

>> WE'RE GOING TO HAVE CAPTIONS, ONE MINUTE.  
>> GOOD MORNING, MR. TIM.  
>> I SEE THE CAPTIONS.  
>> WHAT I HAVE NOT FIGURED OUT HOW TO DO, MUTE EVERYONE.  
AND UNMUTE EVERYONE.  
I HAVE IT SET UP THAT PARTICIPANTS UNMUTE THEMSELVES.  
WHEN PRESENTATION STARTS ASSUMING THIS WORKS I'M GOING TO CLICK ON MUTE  
ALL.  
THEN YOU AND CHALESE CAN UNMUTE --  
>> I'M SORRY.  
HOLD ON.  
CHALESE BUTTARS.  
MAJIT BRAINHEARING.  
>> I HAVEN'T EVER DONE THAT.  
I DON'T KNOW IF I CAN CONTROL THE POLL QUESTIONS.  
LAST TIME WE DID THIS, TONI JUST PULLED THEM UP.  
I DON'T KNOW THE ANSWER TO THAT.  
>> WHAT WAS THE QUESTION, TIM?  
>> WE WERE JUST TALKING ABOUT THE POLL QUESTIONS.  
THAT THEY NEED -- HAVE THE ABILITY WHETHER YOU OR THEM TO DO IT.  
>> WHAT WAS THE ANSWER WAS, I DON'T KNOW?  
>> WE'RE TRYING TO FIGURE THAT OUT.  
WE WANT TO MAKE SURE THAT CHALESE IS ABLE TO PUT UP THE POLL QUESTIONS.  
>> I SEE SOME HEBREW WRITING IN THE BACKGROUND.  
>> DO YOU HAVE THE POLLING BUTTON ON YOUR SCREEN?  
DO WHATEVER YOU NEED TO TURN IT OFF.  
>> CHALESE, DO YOU HAVE THE POLL QUESTION OPTION?  
>> I DON'T HAVE THEM RIGHT NOW.  
I WONDER IF SHARON LET'S ME SHARE MY SCREEN IF THEN I WOULD GET THAT  
OPTION.  
BUT I DON'T HAVE THEM NOW.  
>> I HAVE THEM.  
BECAUSE YOU SENT THEM TO US.  
>> DID YOU PUT THE POLL QUESTIONS INTO THE SYSTEM?  
>> NO.  
I THOUGHT THAT WHEN WE -- I DIDN'T DO THAT.  
FIRST OF ALL LET ME ASSIGN YOU COHOST.  
>> NO CAPTIONING.  
>> NO CAPTIONING.  
>> HANG ON, GEORGIA.  
>> OKAY, THEY'RE BACK.  
>> THANK YOU.  
>> DAVID, AND CHALESE, WHEN -- RIGHT BEFORE I INTRODUCE YOU AND YOU'RE  
FROM OTICON GIVE ME A TWO SENTENCE, OTICON BIO?  
>> DR. MAJIT, YOU WOULD BE PERFECT FOR THAT.  
>> BASICALLY IT'S THE OLDEST HEARING AID COMPANY IN THE WORLD THAT  
STARTED IN 1904.  
WHEN A BUSINESSMAN'S WIFE ACTUALLY HAD A SEVERE HEARING LOSS SO HE WAS  
LOOKING TO HELP HER WITH HER HEARING LOSS AND SO HE STARTED HIS OWN  
COMPANY CALLED OTICON.  
THAT'S KIND OF THE HISTORY.  
THEY'RE KNOWN AS TECHNOLOGICALLY DRIVEN COMPANY.  
VERY INNOVATIVE.  
>> LET ME REPEAT SOME OF THAT BECAUSE -- THAT'S GREAT.

OLDEST HEARING COMPANY IN THE WORLD, STARTED IN 1904 WHEN A BUSINESSMAN'S WIFE HAD A SEVERE HEARING LOSS HE SET OUT TO HELP HER.  
SET OUT TO START A COMPANY TO HELP HER.

>> EXACTLY.

>> REALLY QUICKLY, JUST IF WE DIDN'T PUT THE POLL QUESTIONS IN IN ADVANCE I'M WONDERING IF WE SHOULD HAVE THEM USE THE CHAT BOX TO ANSWER THE QUESTION JUST PUT THEIR ANSWER IN THE CHAT BOX.

IS THAT OKAY WITH EVERYBODY ELSE?

>> I COULD TRY TO ENTER IT.

LET ME JUST GET MY SET UP.

>> OKAY.

>> I AM NOT LOOKING STRAIGHT BECAUSE I'M PROBABLY -- I HAVE TWO SCREENS.  
I --

>> NOT NOW.

WHEN YOU TURNED TO THE LEFT -- NOW YOU'RE LOOKING STRAIGHT.

>> BUT I'M NOT SEEING YOU YOU'RE ON MY BIG MONITOR MAYBE I NEED TO MOVE MY BIG MONITOR IN BACK OF MY SMALL MONITOR.

NOT GOOD TO TRY NEW TECHNOLOGY WHEN YOU'RE LEADING A MEETING.

I HAVE A LARGE MONITOR IN MY OFFICE I THOUGHT IT WOULD BE HELPFUL TO HAVE A SECOND SCREEN.

>> DOES IT LOOK LIKE THE CAPTIONING IS GOING TO WORK?

>> IT LOOKS BEAUTIFUL.

>> IT DOES, OKAY, GOOD.

OTHERWISE YOU ARE GOING TO HAVE TO SPEAK VERY SLOWLY, CHALESE.

>> I'M PLANNING TO SPEAK MORE SLOWLY THAN I DID LAST TIME NASOCAPTIONS CAN CATCH UP.

>> I'M SURE YOU'LL BE PERFECT.

>> NOW I'M TOO LOW.

>> IT SOUNDS LIKE CHALESE IS BEING MADE THE COHOST WHICH IS GREAT.

AND THAT THERE IS A QUESTION ABOUT THE POLL QUESTIONS BUT CAPTIONING SOUNDS LIKE IT'S IN ORDER.

IS THAT CORRECT, TIM?

>> I'M NOT SURE IF I GOT ALL THAT.

>> SORRY.

CHALESE WAS JUST -- IS MADE THE COHOST.

AND THE CAPTIONING SEEMS TO BE FINE.

IT LOOKS LIKE IT'S GOING TO WORK.

ONLY REAL QUESTION IS IF THE POLL QUESTIONS ARE GOING TO BE ABLE TO BE ADDRESSED AUTOMATICALLY OR IF NOT CHALESE HAD MENTIONED WE MAY NEED TO HAVE PEOPLE RESPOND IN THE CHAT BOX.

SO I THINK THAT WE NEED TO EXPLAIN HOW THE CHAT BOX WORKS AT THE BEGINNING.

UNLESS WE CAN CHECK IF THE POLL QUESTIONS CAN WORK RIGHT NOW.

I DON'T KNOW IF WE HAVE TIME TO DO THAT.

>> I AGREE WITH THAT.

I HAVE THE POLL QUESTIONS HERE I THINK IT'S A MATTER OF ADDING THEM.  
SHARON, ARE YOU ABLE TO --

>> I HAVE SOMETHING A LITTLE MORE TIMELY RIGHT NOW.

I THOUGHT I CHANGED MY SETTING TO NOT HAVE A WAITING ROOM.

BUT I DO HAVE A WAITING ROOM BECAUSE PEOPLE ARE IN THE WAITING ROOM.

>> YOU HAVE TO START LETTING PEOPLE IN.

SHARON, ANY WAY TO ADD THE POLL QUESTIONS --

>> I CHANGED MY SETTING --

>> OR HAVE TO USE THE CHAT?

>> I WANT TO SEE IF I CAN SKIP THIS WAITING ROOM.  
REALLY IS NOT WHAT I HAD THOUGHT.  
>> DAVID AND CHALESE I WOULD PROBABLY SUGGEST WE'RE GOING TO HAVE TO MAKE  
SURE PEOPLE KNOW HOW TO USE THE CHAT FOR QUESTIONS.  
>> OKAY.  
>> HOPE WE CAN GET THE POLLING UP THERE.  
>> THAT'S NO PROBLEM.  
>> DISABLED WAITING ROOM.  
>> DAVID ON YOUR END IS THE CHAT AT THE TOP OR BOTTOM?  
>> THE CHAT IS ON THE BOTTOM SCREEN IN THE MIDDLE OF THE BAT TOMORROW  
SCREEN.  
>> PERFECT.  
DID YOU WANT TO GIVE A BRIEF EXPLANATION WHEN WE GET TO THE FIRST POLL  
QUESTION.  
>> YOU CAN GO AHEAD AND DO THAT.  
I THINK THAT WOULD BE FINE.  
I SEE DR. GRAMMAR IS ONLINE.  
>> ARE YOU HEARING ME OKAY?  
>> JUST FINE.  
>> GOOD MORNING.  
>> LOOKS LIKE EVERYONE IS ENTERING THE --  
>> PEOPLE ARE ENTERING BUT I ADMITTED SOME HOPEFULLY I DISABLED THE  
WAITING ROOM.  
>> WANT TO SEE IF THIS IS GOING TO WORK.  
>> CHALESE AND DAVID, I DO HAVE FAMILY IN ARIZONA LISTENING.  
THEY'RE OTICON USERS.  
ABOUT SEVEN OR EIGHT OF THEM.  
>> GREAT.  
>> MAYBE WE CAN HAVE THEM EACH SPEAK ABOUT THEIR EXPERIENCES WITH OTICON.  
>> BETTER NOT SPEAK WITH --  
>> HI, JEFF.  
>> LONG TIME NO SEE.  
>> NOT THAT LONG.  
>> HI, JEFF.  
>> HOWDY.  
>> THERE'S GEORGIA.  
GET THIS A LITTLE BIGGER.  
>> I'M HERE.  
>> I SEE YOU.  
>> HOW ARE YOU DOING?  
>> CHALESE, WHERE DID WE LEAVE IT WITH THE QUESTIONS?  
>> I THINK WE'LL JUST USE THE CHAT BOX THAT WILL BE FINE.  
WE'LL GIVE THEM A BRIEF EXPLANATION ABOUT THE CHAT BOX.  
FOR THOSE WHO CAN TYPE AN ANSWER THEN THAT WILL BE GREAT.  
>> BECAUSE I COULD ADD THE QUESTIONS.  
WHY DON'T WE TRY THIS.  
WHY DON'T YOU JUST -- DO YOU WANT ME NOT TO DO THAT?  
>> IF YOU HAVE TIME TO ADD THEM LET'S DO THAT.  
BUT I DON'T WANT IT TO BE A STRESSFUL THING.  
>> HOW QUICK IS IT?  
>> I HAVE NEVER DONE IT, ACTUALLY.  
>> LET'S NOT.  
ESPECIALLY BECAUSE I'M GOING BETWEEN TWO SCREENS.  
I DON'T WANT TO MESS MYSELF UP.

SORRY.  
>> WE'LL USE THE CHAT BOX, NO PROBLEM.  
>> GOOD MORNING, HEATHER, CAN YOU HEAR ME?  
>> YES.  
>> HOW ARE YOU?  
>> HI, HOW ARE YOU?  
GO BEARS!  
>> PERFECT.  
>> I'M SO EXCITED.  
I CAN'T STAND IT.  
>> DID YOU SEE MY E-MAIL THIS MORNING.  
>> I DID, I DID.  
I'M THRILLED.  
YOU KNOW THAT'S --  
>> I DIDN'T KNOW THAT.  
I FIGURED SOMEBODY IN YOUR FAMILY WAS FOR YOU TO HAVE.  
BUT THAT'S GREAT.  
AFTER THE PRESENTATION WE'RE NOT HAVING AN OFFICIAL BREAK.  
BUT AFTER OTICON FINISHES THEN I WILL --  
>> WE'RE NOT GOING TO TALK TO JULIE AFTER THE PRESENTATION?  
>> CORRECT.  
I WILL JUST SAY THAT YOU LIKE TO SAY A FEW WORDS ABOUT OUR SCHOLARSHIP  
COMMITTEE AND YOU CAN JUST MENTION HOW YOU BROUGHT THAT ON.  
THEN I WILL INTRODUCE JULIE.  
SHE WILL INTRODUCE HERSELF.  
>> AWESOME.  
I'M EXCITED.  
[ ALL TALKING AT ONCE ]  
>> I THINK WE SHOULD GIVE IT A COUPLE OF MINUTES.  
WE HAD --  
>> WORDS ABOUT HER BROTHER.  
IN TROY, ALABAMA, EARLIER THIS -- AS WE REMEMBER JOHN LEWIS THIS WEEKEND.  
>> THAT SERVICE IS THE FIRST EVENT OF WHAT IS GOING TO BE SIX DAYS OF  
CEREMONY MOB ORING THE CONGRESSMAN.  
THERE IS GOING TO BE ANOTHER PUBLIC SERVICE IN SELMA.  
>> IT'S EASY TO FORGET THAT IT'S THE NATION --  
>> IT IS THEIR PROBLEM NOT OURS.  
>> I AM NOT SEEING THE SPEAKER.  
THERE YOU ARE.  
OKAY.  
>> MAGIC NUMBER DAVID IS 50.  
WE'RE THREE AWAY.  
I'M GOING TO MUTE EVERYBODY THEN WE'RE GOING TO START.  
>> GOOD, THAT'S WHAT YOU NEEDED TO DO.  
>> FOR THOSE -- FOR THOSE OF YOU WHO HAVE BEEN ON TIME WE APPRECIATE IT.  
AND WE'RE GOING TO START TAKING COCKTAIL ORDERS SO PLEASE HAVE YOUR  
COCKTAIL ORDER READY.  
>> NOBODY GOT STUCK IN TRAFFIC TODAY.  
THE EXCUSES ARE JUST FEWER AND FEWER ESPECIALLY WITH L.A. TRAFFIC AS YOU  
GUYS KNOW.  
>> TRAFFIC IS NONEXISTENT ANY MORE.  
>> SHOULD BE COMING THROUGH THE TV.  
>> THE WAY IT'S CURRENTLY SET UP IT'S SPEAKER VIEW, WHOEVER IS SPEAKING  
IT WILL -- THAT'S WHY IT'S BOUNCING BACK AND FORTH.

