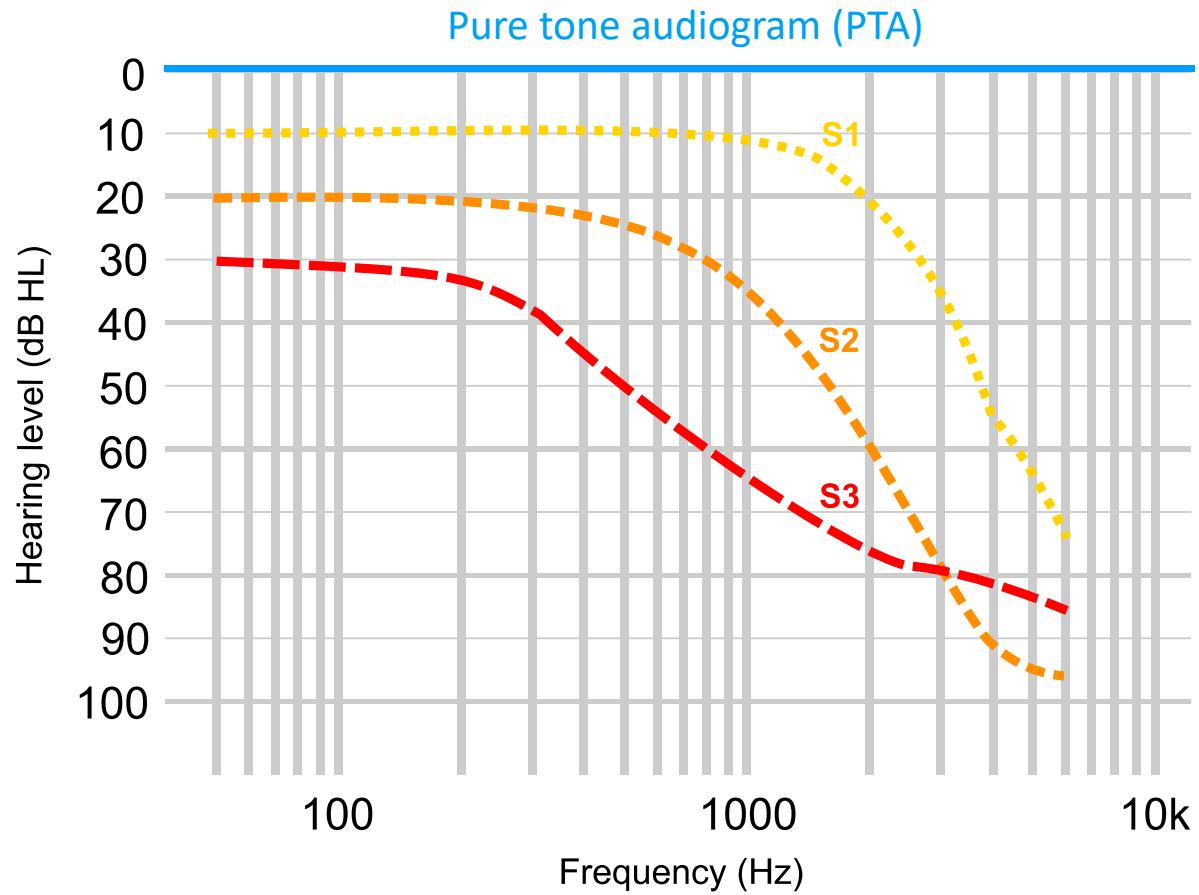
## •• Scales and units in audio signal processing: dB HL



Bisgaard standard audiograms:

- S1: very mild (*degree of hearing loss*)
- S2: mild

## •• Scales and units in audio signal processing: dB HL

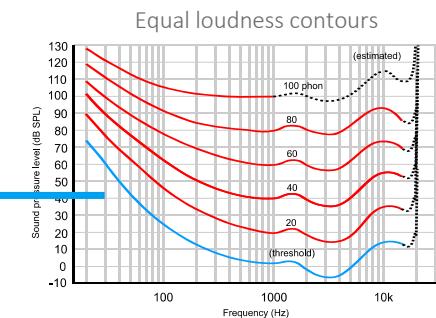
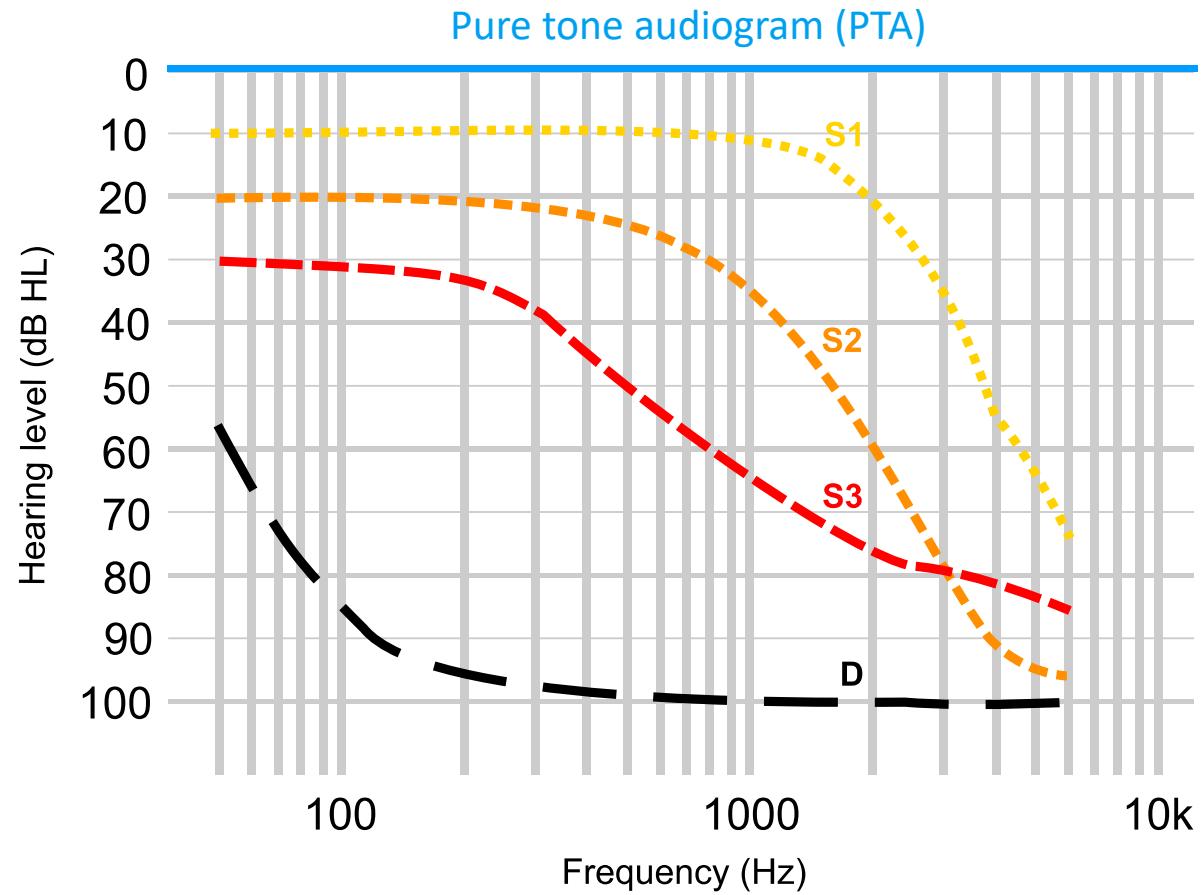


Bisgaard standard audiograms:

- S1: very mild (*degree of hearing loss*)
- S2: mild
- S3: severe

Source: [Bisgaard et al. \(2010\)](#)

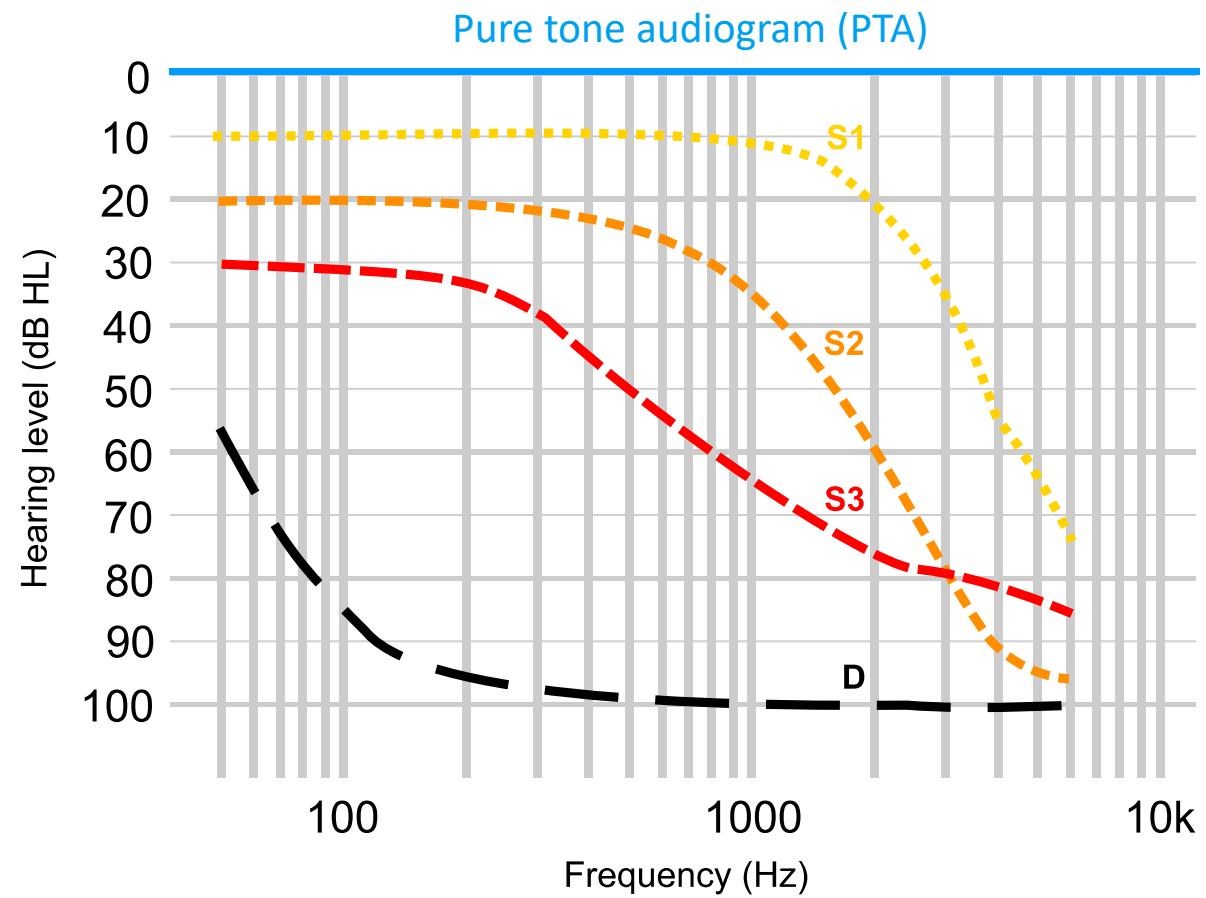
## •• Scales and units in audio signal processing: dB HL