>> I'M GOING TO MUTE EVERYBODY.  
AND FOR THE PRESENTATION.  
AND AFTERWARDS PEOPLE CAN ANSWER -- ASK THEIR QUESTIONS AND YOU'LL BE  
UNMUTED.  
>> I DON'T THINK I CAN MAKE IT --  
>> OKAY.  
CAN EVERYBODY HEAR ME OKAY?  
WONDERFUL.  
WELCOME, EVERYBODY, I'M SO GLAD TO SEE SO MANY FAMILIAR FACES.  
AND SOME NEW FACES, TOO.  
WE MISS YOU GUYS A LOT.  
WE MISS THE JUNE MEETING BECAUSE OF ALL THE HLAA NATIONAL PRESENTATIONS  
THAT HAD BEEN TAKING PLACE.  
BUT WE'RE VERY HAPPY TO RECONVENE AND INTENDING TO GET BACK TO OUR HLAA-  
L.A. SCHEDULE OF HAVING OUR MEETINGS THE FOURTH SATURDAY OF THE MONTH.  
AND WHILE WE CAN'T DO IT IN PERSON RIGHT NOW WE CERTAINLY ARE GRATEFUL  
FOR TECHNOLOGY THAT WILL ALLOW US TO MEET.  
MOST ESPECIALLY OUR CAPTIONER, THANK YOU DEANNA FOR BEING HERE AND  
ALLOWING EVERYBODY TO BE ABLE TO PARTICIPATE AND BE PART OF THIS MEETING.  
TODAY WE HAVE A VERY SPECIAL PRESENTATION.  
WE HAVE TWO FOLKS FROM OTICON, ONE IN HAWAII WHO IS JUST TAKING TIME OUT  
OF HIS BEACHY MORNING TO COME TALK TO US.  
MANY OF YOU ARE PROBABLY FAMILIAR WITH OTICON HEARING AIDS.  
OAT CONIS THE OLDEST HEARING AID COMPANY IN THE WORLD.  
STARTED IN 1904 BY A BUSINESSMAN WHOSE WIFE HAD A SEVERE HEARING LOSS.  
AND HE SET OUT TO HELP HER HEAR.  
A VERY TECH NO LOGICALLY DRIVEN COMPANY.  
AND OUR PRESENTATION TODAY IS GOING TO BE ON COMMUNICATION AND  
BRAINHEARING.  
AND HELPING US WITH ALL OF THE VERY STRESSFUL ISSUES THAT ARE EXACERBATED  
BY THE PANDEMIC AND MASK WEARING AND NOT BEING FACE TO FACE AND SO ON.  
ON OUR PANEL TODAY WE HAVE DAVID MAJIT WHO IS A DOCTOR AT IN AUDIOLOGY  
FROM THE UNIVERSITY OF -- FROM ARIZONA SCHOOL OF HEALTH SCIENCE.  
HE HAS A LOT OF EXPERIENCE IN THIS INDUSTRY, HE'S BEEN WORKING WITH  
HEARING AID MANUFACTURERS IN A NUMBER OF CAPACITIES AS A CONSULTANT,  
TRAINER AND ACCOUNT MANAGER FOR THE PAST 40 YEARS.  
SO HE PROBABLY KNOWS ALL THE INS AND OUTS OF THIS INDUSTRY.  
AND WE HAVE CHALESE BUTTARS, WHO IS AN AUDIOLOGIST AND EDUCATION AND  
TRAINING SPECIALIST FOR OTICON.  
IN THE WESTERN REGION.  
BOY, I DON'T KNOW ABOUT YOU GUYS BUT I CERTAINLY CAN USE A TRAINING  
SPECIALIST IN THIS NEW WORLD OF ZOOM.  
WITHOUT FURTHER ADUE TURN THE PRESENTATION OVER TO DAVID AND CHALESE.  
WE WILL HAVE A Q&A SESSION AFTER THE PRESENTATION.  
AND THERE WILL BE A NUMBER OF WAYS FOR YOU TO PARTY YOU CAN EITHER PUT A  
QUESTION IN THE CHAT BOX AND WE WILL BE MONITORING THAT.  
THEN WE CAN ASK THE QUESTION OR YOU CAN RAISE YOUR HAND IN THE  
PARTICIPANTS BUTTON, THERE -- I DON'T HAVE IT AS THE HOST BUT AT THE  
BOTTOM OF THE PARTICIPANT BUTTON LITERALLY BLUE HAND RAISED.  
IF YOU WISH TO ASK A QUESTION AFTER THE PRESENTATION YOU CAN PUT THE  
RAISE HAND.  
YOU CAN CLICK THAT AT ANY TIME AFTER THE PRESENTATION WE WILL GO IN ORDER  
AND HAVE YOUR QUESTIONS YOU CAN ASK YOUR QUESTIONS THAT WAY.

AND IF NEITHER OF THOSE WORK FOR YOU WE CAN REVERT TO THE OLD FASHIONED WAY OF PUTTING YOUR HAND UP WHEN THEY'RE DONE WITH THEIR PRESENTATION. I TURN IT OVER TO YOU, DAVID AND CHALESE.

YOU CAN UNMUTE YOURSELVES.

>> WELL, THANK YOU SO MUCH, SHARON, FOR THE IN.

>> WE'RE DELIGHTED TO BE HERE.

SEEMS LIKE AUSPICIOUS ATTENDANT GROUP SO AGAIN THANK YOU ALL FOR TAKING THE TIME TO JOIN US.

WE HOPE YOU'RE SAFE AND HEALTHY.

THAT'S WHY THINGS LIKE THESE ZOOM MEETINGS ARE SO HANDY AND IMPORTANT TO HAVE TO STAY CONNECTED.

I HOPE THAT YOU FIND THAT THE MEETING SERVES AS AN INFORMATIONAL SOURCE FOR HEARING AND HEARING LOSS.

AND AS SHARON MENTIONED WE WANT TO ADDRESS EVERYONE HE'S QUESTIONS.

WE WILL SAVE THAT TO THE END OF THE MEETING.

WE WILL BE ASKING SOME POLL QUESTIONS, THERE WILL BE FOUR IN TOTAL.

AND DR. BUTTARS, MY COLLEAGUE WILL ADDRESS HOW BEST TO UTILIZE THE CAN CHAT ROOM TO ASK THOSE QUESTIONS.

AGAIN, THANK YOU FOR JOINING US.

WE CERTAINLY HOPE THAT YOU WILL FIND THIS TO BE A WORTHWHILE TIME SPENT WITH US.

WITH THAT SAID I'M GOING TO TURN THE PROGRAM OVER TO MY COLLEAGUE, DR. CHALESE BUTTARS.

>> THANKS, DR. MAJIT.

HELLO EVERYBODY.

THANKS FOR SPENDING SOME TIME WITH US THE NEXT HOUR OR SO WE TALK ABOUT THINGS THAT WE FEEL ARE IMPORTANT AT OTICON.

TO START OUT I JUST WANTED TO MAKE SURE THAT I GO OVER OUR AGENDA WHAT WE HAVE PLANNED TO COVER DURING THE NEXT 40 OR SO MINUTES.

FIRST I WANT TO TALK A LITTLE BIT ABOUT BRAINHEARING.

BRAINHEARING IS A CONCEPT THAT WE AT OTICON FEEL IS VERY IMPORTANT.

AND THIS IS A PHILOSOPHY THAT WE HAVE HAD AT OTICON FOR A NUMBER OF YEARS NOW.

SO I'LL TALK ABOUT WHAT BRAINHEARING MEANS AND HOW WE HAVE BRAINHEARING INSERTED WITHIN OUR HEARING DEVICES.

I ALSO WANT TO TALK A LITTLE BIT ABOUT LISTENING EFFORT.

WE KNOW HOW FRUSTRATING IT CAN BE ESPECIALLY FOR INDIVIDUALS WITH HEARING LOSS TO TRY TO HAVE TO LISTEN ESPECIALLY AS THEY GO THROUGHOUT THE DAY.

AT THE END OF THE DAY THEY CAN BE VERY, VERY TIRED BECAUSE OF THE AMOUNT OF EFFORT THAT HAS TO GO IN TO LISTENING.

WHEN SOMEBODY HAS HEARING LOSS THAT EFFORT TENDS TO HAVE TO INCREASE.

I WANT TO TALK ABOUT THAT, EVEN SHARON MENTIONED AT THE FIRST WITH COVID-19 AND WITH PEOPLE WEARING FACE MASKS THERE'S EVEN MORE EFFORT THAT WE HAVE TO PUT INTO LISTENING BECAUSE SOME OF THOSE VISUAL CUES THAT WE USED TO GET BY BEING ABLE TO LOOK AT LIPS WE MAY NOT BE ABLE TO SEE ANY MORE. THIS LISTENING EFFORT I THINK HAS PROBABLY INCREASED THE PAST THREE OR FOUR MONTHS.

THE END OF THE PRESENTATION I WANT TO TALK A LITTLE BIT ABOUT SOME THINGS TO CONSIDER WHEN TRYING TO HEAR BETTER IN NOISY SITUATIONS.

YOU CAN POLL ALMOST ANY HEARING CARE PROFESSIONAL AND ASK THEM WHAT IS THE MAIN COMPLAINT THAT YOU GET FROM PATIENTS WITH HEARING LOSS.

ALMOST EVERY SINGLE ONE I THINK WOULD PROBABLY SAY, PATIENTS SAY THEY STRUGGLE IN NOISY SITUATIONS.

THAT IS THE NUMBER ONE COMPLAINT OR COMMENT THAT WE GET.

I WANT TO TALK A LITTLE BIT ABOUT THAT.  
COUPLE OF THINGS TO CONSIDER WHEN TRYING TO FIGURE OUT HOW CAN WE PERFORM  
THE BEST IN THESE NOISY SITUATIONS.  
ONE OF THE THINGS THAT WE'RE GOING TO DISCUSS JUST FOR A FEW MINUTES IS  
TALKING ABOUT DIFFERENT LEVELS OF TECHNOLOGY.  
THEN I ALSO WANT TO TALK ABOUT CONNECTIVITY.  
IN THE PAST EIGHT OR SO YEARS CONNECTIVITY HAS REALLY BECOME A BIGGER  
THING WITHIN THE HEARING CARE INDUSTRY.  
WITH CONNECTIVITY THESE DIFFERENT PIECES CAN MAKE YOUR LIVES A LITTLE BIT  
EASIER IN TERMS OF TRYING TO HEAR AND UNDERSTAND PEOPLE BETTER.  
WE'LL TALK ABOUT THAT.

AS DR. MAJIT MENTIONED IF YOU HAVE QUESTIONS WE WANT TO MAKE SURE WE CAN  
ADDRESS THOSE.

YOU CAN WAIT UNTIL THE END OR EVEN WRITE THOSE QUESTIONS INTO THE CHAT  
BOX WHICH YOU SHOULD BE ABLE TO FIND AT THE BOTTOM OF YOUR SCREEN THERE  
SHOULD BE A LITTLE CHAT BUBBLE.

NOW WITH THAT CHAT BUBBLE WE'RE GOING TO ASK SOME POLL QUESTIONS  
THROUGHOUT THE PRESENTATION AS WELL.

IF YOU WOULD ANSWER THESE POLL QUESTION, DR. MAJIT WILL READ THIS.

AT THE BOTTOM OF YOUR SCREEN YOU SHOULD BE ABLE TO SEE A CHAT BUBBLE.

WHEN YOU PULL THAT UP WE'LL ASK YOU THE QUESTION THEN YOU CAN GIVE US THE  
ANSWER.

>> THANK YOU.

FIRST OFF ARE WE SEEING THE WRITTEN PART -- ARE WE SEEING THE CAPTIONING  
-- ARE PEOPLE SEEING THE CAPTIONING RIGHT NOW BECAUSE I'M NOT SEEING IT  
ON MY SCREEN, CHALESE -- ARE YOU SEEING IT ON YOUR SCREEN?

>> I'M NOT SEEING ON MY SCREEN BECAUSE I HAVE PRESENTER VIEW.

>> HOPEFULLY THAT WILL WORK.

THE FIRST QUESTION WE'RE GOING TO ASK YOU I SEE MANY PEOPLE ARE ANSWERING  
IT ALREADY.

FOR THOSE OF YOU PARTICIPATING IN THE MEETING NOW COULD YOU JUST ANSWER  
THE SIMPLE QUESTION, ARE YOU PRESENTLY USING HEARING DEVICES.

MAINLY WE'RE REFERRING TO HEARING AIDS.

BUT EVEN ASSISTIVE LISTENING DEVICES, COCHLEAR IMPLANTS, THINGS OF THAT  
NATURE.

PLEASE GO AHEAD ANSWER YES.

OBVIOUSLY IF YOU'RE NOT USING ANY ASSISTIVE DEVICES PLEASE ANSWER NO.

WE'LL GIVE YOU A MINUTE OR SO FOR EVERYONE TO PARTICIPATE IN THIS  
QUESTION.

>> DR. MAJIT ARE YOU SEEING THE ANSWERS AS THEY ROLL IN THERE?

>> WE ACTUALLY HAVE 31 PEOPLE WHO HAVE ALREADY RESPONDED, THANK YOU FOR  
THOSE WHO RESPONDED.

I THINK WE CAN PROCEED, DR. BUTTARS.

>> LET'S GO TO THE SECOND POLL QUESTION.

DO YOU WANT TO GO AHEAD READ THAT?

>> SECOND QUESTION IS, IF YOU ARE NOT PRESENTLY WEARING A HEARING DEVICE  
COULD YOU LET US KNOW WHY THAT IS.

A, YOU DON'T HAVE ANY HEARING LOSS.

B, YOU MAY HAVE A HEARING LOSS BUT IT DOESN'T SEEM TO BE AFFECTING YOUR  
PERFORMANCE IN ANY KIND OF ENVIRONMENT EVEN IN NOISE ENVIRONMENT.

C, BECAUSE OF THE COST OF HEARING AID DEVICES.