Bisgaard standard audiograms:

- S1: very mild (*degree of hearing loss*)
  - S2: mild
  - S3: severe
- Source: [Bisgaard et al. \(2010\)](#)
- D: hearing loss bordering on deafness

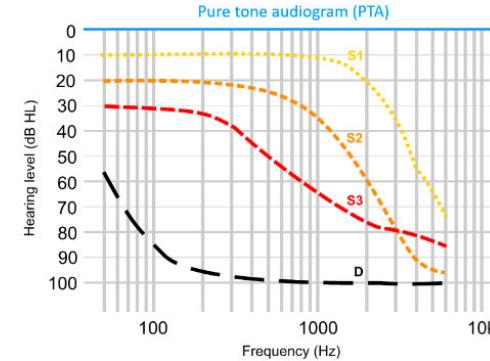
## •• Hearing and hearing impairments



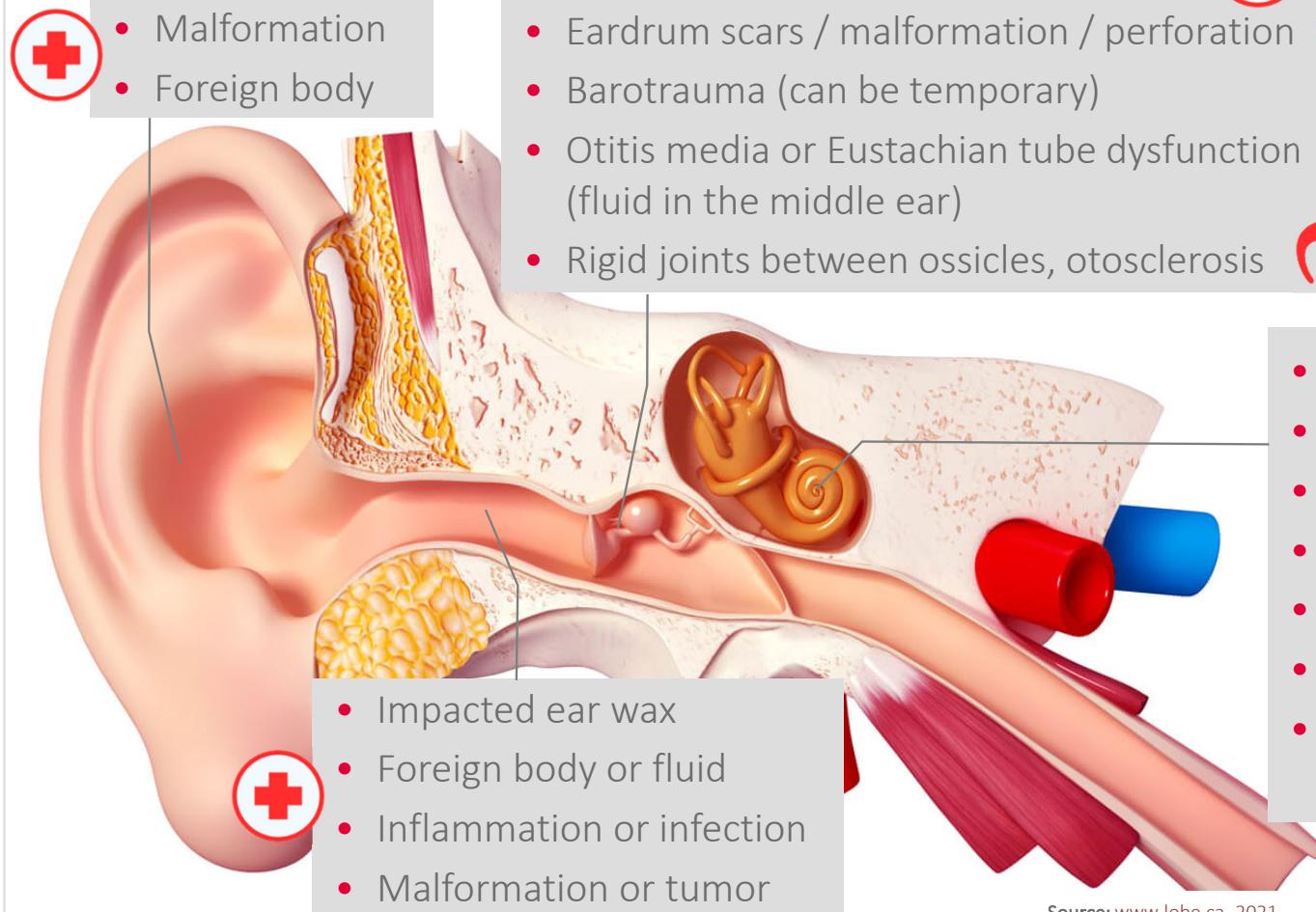
## •• Hearing and hearing impairments

Questions:

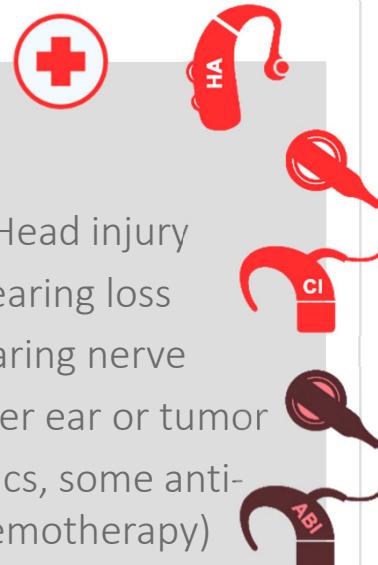
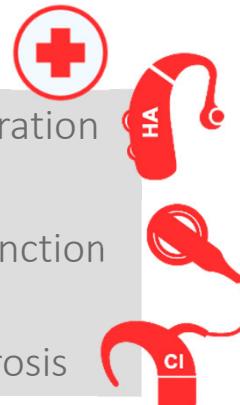
- How many are affected?
  - WHO 2021: worldwide ca. 466M people with disabling hearing loss.
- How bad is impaired hearing?
  - It is bad, especially in background noise. Try for yourself → see **slide** with hearing loss simulators.  
- What are the causes of the impairments?
  - Genetic causes, complications at birth, infectious diseases, chronic ear infections, certain drugs, ageing, and exposure to excessive noise (1.1B young people under 35 due to high SPLs in recreational settings).
- What can be done to help people?
  - Hearing protection and education, access to early and on-demand screening;
  - access to hearing systems: hearing aids, cochlear implants, and other assistive devices (WHO 2021: currently only 17% of those who could benefit from use of a hearing aid actually use one);
  - sign language and social support.



## •• Causes of hearing impairment



Source: [www.lobe.ca](http://www.lobe.ca), 2021.



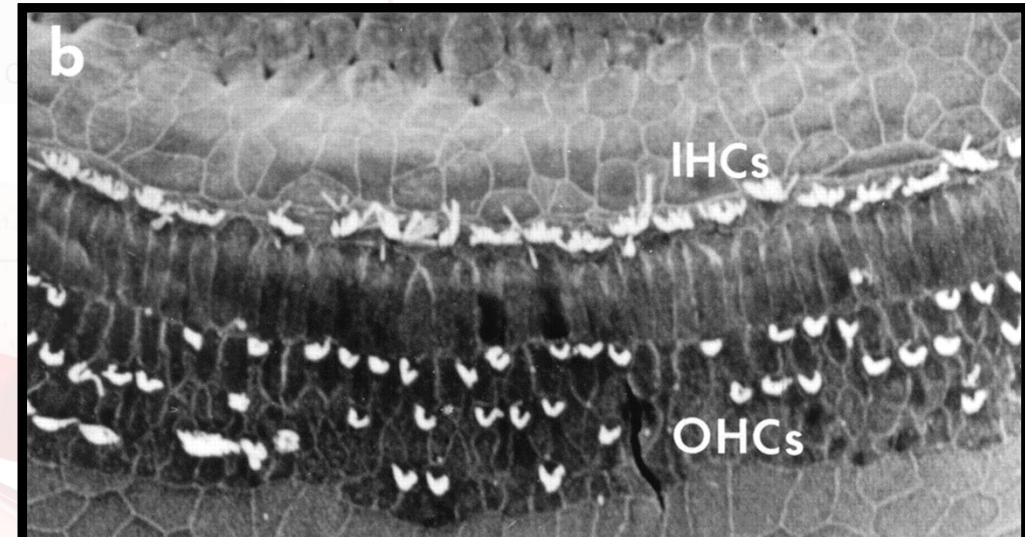
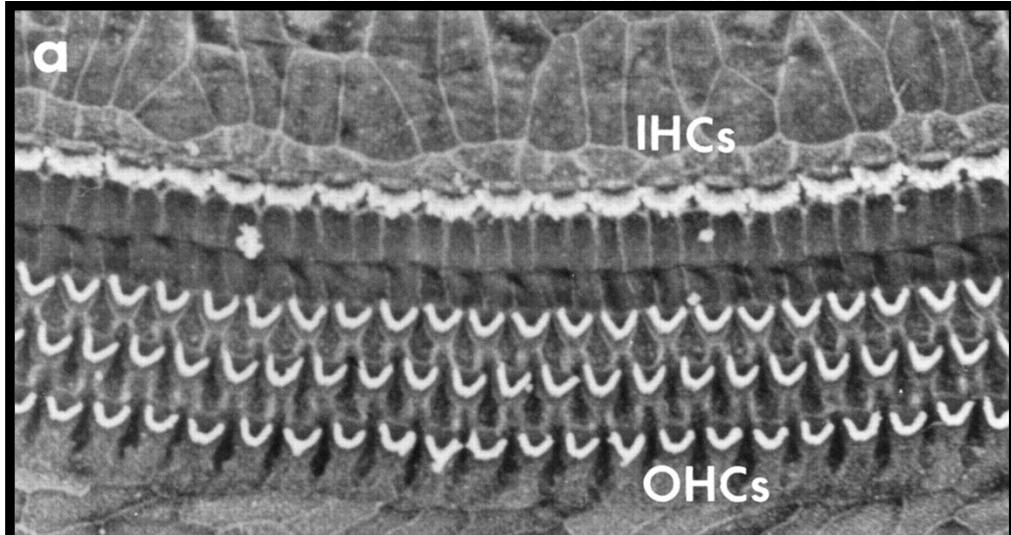
## •• Causes of hearing impairment



- Malformation
- Foreign body

- Eardrum scars / malformation / perforation
- Barotrauma (can be temporary)

**Exposure to high sound pressure level → Hair cell damage**



- Foreign body or fluid
- Inflammation or infection
- Malformation or tumor

- Ototoxic drugs (antibiotics, some inflammatory drugs, chemotherapy)

Source: [Ryan, 2000](#)

Source: [www.lobe.ca, 2021.](#)

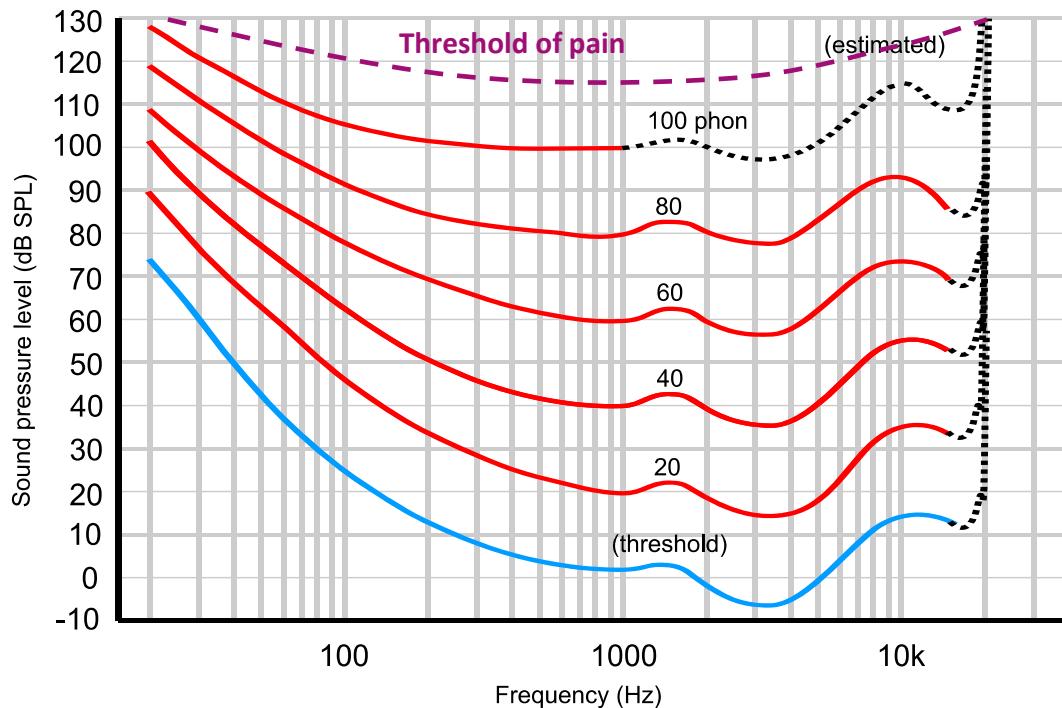
## •• Consequences of hearing impairment

- Communication is difficult to follow, uncertainties become frequent in everyday life.
- Environmental sounds missing (bird song, water dripping, water boiling over when cooking, ...).
- Withdrawal, due to
  - missing what others are talking about → frustration;
  - unwilling to ask repeatedly → shame, embarrassment;
  - everyday situations become challenging;
  - listening to speech becomes very effortful.
- Most of the time no sudden decline but a creeping process → unconscious adaptation.
- Often leads to "pro-active strategy": responses to what was meant to be said.
- May lead to loneliness, isolation, depression (false sense of others often being angry with them).
- **Unavoidable cognitive decline if untreated.**
- Danger: confusion with dementia.



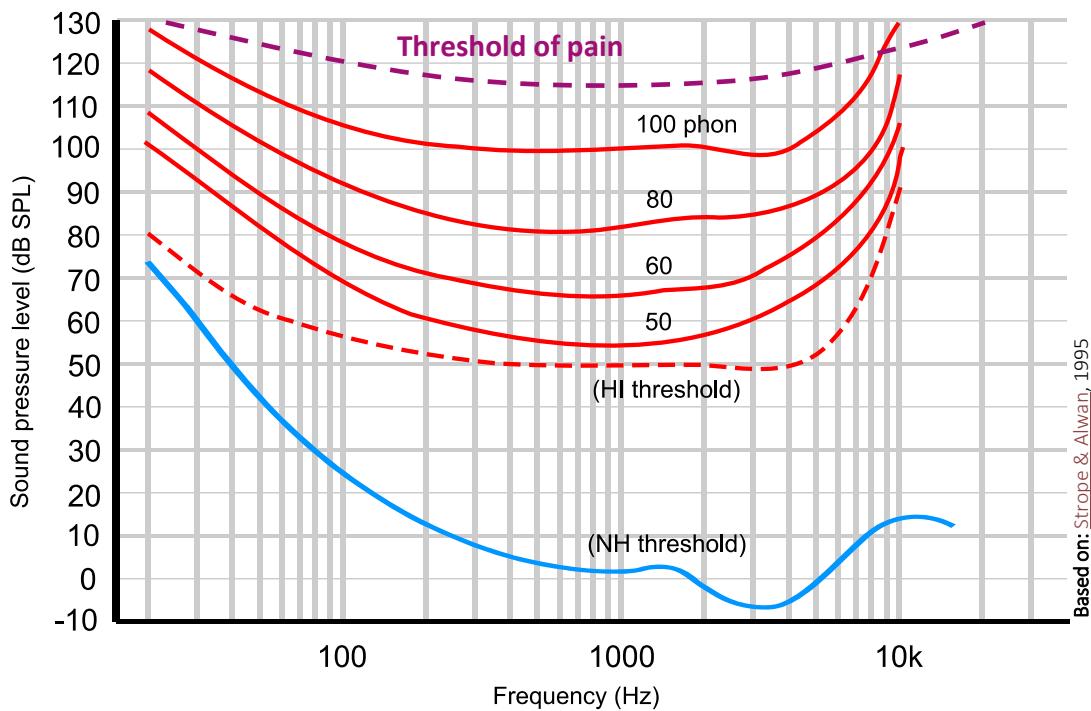
## •• First signs of a hearing impairment #1

- Speech at moderate level not always understood, but **loud speech becomes disturbing** and misinterpreted as offensive.