D, BECAUSE YOU ARE CONCERNED ABOUT THE COSMETICS OF HOW IT LOOKS.

OR E, OTHER.

OTHER CAN ENCOMPASS A LOT OF OTHER DIFFERENT REASONS.

WE'LL TAKE A MINUTE AGAIN JUST TO LET YOU RESPOND AND I SEE THAT ABOUT 35 PEOPLE HAVE ALREADY RESPONDED, THANK YOU AGAIN FOR YOUR PARTICIPATION.

>> I THINK WE CAN MOVE ALONG.

>> THANKS FOR ANSWERING THOSE POLL QUESTIONS THERE.

I WANT TO TALK A LITTLE BIT ABOUT HEARING AS WE GET STARTED.

WHEN WE THINK ABOUT HEARING IT'S INTERESTING, I THINK MAJORITY OF PEOPLE THINK ABOUT HEARING IN TERMS OF WHAT WE CAN SEE ON THE OUTSIDE.

BUT AFTER WHAT WE CAN SEE AND BEYOND THAT THERE ARE A LOT OF SMALL STRUCTURES THAT HAVE TO WORK CORRECTLY FOR US TO BE ABLE TO HEAR AND HAVE NORMAL OR TYPICAL HEARING.

SOME OF THESE STRUCTURES INCLUDE THE EAR DRUM, THE MIDDLE EAR BONES LIKE THE MALLEUS, STAPES AND AFTER THAT ALSO AN OTHER AN OF HEARING CALLED THE COCHLEA.

THAT IS OFTEN AS SMALL AS FINGERNAIL ON YOUR PINKIE FINGER.

WITHIN THAT COCHLEA THERE ARE VERY SMALL AND DELICATE STRUCTURES THAT ARE REALLY IMPORTANT FOR US TO BE ABLE TO NOT ONLY HEAR BUT TO ALSO BE ABLE TO UNDERSTAND.

NOW THROUGHOUT THIS PRESENTATION I THINK IT'S IMPORTANT TO REALIZE THE DIFFERENCES BETWEEN HEARING AND PERCEIVING SOUND AND UNDERSTANDING AND ACTUALLY COMPREHENDING WHAT IS SAID.

WITHIN THIS HEARING SYSTEM, IF ANY OF THESE STRUCTURES HAPPENS TO BE DAMAGED OR SOMETHING GOES WRONG THEN WE OFTEN WILL HAVE SOME TYPE OF HEARING LOSS.

NOW THE DEGREE OF HEARING LOSS THAT PEOPLE HAVE AND HOW BAD IT IS WILL ACTUALLY CHANGE.

SOME PEOPLE WILL HAVE JUST A SMALL AMOUNT OF HEARING LOSS AND SOME PEOPLE WILL HAVE A GREATER DEGREE OF HEARING LOSS.

OFTENTIMES WITH THOSE GREATER DEGREES OF HEARING LOSS THE ABILITY THAT SOMEBODY HAS TO BE ABLE TO REALLY LISTEN AND COMPREHEND MAY START TO DEGRADE A LITTLE BIT AND THEY WILL HAVE EVEN HARDER TIME TRYING TO LISTEN AND BE ABLE TO COMMUNICATE IN THEIR ENVIRONMENTS.

WHEN WE THINK ABOUT THE HEARING SYSTEM IT DEFINITELY IS A SYSTEM.

WE HAVE OUR TWO EARS THAT ARE WORKING TOGETHER THEN WE ALSO HAVE OUR BRAIN.

NOW THIS SYSTEM IS AMAZING HOW IT WORKS.

HOW IT GIVES US THE ABILITY TO DO A NUMBER OF DIFFERENT THINGS.

LOOKING AT THE PROCESS OF THIS KIND OF SYSTEM AND HOW THIS WORKS FIRST OUR BRAINS ARE ABLE TO ORIENT OURSELVES WITHIN OUR ENVIRONMENT.

NOW WITH THIS ORIENTATION THERE'S SOMETHING THAT'S INTERESTING THAT I LIKE TO POINT OUT BECAUSE I THINK A LOT OF PEOPLE DON'T THINK ABOUT THIS.

BUT HAVE YOU EVER THOUGHT ABOUT HOW DOES IT WORK THAT YOU'RE ABLE TO UNDERSTAND AND LOCALIZE WHERE SOUND IS COMING FROM.

THE WAY THAT THIS WORKS OUR TWO EARS ARE ACTUALLY WORKING WITH OUR BRAIN TO BE ABLE TO DO THIS.

NOW IF I'M OUTSIDE IN MY GARDEN AND I'M WATERING SOME FLOWERS AND THERE'S A BIRD THAT CHIRPS FROM THE RIGHT-HAND SIDE.

THERE ARE DIFFERENT TIMING DIFFERENCES AND THERE ARE DIFFERENT LOUDNESS DIFFERENCES THAT HAPPEN BETWEEN THE TWO EARS AND OUR BRAIN CAN TAKE THAT INFORMATION TO BE ABLE TO UNDERSTAND AND ORIENT OURSELVES IN OUR ENVIRONMENTS.

ANOTHER THING THAT'S AMAZING THAT OUR BRAIN IS ABLE TO DO IS RECOGNIZE.

HAVE YOU EVER THOUGHT HOW INTERESTING IT IS THAT YOU HAVE THE ABILITY TO BE ABLE TO HEAR MAYBE SOMEBODY THAT YOU LIVE WITH, WHETHER IT'S YOUR



HUSBAND OR YOUR SON OR WHOEVER IT IS, THEN YOU CAN HEAR THE NEIGHBOR DOWN THE STREET AND YOU KNOW THAT THERE'S A DIFFERENCE. YOU CAN RECOGNIZE THAT PERSON.

OR EVEN RECOGNIZING THE DIFFERENCES BETWEEN YOUR FAVORITE SONG AND YOUR LEAST FAVORITE SONG.

WE ALSO HAVE THE ABILITY TO FOCUS AND THEN ALSO SEPARATE.

SO THESE TWO STEPS KIND OF COME TOGETHER.

BUT WHEN WE GET INTO VERY NOISY SITUATIONS WE HAVE THE TWO EARS WORKING TOGETHER WITH OUR BRAIN WE HAVE THE ABILITY TO BE IN THAT SITUATION AND TRY TO FOCUS ON WHAT WE WANT TO PAY ATTENTION TO.

MAYBE IT'S THE PERSON THAT WE'RE TALKING TO.

NOW OUR BRAIN HAS THE ABILITY TO TAKE THE INFORMATION FROM THE TWO EARS AND TRY TO FOCUS ON THAT THING THAT WE WANT TO PAY ATTENTION TO.

AND THEN SEPARATE THAT OUT FROM THE NOISE AND WHAT WE DON'T WANT TO PAY ATTENTION TO.

WITH ALL OF THIS YOU CAN ACTUALLY BE ABLE TO -- SOMEBODY HAS A HEARING LOSS THE ABILITY THAT THEY HAVE TO BE ABLE TO -- THEY DON'T HAVE THE ABILITY TO SEPARATE OUT OR TO RECOGNIZE AS WELL AS -- SHARON, I THINK SOMEBODY'S MUTE MAYBE WENT ON UNMUTE.

CAN YOU SEE IF THAT YOU CAN MUTE THAT?

PERFECT.

THANKS.

ALL RIGHT.

AS I WAS SAYING, SOMEBODY HAS A HEARING LOSS THE ABILITY TO START TO DO SOME OF THESE THINGS OR SOME OF THESE VERY IMPORTANT PROCESSES THAT STARTS TO KIND OF DEGRADATE.

A LOT OF TIMES MORE EFFORT HAS TO GO IN TO LISTENING TO BE ABLE TO COMPREHEND AND UNDERSTAND WHAT IS BEING SAID.

AND THAT'S ONE OF THE TOPIC WE'RE GOING TO BE TOUCHING ON IN SOME DETAIL IN THE NEXT FEW SLIDES.

ONE OF THE THINGS THAT I WANTED TO POINT OUT WITH THIS WE KNOW THAT HEARING LOSS IS NOT JUST HEARING LOSS.

THERE ARE A LOT OF THINGS, A LOT OF HEALTH ISSUES OR CONDITIONS THAT HAVE ACTUALLY BEEN ASSOCIATED WITH HEARING LOSS.

AND IT'S BECAUSE OF THAT THAT WE ALWAYS SAY THAT HEARING CARE IS HEALTH CARE.

I HAVE A QUICK VIDEO THAT I WANT TO JUST PLAY FOR YOU, I'M ACTUALLY GOING TO READ OUT THE WORDS AS THEY COME UP ON THE VIDEO.

SO LET ME PLAY THIS.

IT WILL TALK A LITTLE BIT ABOUT SOME OF THOSE LINKS WITH HEALTH CONDITIONS THAT HAVE BEEN LINKED TO HEARING LOSS.

HEARING CARE IS HEALTH CARE.

FACTS ABOUT HEARING LOSS.

TAKING CARE OF YOUR HEARING.

IS CARING FOR YOUR OVERALL HEALTH.

UNTREATED HEARING LOSS AFFECTS YOU IN MANY WAYS.

CONVERSATIONS, MENTAL TIREDNESS, SOCIAL ISOLATION, DEPRESSION.

HEART DISEASE, DEMENTIA, HEAR ARE A FEW ESSENTIAL FACTS ABOUT YOUR HEARING.

DID YOU KNOW THAT HEARING LOSS IS THE SECOND MOST COMMON HEALTH ISSUE IN THE WORLD.

THE BIGGEST CHALLENGE FOR PEOPLE WITH HEARING LOSS IS FOLLOWING CONVERSATION IN A NOISY ENVIRONMENT.

UNTREATED HEARING LOSS REQUIRES MORE EFFORT AND MENTAL ENERGY TO FOLLOW CONVERSATIONS.

LEAVING LESS MENTAL ENERGY FOR OTHER BRAIN FUNCTIONS LIKE REMEMBERING. ALL OF THIS CAN MAKE YOU FEEL TIRED AND WITH LESS ENERGY FOR SOCIAL ACTIVITIES.

ALL RIGHT.

THAT VIDEO GIVES US JUST A LITTLE BIT OF SOME INFORMATION ON WHAT OTHER THINGS, WHAT OTHER ISSUES HEARING LOSS HAS ACTUALLY BEEN LINKED TO. WE'LL TALK A LITTLE BIT MORE ABOUT THAT IN JUST A MOMENT.

BUT I THINK IT'S IMPORTANT TO POINT OUT THAT THE NUMBER OF PEOPLE WITH HEARING LOSS NOT JUST IN THE U.S. BUT ALSO IN THE WORLD, I THINK HEARING LOSS CAN BE SOMETIMES SOMEWHAT OF A DIFFICULT THING FOR PEOPLE, BECAUSE IT'S NOT SOMETHING THAT WE CAN USUALLY SEE.

SO BECAUSE OF THAT SOME PEOPLE WILL SUFFER FROM HEARING LOSS AND PEOPLE MAY NOT KNOW WHAT TYPES OF ACCOMMODATIONS MAY BE NICE OR THEY NEED TO PUT IN PLACE FOR INDIVIDUALS WITH HEARING LOSS TO HELP THEM TO BE ABLE TO BETTER UNDERSTAND CONVERSATIONS.

NOW IN THE VIDEO IT TALKED A LITTLE BIT ABOUT HOW HEARING LOSS IS THE SECOND MOST COMMON HEALTH CONDITION IN THE WORLD.

IF WE LOOK SPECIFICALLY AT THE U.S., IT IS THE THIRD LARGEST PUBLIC HEALTH ISSUE IN AMERICA.

THERE ARE ABOUT 40 MILLION AMERICANS THAT ACTUALLY ARE AFFECTED BY HEARING LOSS.

NOW THE WORLD HEALTH ORGANIZATION COMES OUT WITH UPDATED NUMBERS.

THEY LOOK AT THE GLOBAL BURDEN OF HEARING LOSS.

LAST TIME THEY CAME OUT WITH SOME NUMBERS IN 2018 THEY SAID THAT THERE ARE 466 MILLION PEOPLE WITH A DISABLING HEARING LOSS.

SO IF WE THINK ABOUT 466 MILLION PEOPLE THAT'S LARGER THAN THE POPULATION OF THE ENTIRE U.S., QUITE A BIT LARGER THAN OUR ENTIRE POPULATION.

SO THERE ARE A LOT OF PEOPLE WHO HAVE HEARING LOSS.

NOW WITH THAT, THOUGH, AGAIN WE KNOW THAT HEARING LOSS IS NOT JUST HEARING LOSS.

IT AFFECTS MANY OTHER THINGS.

TALK ABOUT SOME OF THESE THINGS, BUT TO JUST TOUCH ON SOME OF THEM AGAIN IN TERMS OF BEING ABLE TO ACTUALLY RECALL CONVERSATIONS.

THERE'S SOME RESEARCH THAT WE HAVE DONE I'M GOING TO TALK ABOUT A LITTLE LATER IN THE PRESENTATION BUT THAT BEING ABLE TO REMEMBER AND RECALL CONVERSATIONS IS SOMETHING THAT BEE LOOK AT BECAUSE WE HAVE LINKED THAT TO LISTENING EFFORT.

WE'LL TALK ABOUT THAT A LITTLE LATER WHEN WE GO OVER THE RESEARCH.

IT'S ALSO BEEN LINKED TO DEPRESSION AND DEMENTIA.

NOW THIS DEMENTIA PIECE I FEEL LIKE HAS BECOME A LITTLE BIT BIGGER AND MORE IMPORTANT IN TERMS OF RESEARCH THAT'S BEING DONE TO LOOK AT THIS.

NOW, A FEW YEARS AGO THERE WAS AN ARTICLE THAT CAME OUT IN THE LANSIT JOURNAL.

IT'S A VERY POPULAR WELL-KNOWN PUBLICATION IN THE MEDICAL FIELD.

AND IN THIS ARTICLE THEY ACTUALLY WANTED TO LOOK AT DEMENTIA.

THEY WERE LOOKING AT DEMENTIA PREVENTION, INTERVENTION AND ALSO CARE.