## •• First signs of a hearing impairment #1

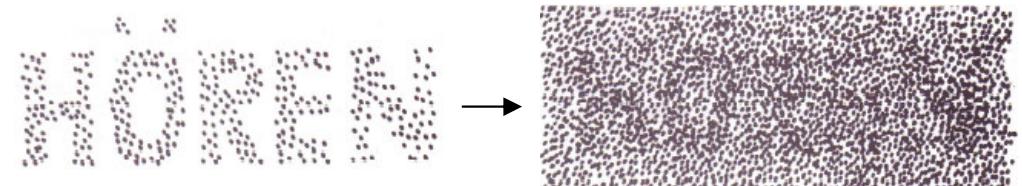
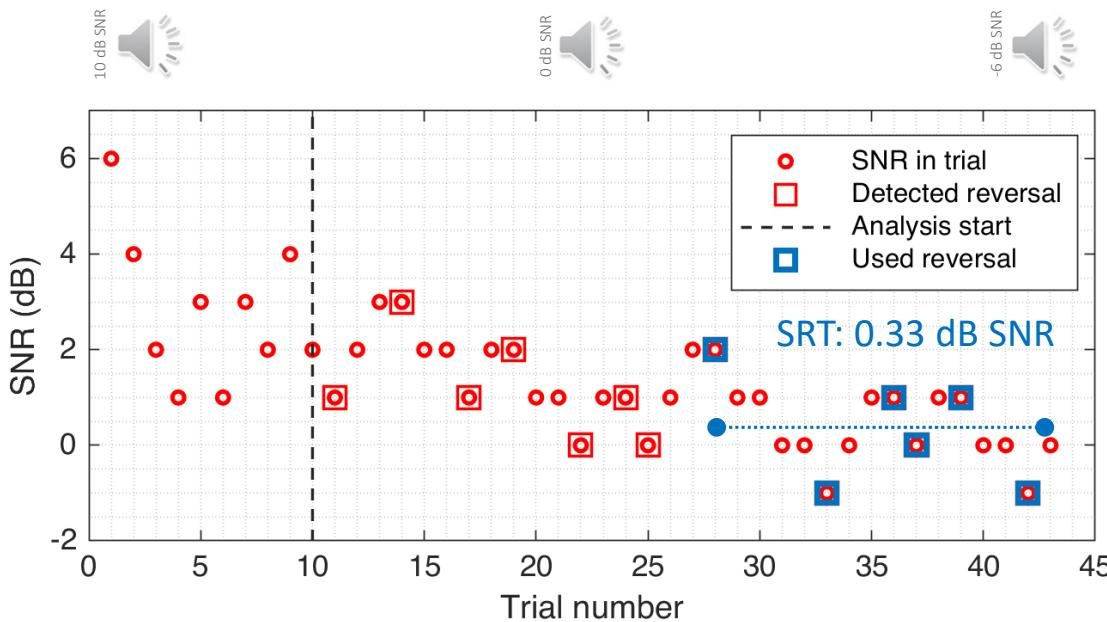
- Speech at moderate level not always understood, but **loud speech becomes disturbing** and misinterpreted as offensive.



- In most cases, the amount of energy arriving at the IHCs is comparable to that of the NH (normal hearing) case.
- Threshold of pain is unchanged (and also the range of uncomfortably loud signals).
- The dynamic range (between threshold of hearing and threshold of pain) is narrower.
- In hearing assistive technology:
  - we need to know the thresholds (**pure tone audiometry**),
  - we need to apply dynamic compression.

## •• First signs of a hearing impairment #2

- Understanding **speech in noise** (other talkers, traveling, background music) becomes increasingly **difficult**.
- If pure tone audiogram looks OK → hidden hearing loss.
- Speech in noise test can clarify the issue.  
In German-speaking regions: [OLSA \(Oldenburger Satztest\)](#).



- Problems with understanding speech in noise often arise before a pure tone audiogram indicates hearing impairment.  
**Speech reception threshold, SRT, increases.**
- Threshold and equal loudness curves may remain largely unchanged.
- Frequency and amplitude resolution declines, which makes it the auditory system harder to distinguish signal from noise.
- Hearing assistive technologies may help with noise reduction algorithms.

## •• Hearing aids – Early history

Source: [hearingaidmuseum.com](http://hearingaidmuseum.com), 2021

Ear trumpets



17<sup>th</sup> century

Vactuphone  
(1<sup>st</sup> vacuum-tube HA)



1902

Behind-the-ear  
hearing aids



1952

Widex Senso  
full digital BTE HA



1956-57



Hutchison's Acousticon  
(1<sup>st</sup> electrical HA)



Sonotone Model 1010  
(1<sup>st</sup> transistor HA)



Nicolet Phoenix  
(programmable digital HA)

## •• Hearing aids – Modern form factors



Behind the ear (BTE)



Receiver in canal (RIC)



In the canal (ITC)



Completely in canal (CIC)



- + least earwax impact
- definitely visible



- + least feedback



- + glasses-friendly
- ear occlusion



- + glasses-friendly
- ear occlusion
- usability

Source: [betterhearing.org](http://betterhearing.org), 2021

## •• Hearing aids – Requirements

- Attested hearing impairment is a **disability**.
- Health insurance (in Germany) pays for an adequate hearing aid system. **Requirements:**
  - digital technology;
  - a minimum of 4 frequency channels with compression;
  - a minimum of 3 selectable, individualized programs (=*settings*);
  - availability of noise reduction algorithm;
  - availability of feedback cancellation algorithm.
- Plus, requirements of the Medical Device Regulation (MDR) of the European Union:
  - manufacturer must implement quality and risk management systems;
  - performance, user benefit, and user safety must be proven in clinical trials.

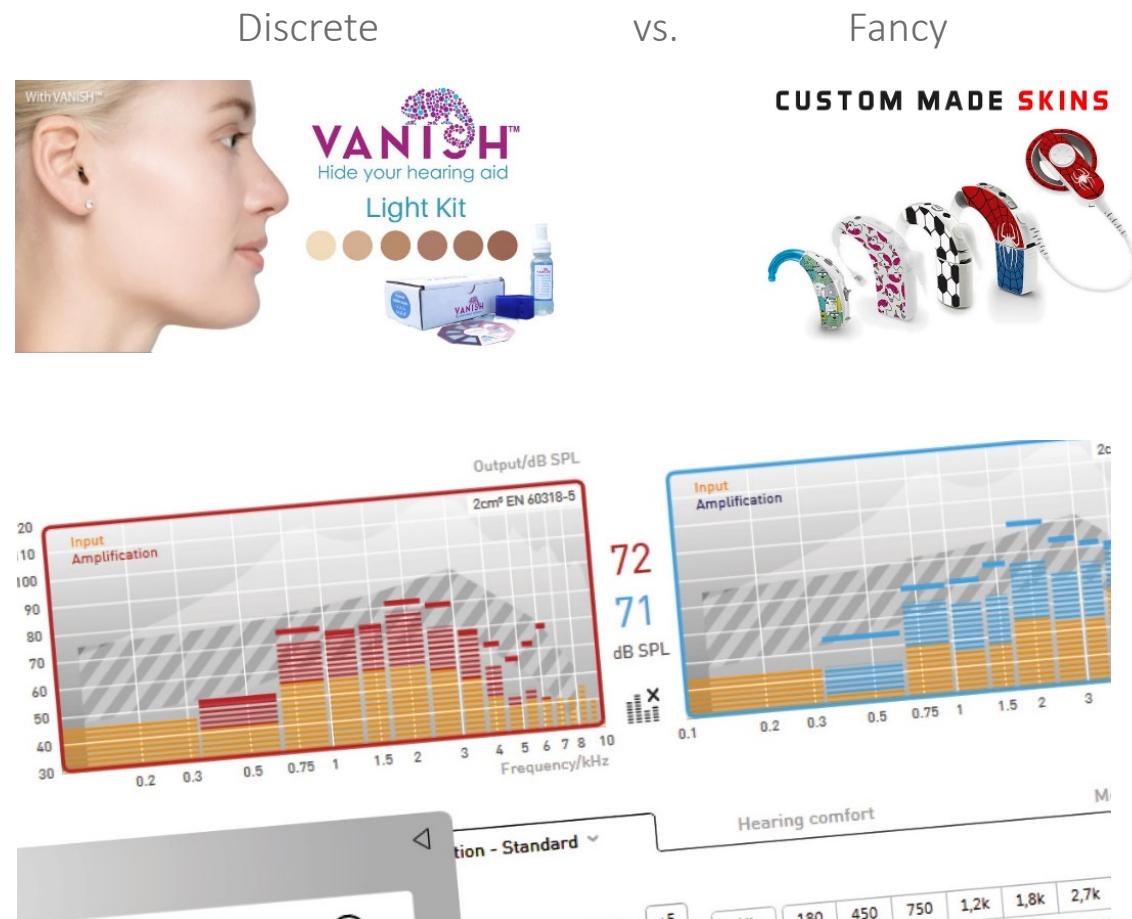
## •• Hearing aids – Expected features

### General:

- Small, lightweight, intuitive, discrete\*.
- Remote control, smartphone app.
- Wireless streaming (TV, remote microphone).
- Quickly rechargeable, long lasting battery.

### Audiological features:

- Low noise, high gain, high bandwidth (10 kHz+).
- 10+ frequency channels for DRC.
- Adaptive microphone directionality.
- Noise reduction: ambient, wind, impulse.
- Environment classification.
- Advanced feedback cancellation.
- Frequency shifting.
- Low latency (<< 10 ms), binaural algorithms.