PART OF THIS STUDY THEY ACTUALLY FOUND THAT THERE WERE DIFFERENT RISK FACTORS FOR DEMENTIA.

65% OF THESE RISK FACTORS WERE NON-MODIFIABLE.

THERE WASN'T REALLY ANYTHING THAT COULD BE DONE ABOUT THIS 65%.

THERE WERE 35%, THERE WAS GROUP OF 35% THAT THEY WERE ACTUALLY MODIFIABLE RISK FACTORS THERE WAS POTENTIAL SOMETHING THAT COULD BE DONE ABOUT THESE MODIFIABLE RISK FACTORS.

WHEN THEY SAY THE 65% AND 35% THEY ACTUALLY BROKE THEM DOWN INTO A LIFE SPAN AND THEY ALSO BROKE THEM DOWN INTO DIFFERENT FACTORS.

ON THIS SCREEN YOU'RE LOOKING AT THESE DIFFERENT FACTORS THAT THEY HAVE COME UP WITH.

I WANT TO HIGHLIGHT THOSE DIFFERENT FACTORS FOR THOSE MODIFIABLE RISK FACTORS, THAT 35%.

LOOKING AT THIS SCREEN IF WE START HERE AT LESS EDUCATION, ALL THE WAY DOWN HERE THESE ARE OUR NINE KIND OF RISK FACTORS THAT ARE MODIFIABLE. IF YOU LOOK AT THE ONE HIGHLIGHTED IN PINK, THIS IS ACTUALLY HEARING LOSS.

SO HEARING LOSS IS MODIFIABLE RISK FACTOR OF DEMENTIA AND THIS 9% MAKES UP THAT LARGEST MODIFIABLE RISK FACTOR OF THE RISK -- OF THE MODIFIABLE RISK FACTORS OF THAT 35%.

THERE SOME ARE STUDY THAT STILL NEED TO BE DONE THIS IS SOMETHING THAT WE ARE LOOKING AT IN OUR FIELD.

HOW DO HEARING AIDS ACTUALLY HELP IN THIS AND WHAT DOES INTERVENTION WITH HEARING AIDS OR HEARING DEVICES DO IN TERMS OF HELPING WITH THIS.

NOW DR. MAJIT, WILL YOU HIGHLIGHT A COUPLE OF STUDIES THAT YOU FEEL ARE IMPORTANT LINKED TO THIS?

>> CERTAINLY, THANK YOU, DR. BUTTARS.

AS DR. BUTTARS MENTIONED THERE ARE MANY STUDIES THAT HAVE COME OUT OVER THE LAST FIVE YEARS.

I WOULD SAY NOT JUST FIVE OR SIX BUT WE'RE TALKING ABOUT 60, 70, 80 DIFFERENT STUDIES THAT HAVE LOOKED AT THE RELATIONSHIP BETWEEN HEARING LOSS AND COGNITIVE DECLINE LEADING TO THINGS LIKE DEMENTIA OR ALZHEIMER'S.

ONE OF THE STUDIES THAT IS MOST QUOTED WAS STUDY THAT WAS DONE OUT OF FRANCE IN 015.

IT WAS BY FAR THE LARGEST STUDY.

NAME OF THE STUDY WAS, SELF REPORTED HEARING LOSS, HEARING AIDS AND COGNITIVE DECLINE IN ELDERLY ADULTS.

THEY CONSIDERED 65 TO BE ELDERLY ADULTS WHICH I DEFINITELY DISAGREE WITH. I THINK THAT WAS WAY TOO YOUNG.

BUT THAT WAS JUST MY PERSONAL FEELING.

BUT, ANYWAY, THEY TOOK 3670 PEOPLE OVER THE AGE OF 65, WHICH IS AGAIN ONE OF THE LARGEST STUDIES THAT HAVE EVER BEEN DONE AND THEY FOLLOWED THEM -- BEEN FOLLOWING THEM OVER 5-YEAR PERIOD.

I WON'T GO INTO ALL THE DETAILS BUT I WILL READ THE CONCLUSION.

THE CONCLUSION WAS, HEARING LOSS IS ASSOCIATED WITH ACCELERATED COGNITIVE DECLINE IN OLDER ADULTS.

HEARING AIDS USE HELP SIGNIFICANTLY REDUCE THAT DECLINE.

THEY FOUND THAT PEOPLE WHO DID NOT WEAR HEARING AIDS AND REPORTED A HEARING LOSS DID HAVE ACCELERATED DECLINE IN THE PROCESSING ADULT.

HOWEVER, IF THERE WAS INTERVENTION BY WEARING A HEARING AID, THEY FOUND THAT DIFFERENCE BETWEEN PEOPLE WHO HAD NORMAL HEARING AND PEOPLE WHO WORE HEARING AIDS WAS INSIGNIFICANT.

SO THEY DID NOT DECLINE NEARLY AS QUICKLY AS THOSE PEOPLE WHO DIDN'T DO ANYTHING ABOUT THEIR HEARING LOSS.

AGAIN, IT WAS ONE OF MANY, MANY STUDIES THAT HAVE BEEN DONE.

I JUST WANTED TO POINT OUT SOMETHING, HOPEFULLY ALL OF YOU CAN SEE THE CLOSED CAPTION BUT MANY HAVE TO GO TO THE BOTTOM OF THE SCREEN, IT SHOULD

SAY "CLOSED CAPTION" YOU NEED TO CLICK ON THAT TO OPEN UP THE CLOSED CAPTIONS.

FOR THOSE OF YOU WHO NEED THE CLOSED CAPTION I WOULD STRONGLY RECOMMEND YOU DO THAT.

DR. BUTTARS, I'LL TURN IT BACK OVER TO YOU.

>> THANKS, DR. MAJIT.

TO SUMMARIZE THIS AGAIN WE LOOK AT HEARING LOSS NOT JUST AS HEARING LOSS AND WAY THAT IT MAY AFFECT COMMUNICATION.

BUT THERE ARE A LOT OF OTHER FACTORS THAT COME IN TO THIS AS WELL.

LET'S GO AHEAD DO OUR NEXT POLL QUESTION.

DR. MAJIT.

>> OKAY.

POLL QUESTION NUMBER THREE.

AGAIN WE THANK YOU FOR YOUR PARTICIPATION.

MORE INFORMATION WE CAN GET CERTAINLY HELPS US AS WELL.

THE QUESTION READS, WHICH SETTING HAVE YOU FOUND YOURSELF HAVING THE MOST DIFFICULTY HEARING AND UNDERSTANDING.

WHAT KIND OF SITUATION DO YOU FIND THAT IT IS MORE CHALLENGING TO BE ABLE TO NOT JUST HEAR BUT TO UNDERSTAND WHICH I THINK YOU ALL HAVE THAT -- KNOW DIFFERENCE BETWEEN HEARING SOUND AND UNDERSTANDING WHAT IS BEING SAID.

A, IS IT RESTAURANTS?

B, IS IT A GROUP.

C, IS IT IN THE CAR.

OR D, IS IT ONE ON ONE CONVERSATION WITH A FRIEND.

>> WHAT IS THE MAJORITY ANSWER THAT STREET COMING IN.

>> CERTAINLY A.

>> OKAY.

>> ACTUALLY MOST PEOPLE ARE ACTUALLY LISTING A, B AND C.

SO, A IS NUMBER ONE.

A AND B IS NUMBER TWO.

A, B AND C IS NUMBER THREE.

>> THANK YOU.

THANKS FOR ANSWERING THIS QUESTION.

I ASK THIS QUESTION I KNEW WHAT THE ANSWER WOULD BE.

IN THE VIDEO IT TALKED A LITTLE BIT ABOUT HOW LISTENING IN THESE SITUATIONS, IN THESE NOISY SITUATIONS IS THE NUMBER ONE MOST DIFFICULT THING FOR PEOPLE WHO ARE COMING IN TO CLINICS TRYING TO GET HELP WITH THEIR HEARING.

PLACES LIKE RESTAURANTS OR PLACES LIKE WHEN YOU'RE LISTENING INTO A GROUP.

I'M SURE YOU CAN THINK BACK TO YOUR LIFE EVEN MAYBE FOUR OR FIVE MONTHS AGO WHEN YOU WERE ACTUALLY GETTING TO GO OUT AND MAYBE INTERACT WITH PEOPLE.

HOW DIFFICULT SOME OF THESE SITUATIONS CAN BE.

I'M NOT SAYING THAT IF YOU GET HEARING AIDS THAT THIS IS GOING TO FIX EVERYTHING.

BECAUSE THESE SITUATIONS ARE STILL DIFFICULT.

I THINK ABOUT MYSELF I DO HAVE NORMAL OR TYPICAL HEARING.

I DON'T HAVE A HEARING LOSS.

THESE SITUATIONS ARE STILL OFTENTIMES VERY DIFFICULT FOR ME AS WELL AS INDIVIDUALS WITH HEARING LOSS.

WHEN THINKING ABOUT SOME OF THESE SITUATIONS AND JUST CONVERSATIONS IN GENERAL IN LIFE, LISTENING EFFORT IS ONE OF THE THING THAT INDIVIDUALS WITH HEARING LOSS ESPECIALLY ARE HAVING TO DEAL WITH.

NOW WHEN IT COMES TO LISTENING EFFORT, IF YOU THINK ABOUT YOUR DAILY LIFE, AGAIN MAYBE SOME MONTHS BACK SO BEFORE THINGS STARTED TO BE SHUT DOWN WITH COVID-19.

THERE WERE A LOT OF SITUATIONS WHERE MAYBE YOU HAD SOMETHING PLANNED IN THE DAY AND YOU WENT OUT WITH A FRIEND FOR BREAKFAST.

THEN YOU HAD SOMETHING PLANNED AT LUNCH.

BY THE TIME IT GETS TO THE EVENING, YOU ARE ABSOLUTELY EXHAUSTED IN TERMS OF CONGNITIVELY BECAUSE OF THIS HEARING LOSS.

THINKING ABOUT HEARING LOSS AND HOW IT KIND OF PLAYS A ROLE IN LISTENING EFFORT.

THERE ARE SOME STEPS THAT I'M GOING TO TALK THROUGH IN THE NEXT COUPLE OF SLIDES THAT HIGHLIGHT WHY LISTENING EFFORT IS SUCH A BIG THING ESPECIALLY FOR INDIVIDUALS WITH HEARING LOSS.

LOOKING AT LISTENING EFFORT THERE'S VERY INTERESTING WAY TO BE ABLE TO MEASURE LISTENING EFFORT.

NOW THERE WAS A STUDY THAT WAS DONE THAT WE DID A NUMBER OF YEARS AGO. I'M GOING TO HIGHLIGHT IN A FEW SLIDES.

WAY THAT WE LOOKED AT LISTENING EFFORT WAS THROUGH SOMETHING WE CALLED PUPILOMETRY THEY FOUND SOME YEARS BACK THAT YOU COULD MEASURE OBJECTIVELY THE AMOUNT OF EFFORT SOMEONE HAS TO PUT INTO LISTENING BY LOOKING AT THE PUPIL.

THEY COULD DO THAT BY MEASURING THE PUPIL DILATIONS.

HOW BIG IS IT GETTING THE LARGER THE PUPIL GETS THE MORE LISTENING EFFORT THAT HAS TO BE PUT INTO A TASK.

WE WERE ABLE TO MEASURE THIS OBJECTIVELY.

WE'LL TALK ABOUT WHAT THOSE RESULTS LOOK LIKE IN A FEW SLIDES.

ONE OF THE THINGS THAT'S VERY DIFFICULT FOR INDIVIDUALS WITH HEARING LOSS IS TO BE ABLE TO ACTUALLY ORGANIZE SOUNDS.

IT'S MUCH HARDER TO BE ABLE TO PAY ATTENTION TO WHAT I WANT TO PAY ATTENTION TO AND TO IGNORE THE NOISE THAT MAY BE COMING FROM ALL AROUND. AS HEARING LOSS STARTS TO GET WORSE THAT ABILITY TO REALLY SEPARATE OUT THOSE SOUNDS GETS A LITTLE BIT WORSE.

THINKING ABOUT THE PROCESS THAT HEARING LOSS TAKES ON TRYING TO LISTEN AND UNDERSTAND.

NUMBER ONE, YOUR BRAIN RECEIVES LESS INFORMATION.

AND REASON FOR THAT IS, AS SOON AS YOU HAVE A HEARING LOSS YOU START TO MISS OUT ON SOME OF THOSE SPEECH CUES.

HEARING LOSS USUALLY HAPPENS IN HIGHER FREQUENCY SOUNDS, MAYBE SS OR FS OR THS.

THAT IS WHERE A LOT OF CLARITY FOR SPEECH LIES.

IS YOU START MISS CAN OUT IT TAKES MORE FOR YOUR BRAIN TO TRY TO BE ABLE TO RECOGNIZE WORDS OR TO BE ABLE TO RECOGNIZE WHAT SOMEBODY MAY BE SAYING IN A SENTENCE.

NOW BECAUSE IT TAKES MORE EFFORT OR BECAUSE IT'S HARDER TO RECOGNIZE SOMETIMES PEOPLE HAVE TO TRY TO GUESS WHAT IS BEING SAID OR PUT EVEN MORE EFFORT INTO WHAT IS BEING SAID.

BY PUTTING MORE EFFORT INTO IT IT MAKES YOU HAVE TO CONCENTRATE HARDER.

SO PUTTING MORE LISTENING EFFORT INTO SOMETHING, BY THE END OF THE DAY IT CAN BE ABSOLUTELY EXHAUSTING.

BUT NOT ONLY IS IT EXHAUSTING, THERE'S SOMETHING ELSE THAT IS ALSO BEEN ATTRIBUTED TO THIS LISTENING EFFORT.

AND THAT IS BEING ABLE TO RECALL AND REMEMBER CONVERSATIONS.  
SO AS YOU'RE TALKING WITH SOMEBODY IF YOU HAVE TO PUT A LOT MORE EFFORT INTO LISTENING, THEN THE EFFORT THAT YOU COULD PUT IN TO REMEMBERING AND STORING CONVERSATIONS, THAT EFFORT IS PUT INTO LISTENING.  
AND SO YOU'RE NOT GOING TO BE ABLE TO REMEMBER CONVERSATIONS AS WELL AS MAYBE YOU ONCE DID WHEN YOU DIDN'T HAVE TO PUT ALL OF THIS EFFORT INTO LISTENING.  
SO RECALLING AND REMEMBERING CONVERSATIONS IS ANOTHER ASPECT THAT WE LOOK AT WHEN WE DO RESEARCH WITH HEARING AIDS ALONG WITH LISTENING EFFORT, BECAUSE THESE TWO THINGS REALLY DO GO HAND IN HAND.  
SO AGAIN I'LL SHOW YOU THOSE RESULTS IN JUST A FEW MINUTES.  
BUT ONE OF THE THINGS THAT WE LOOK AT AS A COMPANY, IF YOU THINK ABOUT ANY COMPANY, OAT CONIS NOT THE ONLY HEARING AID COMPANY, THERE ARE OTHER COMPANIES THAT ARE OUT THERE.  
NOW WITH ANY COMPANY THEY HAVE DIFFERENT FEATURES THAT ARE WITHIN HEARING AIDS.  
I'M NOT GOING TO TALK A LOT ABOUT THEM IN DETAIL.  
BUT THE DIFFERENT FEATURES ARE BASICALLY IN THE HEARING AID AND THAT IS HOW HEARING AID DECIDES HOW TO PROCESS SOUND.  
SO THE FEATURES ARE VERY IMPORTANT WHEN IT COMES TO BEING ABLE TO LISTEN AND TO UNDERSTAND AND TO COMPREHEND.  
NOW AT OTICON ONE OF THE THINGS THAT WE OFTEN TALK ABOUT IS BRAINHEARING. AND WITH THIS CONCEPT OF BRAINHEARING WE AS A COMPANY WANT TO BE ABLE TO CREATE DEVICES THAT CAN GIVE THE BRAIN WHAT IT NEEDS IN TERMS OF SOUND AND DO IT IN THE MOST NATURAL WAY POSSIBLE.  
SOUND QUALITY IS ALSO SOMETHING THAT IS VERY IMPORTANT TO US.  
BUT HOW CAN WE MAKE SURE TO BE ABLE TO GIVE THE BRAIN THE SPEECH CUES THAT IT NEEDS TO BE ABLE TO UNDERSTAND AND COMPREHEND.  
NOW WITHIN THE INDUSTRY ONE OF THE WAYS THAT MANY OF THE DIFFERENT HEARING AIDS OR DIFFERENT MANUFACTURERS TRY TO HELP PEOPLE HEAR BETTER IN NOISY SITUATIONS IS BY -- WITH THE HEARING AID MICROPHONES.  
THEY WILL CUT OFF WHATEVER IS COMING FROM THE SIDE AND BEHIND AND ONLY AMPLIFY WHAT IS COMING FROM IN FRONT.  
SO IF YOU LOOK AT THE SLIDE IN FRONT OF YOU, LET'S SAY THIS THIS GENTLEMAN HERE IS THE PERSON WEARING HEARING AIDS.  
WHAT THE HEARING AIDS WILL DO IS WHEN THIS PERSON GETS INTO A VERY NOISY SITUATION THE HEARING AIDS WILL ONLY PICK UP WHAT IS COMING FROM IN FRONT.  
THEY WILL CUT OFF WHAT IS COMING FROM THE SIDE OR BEHIND THE CONCEPT BEHIND THIS IS THAT TYPICALLY IF SOMEBODY IS EVERYTHING A CONVERSATION THEY'RE HAVING A CONVERSATION WITH WHOEVER IS IN FRONT OF THEM.  
SO THE HEARING AIDS ARE ONLY PICKING UP WHAT IS COMING FROM IN FRONT AND IGNORING ALL OF THE NOISE OR WHATEVER IS COMING FROM THE SIDE OR BEHIND LIKE YOU SEE IN THIS IMAGE.  
IF YOU THINK ABOUT INDIVIDUALS WITH NORMAL OR TYPICAL HEARING, WE HAVE ACCESS TO ALL OF THE SOUNDS THAT ARE COMING FROM AROUND ALL 360 DEGREES. AND THERE'S A LOT OF INFORMATION AND IMPORTANT THINGS THAT MAY BE HAPPENING FROM THE SIDE OR FROM BEHIND.  
IF A FRIEND COMES UP TO ME AND TRIES TO GET MY ATTENTION AND THEY'RE COMING UP TO ME FROM THE SIDE OR IF SOMEBODY IS BEHIND AND THEY WANT TO GET MY ATTENTION, ALL OF THESE THINGS ARE HAPPENING IN THIS VERY RICH ENVIRONMENT.  
SO AT OTICON ONE OF THE THINGS THAT WE DEVELOPED A NUMBER OF YEARS AGO WAS A WAY TO DO THIS DIFFERENTLY.

WHEN THESE INDIVIDUALS WHO WEAR THESE OTICON HEARING AIDS GET INTO DIFFICULT SITUATIONS, INSTEAD OF ONLY AMPLIFYING OR FOCUSING ON WHAT IS COMING FROM IN FRONT, WE FOUND A WAY TO BE ABLE TO MAKE SURE THAT WE CAN GIVE PATIENTS ACCESS, EVERYTHING THAT'S COMING AROUND THEM AND MAKING SURE THAT SPEECH HAS THE MOST EMPHASIS.

SO IF SOMEONE TRIES TO COME AND GET YOUR ATTENTION COMING FROM THE SIDE OR BEHIND YOU HAVE THE ABILITY TO BE ABLE TO RECOGNIZE THAT AND PAY ATTENTION TO THAT.

BECAUSE IT WAS SO DIFFERENT FROM WHAT WAS BEING DONE IN THE INDUSTRY WE DID A LOT OF RESEARCH ON THIS.

WE WANTED TO SEE WHAT KIND OF BENEFITS CAN SOMETHING LIKE THIS ACTUALLY GIVE INDIVIDUALS WHO ARE WEARING THESE HEARING AIDS USING THIS FEATURE. I ALREADY ALLUDED TO SOME OF THE RESEARCH THAT WE DO, WITH THE RESEARCH THAT WE DO ONE OF THE IMPORTANT THINGS FOR US IS TO TRY TO CONSIDER BRAINHEARING.

WITH THIS, WE LOOK AT SPEECH UNDERSTANDING, WE WANTED TO ALSO LOOK AT LISTENING EFFORT AND WAY THAT WE DID THAT WAS VIA THAT PUPILOMETRY MEASURE THAT I TALKED ABOUT THAT OBJECTIVE MEASUREMENT.

WE ALSO WANTED TO LOOK AT THIS AND LOOK AT MEMORY RECALL, BECAUSE LISTENING EFFORT AND MEMORY RECALL GO HAND IN HAND.

WHEN WE DO THIS RESEARCH STUDY WE ACTUALLY WANTED TO LOOK AT THE BEST HEARING AID THAT WE HAD ON THE MARKET AT THAT TIME COMPARE IT TO THIS NEW HEARING INSTRUMENT.

WHAT WE FOUND WAS THAT THESE PATIENTS WERE ABLE TO GET 30% BETTER SPEECH UNDERSTANDING, 0% LESS LISTENING EFFORT THEN THERE WAS 20% IMPROVEMENT IN RECALLING AND REMEMBERING CONVERSATIONS.

AND REMEMBERING CONVERSATIONS.

ANOTHER STUDY THAT WE DID WE WANTED TO TRY TO COMPARE THIS FEATURE AND HOW DO THESE INDIVIDUALS WITH HEARING LOSS PERFORM WHEN COMPARED TO INDIVIDUALS WITH NORMAL OR TYPICAL HEARING.

NOW IN THIS STUDY WHAT THEY DID IS THEY TOOK THESE TWO GROUPS OF INDIVIDUALS AND THEN THEY GAVE THEM OR THEY PUT THEM IN VERY DIFFICULT LISTENING SITUATIONS.

DOWN HERE ON THE BOTTOM OF THIS GRAPH YOU CAN SEE THAT IT SAYS, DB SNR WHAT THIS IS LOOKING AT IS SIGNAL-TO-NOISE RATIO.

SIGNAL IS WHAT I WANT TO LISTEN TO.

MAYBE THE PERSON THAT I'M HAVING A CONVERSATION WITH.

THE NOISE IS THE AMOUNT OF NOISE THAT'S AROUND.

IF YOU THINK ABOUT RESTAURANTS THAT YOU HAVE BEEN TO, IF YOU HAVE A CONVERSATION WITH A PERSON AND THAT PERSON IS MUCH LOUDER THAN THE NOISE AROUND IT'S A LOT EASIER TO UNDERSTAND.

BUT IF THE NOISE IS A LOT LOUDER THAN THE PERSON YOU'RE TRYING TO HAVE A CONVERSATION WITH, THAT'S A MUCH MORE DIFFICULT LISTENING SITUATION.

NOW LOOKING AT THE GRAPH DOWN HERE THAT'S EXACTLY WHAT THIS IS LOOKING AT.

SO IN AN AREA WHERE WE HAVE A HIGHER SIGNAL-TO-NOISE RATIO WHAT I WANT TO LISTEN TO IS MUCH LOUDER THAN THE NOISE, IT'S A LOT EASIER OF A LISTENING SITUATION.

NOW AS WE GO TO THE RIGHT, IN SITUATIONS LIKE RESTAURANTS OR LOUD VENUES OR IF YOU'RE WALKING DOWN THE STREET THERE'S A LOT OF ROAD NOISE.

THESE BECOME VERY DIFFICULT SITUATIONS BECAUSE THE NOISE MAY BE LOUDER THAN THE PERSON OR WHATEVER YOU'RE WANTING TO ACTUALLY LISTEN TO AND UNDERSTAND.

NOW IN THIS RESEARCH, WE FOUND THAT WITH THAT FEATURE THAT WE HAD CREATED, THESE INDIVIDUALS WITH HEARING LOSS WERE ACTUALLY ABLE TO PERFORM ON PAR WITH A GROUP OF NORMAL OR TYPICAL HEARING INDIVIDUALS IN THESE VERY, VERY DIFFICULT LISTENING SITUATIONS LIKE A RESTAURANT. NOW IN GETTING TO TALKING ABOUT HOW TO HEAR BETTER IN NOISE I'VE TALKED MULTIPLE TIMES DURING THIS PRESENTATION ABOUT HOW HEARING IN NOISE IS THE NUMBER ONE PROBLEM AND NUMBER ONE DIFFICULTY PEOPLE WILL HAVE WHEN THEY COME INTO CLINICS.

WITH THAT, THERE ARE A COUPLE OF THINGS TO CONSIDER.

NUMBER ONE I WOULD POINT OUT IS THE DIFFERENCE IN TECHNOLOGY LEVEL.

WE THINK ABOUT HEARING AIDS AND FOR THOSE OF YOU WHO ARE WEARING HEARING AIDS WHEN YOU WENT INTO THE CLINIC TO TRY TO DECIDE AND HAVE A CONVERSATION WITH YOUR HEARING CARE PROVIDER, THERE WERE DIFFERENT HEARING AIDS THAT THEY MAY HAVE TALKED TO YOU ABOUT.

MAYBE THEY DIDN'T.

BUT AS PART OF THIS, USUALLY IN ALL OF THE DIFFERENT MANUFACTURERS THERE ARE DIFFERENCE IN TECHNOLOGY LEVEL.

JUST LIKE IF YOU WENT TO THE STORE TO PURCHASE A PHONE, THERE ARE DIFFERENCES IN TERMS OF THE AMOUNT OF MEMORY YOU HAVE OR IN THE FEATURES THAT ARE AVAILABLE.

SO THIS IS THE CASE WITH ALMOST ANYTHING THAT WE HAVE IN LIFE IT SEEMS.

BUT WHEN WE LOOK AT THE DIFFERENCE IN TECHNOLOGY LEVEL IN HEARING INSTRUMENTS, ONE OF THE BIGGEST DIFFERENCES IS HOW YOU'RE GOING TO BE ABLE TO PERFORM AND DEAL WITH NOISY SITUATIONS.

WHEN WE LOOK AT HIGHER LEVELS OF TECHNOLOGY, USUALLY THOSE HIGHER LEVELS OF TECHNOLOGY WILL DO A BETTER JOB TO BE ABLE TO BRING OUT SPEECH IN CONVERSATION AND ALSO DO A BETTER JOB OF CUTTING DOWN OR NOT AMPLIFYING NOISE.

WHEN THIS HAPPENS THE INDIVIDUALS WHO ARE WEARING HIGHER LEVELS OF TECHNOLOGY WILL USUALLY BE ABLE TO PERFORM BECAUSE THEY CAN UNDERSTAND AND HEAR A LITTLE BIT BETTER IN THESE SITUATIONS OR IN COMMUNICATION.

DR. MAJIT DO YOU WANT TO SAY ANYTHING ABOUT THIS?

>> CERTAINLY, THANK YOU.

AS DR. BUTTARS MENTIONED, WHEN YOU LOOK AT DIFFERENT LEVELS OF TECHNOLOGY ONE OF THE MAIN REASONS ONE WOULD MAYBE NOT DECIDE ON THE BEST TECHNOLOGY, IN THIS CASE THE OPEN S1 IS BECAUSE OF FINANCES.

WE REALIZE AS PROFESSIONALS THAT OUR STANDARD OF CARE, WHAT WE'D LIKE TO FIT EVERYONE WITH IS THE VERY BEST TECHNOLOGY TO PROVIDE THE MOST IMPROVEMENT IN COMMUNICATION SKILLS.

BUT THERE ARE OTHER CONSIDERATIONS FOR INDIVIDUALS.

THAT'S WHY IT'S IMPORTANT TO GO TO A PROFESSIONAL AUDIOLOGIST AND REALLY MAKE SURE THAT YOU HAVE A FRANK CONVERSATION ON WHAT YOUR NEEDS ARE AND WHAT YOU'RE WILLING TO SPEND ON HEARING AIDS.