## •• Hearing aids – Medical features

### General:

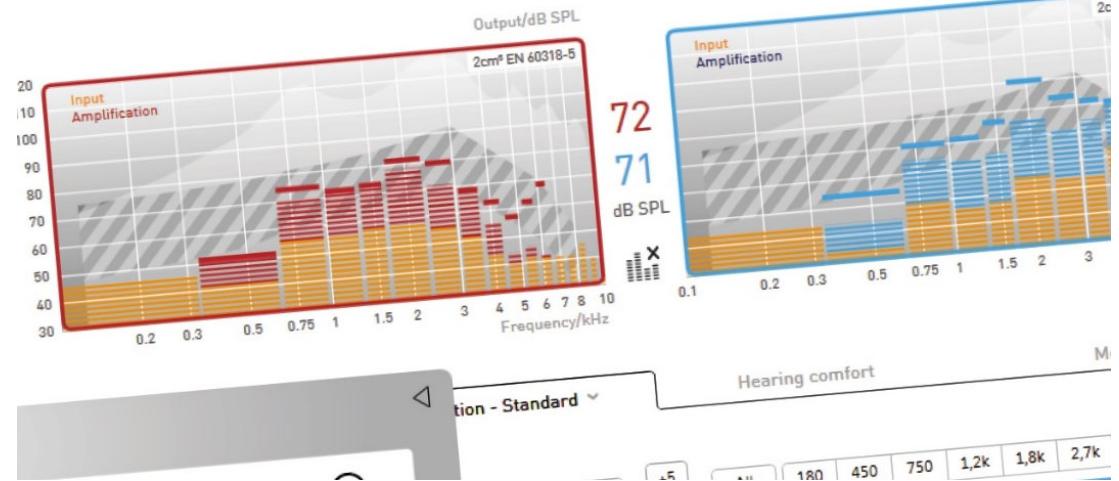
- Small, lightweight, intuitive, discrete.
- Remote control, smartphone app.
- Wireless streaming (TV, remote microphone).
- Quickly rechargeable, long lasting battery.

### Audiological features:

- Low noise, high gain, high bandwidth (10 kHz+).
- 10+ frequency channels for DRC.
- Adaptive microphone directionality.
- Noise reduction: ambient, wind, impulse.
- Environment classification.
- Advanced feedback cancellation.
- Frequency shifting.
- Low latency (<< 10 ms), binaural algorithms.

### Fitness and medical features:

- Fitness tracking (step counter, pulse rate etc.).
- Blood pressure monitoring ([Sonion BiometRIC](#)).
- On-demand activity log.
- Fall detection.



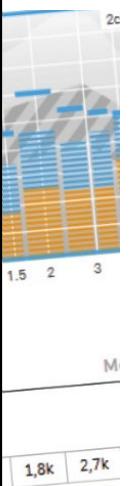
## •• Hearing aids - Medical functions

### General

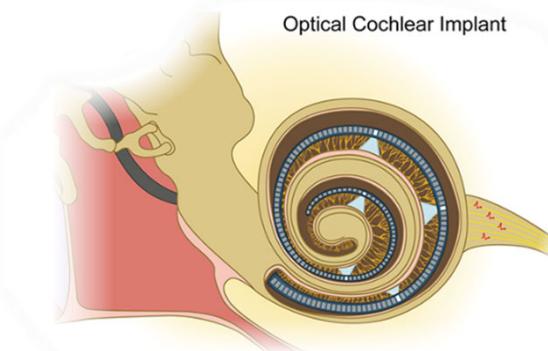
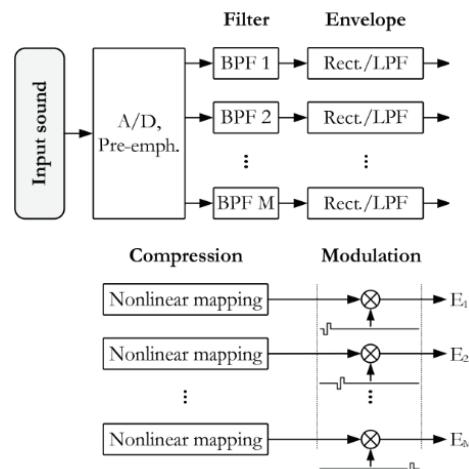
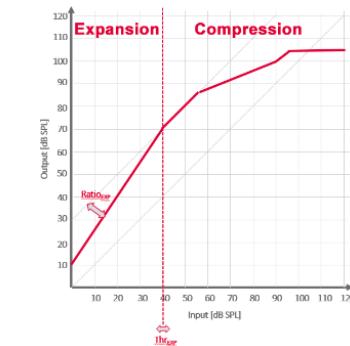
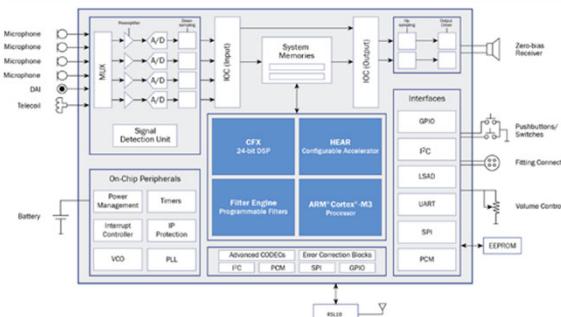
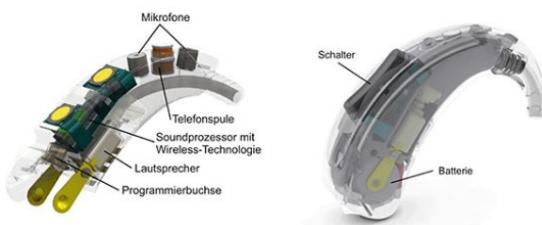
- Smart
- Remote
- Wireless
- Quiet

### Audio

- Low
- 10+
- Adaptive
- Noise
- Envir.
- Adv.
- Freq.
- Low



•• Next time





Thank you very much!  
Questions?

---

Dr.-Ing. Tamas Harczos  
[tamas.harczos@audifon.com](mailto:tamas.harczos@audifon.com)

audifon GmbH & Co. KG