AS DR. BUTTARS MENTIONED THERE IS A HOST OF PRODUCTS, THERE'S ACTUALLY NEW PRODUCT THAT OTICON JUST INTRODUCED CALLED THE RUBY 1 AND RUBY 2 WHICH ARE EXCELLENT PRODUCTS.

THE BIGGEST DIFFERENCE IS REALLY THE AMOUNT OF IMPROVEMENT THAT YOU'RE GOING TO GET IN BACKGROUND NOISE.

AGAIN THIS IS A DISCUSSION THAT YOU NEED TO HAVE WITH YOUR PROFESSIONAL, THAT'S WHY IT'S SO IMPORTANT TO PICK THE RIGHT INDIVIDUAL, BECAUSE YOU CAN BE FIT WITH THE BEST HEARING AID IN THE WORLD AND SPEND THOUSANDS OF DOLLARS BUT IF THE PROFESSIONAL YOU SEE REALLY IS NOT AS EXPERIENCED AS THEY SHOULD BE YOU'RE NOT GOING TO DO AS WELL.



ALONG WITH TECHNOLOGY IS THE INDIVIDUAL THAT YOU GO TO SEE FOR YOUR HEARING NEEDS.

WE'LL DISCUSS THAT A LITTLE LATER IN OUR QUESTION AND ANSWER PERIOD. BUT WE'RE VERY FORTUNATE TO HAVE DR. GRAMA JOIN US WHO I THINK MANY OF YOU KNOW WHO IS SOMEONE WHO HAS FANTASTIC EXPERIENCE AND WE RELY ON FOR HIS FEEDBACK WITH OUR PRODUCTS.

>> THANKS, DR. MAJIT, I'LL LET YOU STAY ON HERE WE'RE GOING TO DO OUR LAST POLL QUESTION IF YOU GO AHEAD AND READ THAT.

>> OKAY.

LAST BUT NOT LEAST, IF YOU USE HEARING DEVICES, DO YOU USE AN APP TO CONTROL -- WHAT IS AN APP ON YOUR PHONE WHICH YOU CAN DOWNLOAD, HOPEFULLY MANY OF YOU DO HAVE SMART PHONES ARE FAMILIAR WITH APPS.

DO YOU USE AN APP TO CONTROL YOUR HEARING DEVICE VOLUME, PROGRAMS, ET CETERA?

MEANING THAT RATHER THAN HAVING TO REACH UP TO THE HEARING AID TO CHANGE THE VOLUME OR IF YOU HAVE MORE THAN ONE PROGRAM YOU CAN DO THAT ON YOUR PHONE.

IF YOU CAN ANSWER A, YES.

OR B, NO.

THAT WILL AGAIN PROVIDE US SOME GOOD INFORMATION.

>> LET ME KNOW WHAT IS THE OVERALL ANSWER?

>> CERTAINLY.

IT LOOKS LIKE IT'S A COMBINATION.

LOOKS ALMOST 50-50, A AND B.

SOME PEOPLE DO HAVE A CI SO THEY DON'T HAVE AN APP AVAILABLE TO THEM.

>> THANK YOU.

ONE OF THE REASONS WHY I ASKED THIS QUESTION, KIND OF WHY I WANT TO GO DOWN THIS ROUTE OF CONNECTIVITY AND BLUETOOTH IN TALKING ABOUT THIS IS WHEN WE LOOK AT THINGS LIKE THE APP OR OTHER PIECES OF CONNECTIVITY, SOMETIMES THESE CAN HELP AN INDIVIDUAL DO BETTER IN LISTENING IN DIFFERENT ENVIRONMENTS OR IN DIFFERENT CONVERSATIONS.

WITH THE MOST MAJORITY -- WITH THE MAJORITY OF MANUFACTURERS WHO MANUFACTURE HEARING AIDS I WOULD SAY THAT PROBABLY ALMOST ALL OF THEM AT THIS TIME HAVE AN APP.

NOW DR. MAJIT SAID SOME INDIVIDUALS ON THIS CALL HAVE CIS.

BUT WITH THE HEARING DEVICES I WOULD SAY THE MAJORITY, IF NOT ALL HAVE AN APP.

NOW WITH THIS APP IT'S USUALLY SOMETHING FREE THAT YOU CAN DOWNLOAD ON YOUR PHONE THAT GIVES YOU THE ABILITY TO CHANGE THE VOLUME OR TO BE ABLE TO CHANGE TO DIFFERENT PROGRAMS.

NOW WITHIN DIFFERENT APPS THERE ARE ALSO DIFFERENT THINGS THAT DIFFERENT MANUFACTURERS MAY PUT IN TO AN APP.

FOR INSTANCE, WITHIN OTICON'S APP WE HAVE A LITTLE FUNCTION THAT YOU CAN USE THAT IF YOU LOSE YOUR HEARING AIDS, YOU CAN ACTUALLY USE THAT TO TRY TO BE ABLE TO FIND THEM AND TRACK THEM DOWN.

SO THERE ARE A LOT OF NEAT THINGS THAT ARE WITHIN AN APP THAT IF YOU DON'T USE IT I WOULD ENCOURAGE YOU TO AT LEAST EXPLORE IT AND SEE IF IT'S SOMETHING THAT MAY BENEFIT YOU.

IN TERMS OF IF YOU'RE IN A SITUATION WHERE YOU WANT A LITTLE MORE VOLUME OUT OF YOUR HEARING AIDS, BEING ABLE TO PULL SOMETHING OUT LIKE YOUR PHONE WITH THE APP TO BE ABLE TO DO THAT DISCRETELY CAN BE SOMETHING THAT'S REALLY NICE.

NOW THE OTHER THING WITH THIS, WHEN WE THINK ABOUT DIFFICULTY HEARING IN NOISE, AS I MENTIONED BEFORE, HEARING AIDS ARE NOT GOING TO BE ABLE TO SOLVE EVERY PROBLEM.

HEARING AIDS CAN MAKE SOUNDS LOUDER AND THESE FEATURES CAN DO A GOOD JOB OF PROCESSING THE SOUNDS.

BUT IT DOESN'T MEAN THAT YOU'RE ALWAYS STILL GOING TO BE ABLE TO UNDERSTAND EVERYTHING.

NOW THAT'S THE CASE EVEN WHEN YOU GET INTO THESE NOISY SITUATIONS.

THERE ARE PIECES OF CONNECTIVITY THAT HAVE BEEN DEVELOPED IN ALL OF THE MANUFACTURERS THEY HAVE THESE DIFFERENT PIECES OF CONNECTIVITY THAT ARE MEANT TO BE ABLE TO HELP SUPPORT YOU IN DIFFERENT ENVIRONMENTS.

OTICON WE HAVE A DEVICE CALLED THE CONNECT CLIP IT CAN DO A NUMBER OF DIFFERENT THINGS.

THING THAT I WANT TO TALK ABOUT IS IT HAS SOMETHING CALLED, REMOTE MICROPHONE CAPABILITY.

NOW WITH THIS, WHAT YOU DO IS YOU TAKE THIS DEVICE AND ACTUALLY GIVE IT TO SOMEBODY AND ON HERE THERE'S A LITTLE MICROPHONE.

WHAT THIS DEVICE DOES IS IT CAN PICK UP THAT PERSON'S VOICE AND THE VOICE WILL BE TRANSMITTED DIRECTLY INTO THE HEARING AIDS.

NOW WHAT THIS DOES IT GIVES YOU THE ABILITY TO HAVE THE VOICE DIRECTLY COME INTO THE HEARING AIDS SO YOU DON'T HAVE TO DEAL WITH AS MUCH NOISE OR WITH THESE DIFFICULT TYPES OF SITUATIONS.

SO HAVING A REMOTE MICROPHONE -- REMOTE MICROPHONE THAT YOU USING MAKE IT A LOT EASIER FOR YOU TO BE ABLE TO HEAR AND TO UNDERSTAND.

WE ALSO HAVE WHAT WE CALL A TV BOX.

NOW WHEN INDIVIDUALS COME INTO THE CLINICS WITH THEIR FAMILY MEMBERS, ONE COMPLAINT THAT WE WILL OFTEN ALSO SEE IS THAT AS PEOPLE ARE WATCHING TV, INDIVIDUALS WHO MAY USE HEARING AIDS OR HAVE HEARING AIDS OR EVEN THOSE THAT ARE NOT USING HEARING AIDS BUT HAVE HEARING LOSS OFTENTIMES WANT TO WATCH THE TV AT A LITTLE BIT OF A LOUDER VOLUME THAN WHAT EVERYBODY ELSE IN THE ROOM WANTS TO WATCH.

ONE OF THE THINGS THAT YOU CAN ACTUALLY UTILIZE IS THIS TV BOX.

WHAT IT DOES IS IT WILL TAKE THE INFORMATION FROM THE TELEVISION AND STREAM IT DIRECTLY INTO THE HEARING AIDS.

NOW BY DOING THAT, EVERYBODY ELSE IN THE ROOM CAN WATCH THE TV AT A VOLUME THAT THEY WANT TO WATCH AND THEN YOU HAVE THE ABILITY TO LISTEN TO THE TV AT VOLUME THAT YOU WANT AS WELL.

YOU HAVE THE ABILITY TO BE ABLE TO CHANGE THAT AS WELL.

SO THIS IS A NICE PIECE OF CONNECTIVITY THAT CAN HELP AND AID IN THAT.

THIS IS -- THESE TWO PIECES OF CONNECTIVITY ARE NOT THE ONLY PIECES OF CONNECTIVITY THAT WE HAVE AT OTICON.

THERE ARE A LOT OF THINGS THAT WE HAVE CREATED THAT I LIKE TO THINK ABOUT AS SUPPLEMENTAL DEVICES TO THE HEARING AIDS THAT CAN MAKE SOME OF THESE SITUATIONS EASIER FOR YOU TO BE ABLE TO HEAR AND UNDERSTAND IN.

COUPLE MORE THINGS THAT I JUST WANTED TO POINT OUT.

WHEN I WAS GOING THROUGH GRAD SCHOOL ABOUT SIX OR EIGHT YEARS AGO, RECHARGEABILITY WAS NOT VERY BIG THING WITHIN THE INDUSTRY.

THERE WAS SOME PATIENTS THAT WERE WANTING IT, SOME PATIENTS WERE NOT.

BUT RECHARGEABILITY AT THAT TIME WAS NOT WHERE IT IS NOW IN TERMS OF THE STANDARDS THAT WE HAVE.

WITH RECHARGEABILITY THIS IS EXPLODED I WOULD SAY, ESPECIALLY OVER THE PAST FOUR OR FIVE YEARS.

WITH RECHARGEABILITY, NOW YOU HAVE THE ABILITY TO BE ABLE TO HAVE VERY QUICK CHARGE TIME FOR THE HEARING AIDS.

SO, FOR INSTANCE, WITH OUR DEVICES THEY CAN CHARGE FOR ABOUT THREE HOURS YOU WOULD GET ABOUT 24 HOURS OF USE OUT OF THEM.

IN TERMS OF THE WAY THAT THE CELL FUNCTIONS IT WILL ACTUALLY STAY PRETTY GOOD FOR A NUMBER OF YEARS, IT'S NOT SOMETHING THAT YOU HAVE TO SWITCH OUT EVERY SIX MONTHS.

IT CAN STAY GOOD AND FUNCTIONING WELL FOR A NUMBER OF YEARS.

WITH CONNECTIVITY WE ALSO HAVE PIECES -- LOOKING AT THE CHARGER, ABILITY TO BE ABLE TO CHARGE THE DEVICE ALSO IN A MORE DISCRETE WAY.

ONE LAST THING THAT I WANT TO TALK ABOUT AS SHARON KIND OF ALLUDED TO AT THE BEGINNING OF THIS CALL, COVID-19 HAS MADE THINGS DIFFICULT FOR MANY PEOPLE.

WITHIN THE HEALTH CARE INDUSTRY SOMETHING CALLED TELEHEALTH ARE BEING ABLE TO COMMUNICATE WITH YOUR PROVIDER, WHETHER IT'S YOUR HEARING HEALTH CARE PROVIDER OR EVEN ANOTHER TYPE OF DOCTOR OR PRACTITIONER, TELEHEALTH HAS BECOME SOMETHING THAT'S MUCH MORE POPULAR.

NOW SOME INDIVIDUALS LIKE TELEHEALTH AND WANT TO BE ABLE TO UTILIZE THIS AND SOME INDIVIDUALS WOULD RATHER SEE SOMEBODY IN PERSON.

NOW THINKING ABOUT TELEHEALTH IN GENERAL WHAT IT CAN PLAY A ROLE IN ESPECIALLY RIGHT NOW WITH COVID-19, YOU HAVE THE ABILITY TO ACTUALLY BE ABLE TO LINK UP WITH YOUR HEARING CARE PROVIDER.

NOW AT OTICON, THIS TELEHEALTH SOLUTION WAS SOMETHING THAT WE LAUNCHED ONLY ABOUT FOUR MONTHS AGO.

WHEN COVID-19 STARTED WE LAUNCH UNDERSTAND OUT INTO THE MARKET.

THIS IS AN IMPORTANT THING BECAUSE YOU HAVE THE ABILITY TO BE ABLE TO CONNECT UP WITH YOUR HEARING CARE PROVIDER IF YOU ARE USING OTICON HEARING AIDS AND THEY CAN MAKE ADJUSTMENTS TO YOUR HEARING AIDS.

INSTEAD OF HAVING TO GO INTO A CLINIC AND RISK MAYBE BEING BY A NUMBER OF DIFFERENT PEOPLE YOU HAVE THE ABILITY TO BE ABLE TO HAVE THESE FINE TUNING PROCEDURES DONE OR TO BE ABLE TO BE ABLE TO LINK UP WITH THAT HEARING CARE PROVIDER TO GET YOUR QUESTIONS ANSWERED AND ALSO TO GET THE HEARING AIDS FINE TUNED A LITTLE BIT BETTER.

WITH THE MOST OF THE HEARING AID MANUFACTURERS, IF SOME OF YOU ARE WEARING HEARING AIDS AND THEY'RE NOT OTICON, MANY OF THE OTHER MANUFACTURERS ALSO HAVE THE ABILITY TO DO THIS TELEHEALTH TYPE SYSTEM.

SO IF YOU WERE WANTING TO GO SEE YOUR HEARING CARE PROFESSIONAL MAYBE FOUR OR FIVE MONTHS AGO AND COVID-19 HIT AND IT HAS MADE IT SO YOU CAN'T VISIT THESE PEOPLE, THAT'S SOMETHING THAT I WOULD ASK IF THEY HAVE -- IF YOU ARE HAVING PROBLEMS WITH YOUR HEARING AIDS THAT YOU WANT TO MAYBE BE ABLE TO HAVE LOOKED AT.

JUST TO SUMMARIZE KIND OF WHAT WE'VE TALKED ABOUT BEFORE WE GO INTO THE QUESTION AND ANSWER, I'LL TURN TIME OVER TO DR. MAJIT AFTER THIS SLIDE.

THINKING ABOUT SOME OF THE THINGS WE'VE TALKED ABOUT TODAY, NUMBER ONE WE KNOW THAT HEARING CARE IS HEALTH CARE.

THAT'S ONE OF THE MAIN MESSAGES THAT I WANT YOU TO HAVE AS A TAKE-HOME BECAUSE HEARING CARE REALLY IS HEALTH CARE.

HEARING IS NOT JUST LINKED TO BEING ABLE TO UNDERSTAND OR THINKING ABOUT HEARING LOSS AND DOING POORER JOB BEING ABLE TO LISTEN AND UNDERSTAND IN CONVERSATIONS BUT WE KNOW THAT HEARING LOSS IS LINKED TO A NUMBER OF OTHER THINGS.

SO WHEN THINKING ABOUT HEARING LOSS WE NEED TO MAKE SURE OR PEOPLE NEED TO MAKE SURE THAT THEY'RE ON TOP OF THAT.

AND IF THEY DO HAVE A HEARING LOSS TO SEE THEIR HEARING HEALTH CARE PROFESSIONAL.

WITH HEARING HEALTH CARE PROFESSIONALS THERE ARE A LOT OF TOOLS THAT THEY HAVE IN THEIR TOOL BELT TO BE ABLE TO TRY TO LOOK AT THE SOLUTION FIGURE OUT WHAT MAY BE ABLE TO BEST HELP YOU NOT ONLY IN TERMS OF HEARING DEVICES BUT ALSO LOOKING AT THOSE DIFFERENT PIECES OF CONINCOME TIFT THAT I TALKED ABOUT AND HOW CAN THEY MAKE CERTAIN SITUATIONS IN YOUR LIFE BASED ON YOUR LIFESTYLE MAKE THOSE SITUATIONS A LITTLE BIT EASIER FOR YOU TO BE ABLE TO HEAR.

AND TO BE ABLE TO UNDERSTAND.

NOW WITH THAT I WANT TO TURN THE TIME OVER TO DR. MAJIT.

>> THANK YOU, DR. BUTTARS.

THANK YOU FOR THE EXCELLENT PRESENTATION.

BEEF GOTTEN A LOT OF VERY GOOD QUESTIONS AND COMMENTS ON THE CHAT.

I'M GOING TO ADDRESS JUST A FEW OF THEM.

BEFORE I DO I DO WANT TO EMPHASIZE SOMETHING THAT IS -- BOTH DR. BUTTARS AND I FEEL IS VERY IMPORTANT ARE T-COILS.

WE FEEL THAT YOU CAN GET EXCELLENT HEARING AID BUT IT'S SO IMPORTANT TO HAVE A T-COIL BECAUSE MORE AND MORE FALL SILTS, MEETING ROOMS, THEATERS, ARE BEING LOOPED FOR T-COILS.

AND HAVING A HEARING AID THAT HAS THAT FEATURE IS SOMETHING YOU SHOULD ALWAYS ASK FOR, IN MY OPINION.

AS FAR AS OTICON IS CONCERNED, ALL OF THE TECHNOLOGIES FROM THE HIGHEST COST TO LOWEST HAVE T-COILS AVAILABLE IN THEM.

THE OTHER THING IS THAT ONE OF THE QUESTIONS WAS, ABOUT RECHARGEABILITY, RATHER THAN USING DISPOSABLE BATTERIES, DR. BUTTARS ADDRESSED THE ISSUE THAT RECHARGEABILITY IS BECOMING MORE AND MORE POPULAR.

WE SEE ABOUT 70% OF THE HEARING AIDS ORDERED THESE DAYS, THEY ARE ASKED TO HAVE RECHARGEABILITY AVAILABLE.

AND THOSE ARE NOT JUST IN THE HIGHEST COST BUT YOU CAN GET RECHARGEABILITY EVEN IN THE LOWEST COST INSTRUMENT.

THAT IS A FEATURE THAT YOU SHOULD DISCUSS WITH YOUR PROFESSIONAL IF THAT IS THE RIGHT DECISION THAT YOU SHOULD MAKE.

AS WAS MENTIONED ESPECIALLY CAN COVID, WEARING MASKS MAKES COMMUNICATION THAT MUCH MORE DIFFICULT.

ONE OF YOU ASTUTE PEOPLE ALSO MENTIONED THAT WHOLE IDEA OF BEING SIX FEET APART NOW TO BE SAFE ADDS TO THAT DIFFICULTY BECAUSE AS WE ALL KNOW THE FURTHER THE SOUND SOURCE IS FROM YOU THE MORE DIFFICULT IT IS TO HEAR AND EVEN MORE IMPORTANTLY TO UNDERSTAND.

AGAIN, WE ARE GOING TO OPEN IT UP NOW FOR QUESTIONS AND ANSWERS TO EVERYONE OUT THERE.

YOU CAN DO IT AT THE CHAT OR YOU CAN ACTUALLY UNMUTE YOUR MICROPHONE AND WE CAN HAVE YOU ADDRESS THE QUESTION THAT WAY.

I WILL INVITE DR. GRAMA TO PARTICIPATE IN THIS PORTION OF THE PRESENTATION.

WHY DON'T WE GO AHEAD START TAKING QUESTIONS.

>> I HAVE SOME QUESTIONS THAT WERE WRITTEN OUT.

I DON'T SEE ANY RAISED HANDS YET ON THE PARTICIPANT BOX BUT I HAVE A FEW QUESTIONS THAT WERE ASKED THROUGHOUT THE PRESENTATION.

>> THAT'S GREAT.

>> MAYBE I'LL START WITH A FEW OF THOSE THEN IF PEOPLE WANT TO EITHER PHYSICALLY RAISE THEIR HAND OR RAISE THEIR HAND IN THE PARTICIPANT BOX WE CAN ADDRESS THOSE.

>> PERFECT.

>> THE FIRST WAS RUTH, SAYS HLAA SAYS 45 MILLION PEOPLE IN THE U.S. WITH HEARING LOSS YOU SAY 40 MILLION, WHY THE DISCREPANCY.

ONE OF OUR PARTICIPANTS RESPONDED TO MAYBE BECAUSE THERE ARE FIVE MILLION DEAF PEOPLE THAT COULD BE THE DISCREPANCY.

I KNOW THESE NUMBERS CHANGE AND ARE PRETTY FLUID.

>> THAT'S A GREAT QUESTION.

I'M SURE IT PROBABLY DEPENDS ON WHERE THE SOURCE COMES FROM AND WHO HAS THE MOST UPDATED SOURCE AS WELL.

IF YOU WANTED TO SEND IN WHAT THAT SOURCE IS WHERE HLA GETS THAT INFORMATION I CAN ALSO LOOK AT OUR SOURCE AND SEE WHY THERE IS THAT DISCREPANCY.

>> THOSE ARE JUST SIMPLY ESTIMATES.

>> THAT'S TRUE.

THERE'S NO WAY WE COULD ACTUALLY PINPOINT AN EXACT NUMBER JUST LIKE WITH THE WORLD HEALTH ORGANIZATION HOW THEY ARE MAKING --

>> CHALESE WAS FROZEN.

>> THE NEXT WAS, HOW DOES UNTREATED HEARING LOSS AFFECT HEART DISEASE?

>> YOU HAVE INCREASED STRESS LEVELS WHEN YOU CAN'T COMMUNICATE YOU ARE CONSTANTLY STRAINING TO MAKE YOUR WAY THROUGH THINGS.

ALSO BY ISOLATION, YOU ARE GOING TO HAVE HIGHER STRESS LEVELS.

STRESS CAUSES HEART DISEASE.

IT RACES BLOOD PRESSURE, DOES ALL SORTS OF THINGS.

>> THAT MAKES SENSE.

ARE THERE ACTIVITIES OR EXERCISES THAT PEOPLE WITH HEARING LOSS CAN DO TO IMPROVE THEIR MEMORY FUNCTION OTHER THAN WEARING HEARING AIDS?

>> CERTAINLY YOU CAN DO THINGS THAT ARE TAXING YOUR BRAIN.

CROSSWORD PUZZLES, SADUKU, ANYTHING THAT IS NOT EASY TO DO.

WILL MAKE YOU UTILIZE AREAS OF YOUR BRAIN THAT YOU'RE NOT TYPICALLY USING.

SO THE MORE YOU CHALLENGE YOURSELF, THE MORE NEURAL CONNECTIONS WILL BE MODIFIED AND BETTER YOU'RE GOING TO PERFORM.

>> MY QUESTION FOR THE OTICON REP, WHAT IS THE ORIENTATION AND HOW MANY TURNS OF COPPER WIRE ON THE T-COIL IN THE OTICON OPN HEARING AIDS.

>> DR. MAJIT, DO YOU KNOW THE ANSWER TO THAT ONE?

>> HONESTLY, I DON'T KNOW THE SPECIFIC AMOUNT OF COPPER WIRING OR THE TURNS.

I KNOW THAT OBVIOUSLY THE LARGER THE HEARING AID SIZE THE MORE POWERFUL THE T-COIL CAN BE.

SO IF YOU'RE LOOKING AT SOME OF OUR BEHIND THE EAR HEARING AIDS THAT FOR SEVERE, SEVERE TO PROFOUND LOSSES YOU'RE GOING TO HAVE MUCH STRONGER T-COIL THAN YOU WILL FOR MUCH SMALLER HEARING AIDS.

BUT THE SMALLER HEARING AIDS ARE TYPICALLY DESIGNED FOR MORE MILD TO MODERATE HEARING LOSS.

YOU DON'T NEED AS MUCH POWER IN THOSE INSTRUMENTS.

I APOLOGIZE FOR NOT KNOWING THE EXACT LENGTH OF THE COPPER WIRING, BUT I CAN CERTAINLY FIND THAT OUT.

>> THE THING THAT IS REALLY WILL TAKE CARE OF THIS IS THE AMPLIFIER AND RECEIVER THAT YOU HAVE ON THE HEARING AIDS.

THE COIL ITSELF DOESN'T NEED TO BE INCREDIBLY POWERFUL WHEN THE SOUND IS ACTUALLY BEING CHANNLED THROUGH THE AMPLIFIER AND THE RECEIVER.

>> SURE.

>> THANK YOU.

OUR NEXT QUESTION, WHAT IF THE PERSON IN THE NEXT BOOTH IN A RESTAURANT IS LOUDER THAN YOUR COMPANION AND YOU CAN UNDERSTAND EVERY WORD THEY'RE SAYING BUT YOUR COMPANION IS DROWNED OUT.

>> AS DR. BUTTARS MENTIONED WE HAVE IN THE OTICON INSTRUMENT IN MANY OF THE INSTRUMENTS, NOT ALL LEVELS OF TECHNOLOGY, WE HAVE SOMETHING CALLED THE OPEN SOUND NAVIGATOR.

SO THAT SYSTEM WILL LOOK AT THE BACKGROUND NOISE AND EVEN SPEECH BABBLE, WHICH SPEECH FROM A DISTANCE IS CONSIDERED SPEECH BABBLE.

SO THE PROFESSIONAL HAS ADJUSTMENTS SO THEY CAN REDUCE SOUNDS COMING FROM A DISTANCE AND EMPHASIZE THE PERSON WHO IS SITTING RIGHT ACROSS FROM YOU. THAT IS A MAJOR COMPLAINT IN RESTAURANTS THAT I'M HEARING PEOPLE TEN FEET AWAY AT A TABLE LOUDER THAN I'M HEARING THE PERSON ACROSS FROM ME.

ALL HEARING AIDS ARE WIDE DYNAMIC RANGE COMPRESSION HEARING AIDS. THEY'RE GOING TO AMPLIFY SOFTER SOUNDS LOUDER THAN THEY'RE GOING TO AMPLIFY LOUDER SOUNDS THAT IS GOOD IN SOME SITUATIONS BUT IN DIFFICULT, NOISY ENVIRONMENTS THAT'S NOT WHAT YOU WANT TO DO.

SO WITH THIS OPEN SOUND NAVIGATOR FEATURE YOU CAN SET IT SO DISTANCE SOUNDS ARE NOT AMPLIFIED AS MUCH AS THE PERSON WHO IS SITTING RIGHT ACROSS FROM YOU.

THAT TENDS TO SOLVE THE ISSUE 95% OF THE TIME.

>> IN ADDITION IF YOU USE THE CLIP YOU CAN ACTUALLY MUTE THE SOUNDS THROUGH THE HEARING AIDS AND JUST HAVE SOUND COMING DIRECTLY THROUGH THE CONNECT CLIP BY THE SPEAKER THAT YOU WANT TO LISTEN TO.

VERY HANDY TOOL AND WORKS EXTREMELY WELL.

4.

>> THANK YOU WE HAVE ONE MORE FROM RUTH.

ALTHOUGH I'VE HAD A PROFOUND LOSS FOR MANY YEARS AND HAVE WORN POWERFUL AIDS I HAVE BEEN ABLE TO HEAR MUSIC.

NO ONE HAS BEEN ABLE TO GIVE A SCIENTIFIC EXPLANATION OF THIS. CAN YOU?

>> DR. BUTTARS, DID YOU WANT TO TAKE THAT?

>> I'M NOT SURE I HAVE A GREAT ANSWER FOR THAT.

>> I WOULD SAY THAT SPEECH IS THE MOST COMPLEX SIGNAL TO NOT JUST HEAR BUT TO UNDERSTAND.

MUSIC IS NOT A VERY COMPLEX SIGNAL.

MUSIC HAS A MUCH WIDER FREQUENCY RANGE INTO LOWER FREQUENCIES SO USUALLY A PERSON'S HEARING, EVEN IF THEY HAVE SEVERE TO PROFOUND HEARING LOSS WILL HAVE SOME BETTER HEARING IN THE LOW FREQUENCY, HAIR CELLS ARE USUALLY THE LAST TO BE DAMAGED.

SO TYPICALLY AGAIN MUSIC NOT A COMPLICATED INPUT SO YOU CAN FOLLOW MUSIC MUCH BETTER THAN YOU CAN FOLLOW SPEECH WHICH IS MORE COMPLEX.

>> OUR NEXT QUESTION, WOULD MEDI-CAL OR DEPARTMENT OF REHABILITATION COVER ALL OR PART OF HEARING AIDS, EXCELLENT QUESTION.

>> SURE.

MEDI-CAL WILL COVER PRETTY MUCH THROUGH THE OPEN S3 LINE.

I DON'T THINK THAT THEY WILL BUY A RECHARGEABLE PORTION OF THAT.

I THINK THAT RUNS LIKE \$200 OR SOMETHING, I DO NOT THINK THAT THEY WILL COVER THAT.

>> ACTUALLY, JEFF, NOT TO CONTRADICT YOU BUT RECENTLY THEY HAVE APPROVED IT AND SO I KNOW OTICON ON RUBY 1 AND 2 THEY DO HAVE AN OPTION WITH MEDI-CAL WILL COVER FOR THE RECHARGEABLE.

>> I WOULD RATHER PUT AN S3 ON SOMEBODY THAN A RUBY BECAUSE THEY WILL HAVE MORE BENEFITS.

CERTAINLY THE RUBY SERIES ABSOLUTELY THEY WILL COVER THAT.

I TRY TO GET AS MUCH AS I CAN HEARING WISE FOR PEOPLE RATHER THAN COMPROMISE IT JUST BECAUSE OF RECHARGEABILITY.

>> ANSWER IS BAKESLY YES, THEY WILL COVER RECHARGEABILITY BUT AT THE LESSER TECHNOLOGICALLY ORIENTED HEARING AIDS IF THE PATIENT WANTS AN IMPROVED TECHNOLOGY, ONE THAT WILL HELP THEM A LITTLE BIT MORE IN THOSE CHALLENGING SITUATIONS, THAT BECOMES TOO PRICEY FOR MEDI-CAL TO COVER THAT AS WELL AS OPTIONAL RECHARGEABILITY.

>> UNDERSTAND THAT THE RUBY PRODUCT IS FAR BETTER THAN ANYTHING ELSE ON THE MARKET BY ANY OTHER MANUFACTURER WHEN IT COMES TO THE WAY IT WILL PERFORM.

FOR MEDI-CAL PATIENTS.

YOU ARE GOING TO BENEFIT TREMENDOUSLY WITH THE RUBY.

IF RECHARGEABILITY REALLY ISN'T AN ISSUE THEN YOU SHOULD BE ABLE TO GET THE S3 WHICH WILL WORK BETTER THAN THE RUBY.

>> GREAT, THANK YOU.

OUR NEXT QUESTION FROM TIM, FOR CHALESE OR ANY OF YOU, DAVID OR JEFF.

ANY OBSERVATIONS REGARDING -- HOW -- SOMEONE BORN WITH HEARING LOSS DIFFERS TO LATE-DEAFENED ADULTS IN TERMS OF DEMENTIA AND OTHER COGNITIVE ISSUES, THAT'S A GREAT QUESTION.

>> THAT'S A TOUGH ONE.

>> I DON'T KNOW PERSONALLY IF I HAVE READ ANY ARTICLES ABOUT THAT.

DR. MAJIT IF YOU KNOW MORE RESEARCH.

SOMETHING I'D BE HAPPY TO LOOK INTO IT I DON'T THINK THEY MADE THAT DISTINCTION ON WHEN IN SOMEBODY'S LIFE DO THEY ACQUIRE THAT HEARING LOSS AND WHAT AFFECTS THAT MAY HAVE ON DEMENTIA.

I CAN LOOK INTO THAT, SHARON.

>> THAT'S AN EXCELLENT QUESTION.

VERY SOPHISTICATED QUESTION.

I WOULD THINK THAT IT WOULD MAINLY DEPEND ON THE TIME OF INTERVENTION, IF THE PERSON AT A VERY YOUNG AGE STARTED WEARING HEARING AIDS OR A COCHLEAR IMPLANT.

I THINK THAT THEY WOULD PROBABLY PROCEED IN THE SAME MANNER THAT ANY INDIVIDUAL WOULD WHO WEARS AMPLIFICATION EVEN IF IT WAS AT A LATER STAGE. BUT THAT IS A VERY GOOD QUESTION, VERY ASTUTE.

WE'LL HAVE TO CHECK TO SEE IF THERE'S BEEN ANY RESEARCH LOOKING AT THAT PARTICULAR QUESTION.

>> SOPHISTICATED QUESTION ASKED BY A VERY SOPHISTICATED PERSON.

I HAVE THE NEXT, I'M NOT SURE IF IT'S A QUESTION.

MY 92-YEAR-OLD FATHER SHOULD GET NEW HEARING AIDS BUT CHANGING BATTERIES IS SO FRUSTRATING FOR HIM.

>> THEN YOU HAVE THE RECHARGEABLE THING.

IT IS SO SIMPLE TO USE YOU SIMPLY DROP THE HEARING AID INTO A VERY ACCESSIBLE SLOT, A LITTLE RED LIGHT COMES ON WHEN IT TURNS GREEN IT'S CHARGED.

IT COULDN'T BE EASIER.

REQUIRES NOTHING BUT BEING ABLE TO PUT THE HEARING AIDS IN TO YOUR EARS. NOTHING ELSE.

>> NEXT IS FROM LESLIE.

ARE THERE INDEPENDENT STUDIES COMPARING THE FEATURES AND PERFORMANCE OF HEARING AIDS SOLD BY DIFFERENT MANUFACTURERS.

IF NOT HOW DO AUDIOLOGISTS KNOW WHICH HEARING AIDS PERFORM THE BEST FOR THOSE WITH VARIOUS AUDIOGRAMS.

FINALLY IS IT ALL BASED ON MARKETING.

>> THAT'S A VERY GOOD QUESTION.

WHAT I WOULD SAY IS THAT THERE ARE SIX MAJOR MANUFACTURERS IN THE WORLD. THEY ALL MAKE VERY GOOD HEARING AIDS.

I THINK IT JUST DEPENDS ON WHAT FEATURES ARE MOST IMPORTANT.  
FROM OUR STANDPOINT AS DR. CHALESE MENTIONED WE'VE BEEN FOCUSED ON  
BRAINHEARING, HOW THE BRAIN WILL DEAL WITH SOUND NOT JUST SO MUCH HEARING  
BUT UNDERSTANDING.

I THINK STUDIES HAVE DEMONSTRATED THAT IN CHALLENGING SITUATIONS THE  
HEARING AID THAT WE HAVE AVAILABLE THE OPEN SOUND NAVIGATOR FEATURE DOES  
PERFORM BEST.

THERE WAS A STUDY OUT OF WASHINGTON UNIVERSITY THAT LOOKED AT THE BEST  
DIRECTIONAL HEARING AIDS, WHICH IS WHAT EVERY OTHER MANUFACTURER DEPENDS  
ON.

YOU GOT ABOUT THREE AND A HALF TO FOUR DB SIGNAL-TO-NOISE RATIO  
IMPROVEMENT WHICH MEANING THAT YOU CAN INCREASE THE SIGNAL VERSUS NOISE  
BY THREE AND A HALF TO FOUR DB WHICH IS VERY SIGNIFICANT.

WHEN THEY LOOKED AT THE OPEN SOUND NAVIGATOR INSTEAD OF THREE AND A HALF  
TO FOUR IT WAS ABOUT 6.5 WHICH REALLY WAS A SIGNIFICANT DIFFERENCE IN  
THOSE CHALLENGING ENVIRONMENTS.

AS DR. BUTTARS AND DR. GRAMA ALSO REFERRED TO THE CONNECT CLIP.  
WHEN YOU HAVE ACCESSORIES THAT USE WITH THE HEARING AID YOU CAN GET AS  
MUCH AS A 12 DECIBEL SIGNAL-TO-NOISE RATIO IMPROVEMENT.  
WHICH IS TREMENDOUS.

WE ADVOCATE FOR PEOPLE WHO HAVE SEVERE TO PROFOUND HEARING LOSS OR  
PEOPLE WHO HAVE WHAT WE CALL POOR DISCRIMINATION ABILITY, THESE  
ESPECIALLY WILL IMPROVE HOW THEY'RE ABLE TO COMMUNICATE.

WE STRESS THAT QUITE A BIT.

DEPENDING ON WHAT THE PERSON IS LOOKING FOR, IF THE PERSON IS LOOKING  
FOR, LET'S SAY, ON THEIR PHONE THE MOST FLEXIBLE APP WITH ALL THE  
DIFFERENT FEATURES, OTICON IS PROBABLY NOT THE BEST COMPANY TO GO FOR.  
WE TRY TO MAKE IT VERY SIMPLE AND EASY FOR PEOPLE TO USE.

WE DON'T WANT TO MAKE IT CONFUSING.

SOME PEOPLE LIKE A LOT OF TECHNOLOGY.

WE'RE NOT.

BUT IF A PERSON IS LOOKING TO IMPROVE THEIR UNDERSTANDING ABILITY IT'S  
SOMETHING THAT WE FEEL THAT OPEN SOUND NAVIGATOR FEATURE HAS BEEN ABLE TO  
DEMONSTRATE THAT IT DOES GIVE MOST IMPROVEMENT.

BUT SINCE JEFF IS SEEING PATIENTS ON A DAILY BASIS I'LL LET JEFF ADDRESS  
THAT.

>> I HAVE SEVERAL PATIENTS -- MORE THAN SEVERAL, WHO HAVE SEVERE TO  
PROFOUND HEARING LOSS.

OFTENTIMES WHAT I WILL DO IS ORDER UP THREE DIFFERENT MANUFACTURERS AND  
SPEND A MORNING DOING PROGRAMMING IN EACH OF THE MANUFACTURERS' PRODUCTS  
ON THE SAME PERSON AND I WILL TEST THE PEOPLE IN QUIET, IN BACKGROUND  
NOISES AND THAT INCLUDES RESTAURANT SOUNDS, CROWD NOISE, TRAFFIC NOISE,  
THAT SORT OF THING, LISTENING TO MUSIC.

AND DO HEAD TO HEAD COMPARISON FOR THESE PEOPLE.

AND I WOULD SAY EIGHT OUT OF TEN TIMES THE OTICON IS MARKEDLY BETTER THAN  
THE OTHER PRODUCTS.

THERE ARE SOME EXCEPTIONS BUT GENERALLY OTICON REALLY BLOWS THE OTHER  
GUYS OUT OF THE WATER WHEN IT COMES TO UNDERSTANDING IN NOISY SITUATIONS.  
IN QUIET SITUATIONS THEY ALL SOUND GOOD BECAUSE EVERYBODY MAKES A GOOD  
PRODUCT.

BUT WHEN YOU GET INTO THE NOISE, UNDOUBTEDLY THE OAT CONIS BETTER FOR 80%  
OF THE PEOPLE AT LEAST.

>> NEXT QUESTION, DO OTICON HEARING AIDS STREAM DIRECTLY INTO IPHONES AND  
IPADS?



>> YES, THEY DO.

>> YES.

>> IF YOU WANT TO STREAM FROM YOUR COMPUTER YOU DO HAVE TO GET A DONGLE AND I BELIEVE YOU HAVE TO HAVE A CONNECTCLIP AS WELL.

>> THAT IS TRUE.

IF YOU WANT TO GO DIRECTEDLY FROM THE COMPUTER LIKE YOU SAID YOU HAVE TO HAVE THAT BLUETOOTH DONGLE WILL SEND SIGNAL TO THAT CONNECT CLIP THAT WE TALKED ABOUT IN THE PRESENTATION.

>> MAYBE THAT WILL CHANGE IN THE FUTURE.

>> TO ANSWER THE QUESTION AS THEY BOTH MENTION YES IT WILL STREAM DIRECTLY TO IPHONE AND IPADS.

THERE'S NO PROBLEM WITH THAT.

>> ONE THING THAT SHOULD BE SAID FOR ANY OF THE STREAMING CAPABILITIES, WE ARE ABLE TO DO MORE FINE TUNING THROUGH THE SOFTWARE THAT WE HAVE IN THESE PRODUCTS.

WE CAN CHANGE HOW SHARP A SOUND IS OR INCREASE BASS SOUNDS, MUTE THE MICROPHONES A LITTLE BIT.

THERE'S A LOT OF THINGS WE CAN DO TO MAKE IT SO YOUR STREAMING SIGNAL IS EVEN BETTER THAN YOU WOULD EXPECT.

>> WE'RE RUNNING LOW ON TIME WE HAVE ABOUT FIVE MORE QUESTIONS.

I WORRY ABOUT RECHARGEABLES NOT LASTING ALL DAY FOR THE LEVEL OF HEARING AIDS I NEED.

I CANNOT BE WITHOUT MY HEARING AIDS DURING RECHARGING TIME.

IF I FOR SOME REASON NEED THEM IN THE MIDDLE OF THE NIGHT I DON'T FEEL SECURE THAT THEY WILL WORK.

THREE HOURS OF CHARGING TIME IS A LONG TIME TO BE WITHOUT.

>> ONE HOUR OF CHARGING TIME WILL GIVE YOU A TREMENDOUS AMOUNT OF CHARGE. GIVEN YOU SIX HOURS.

IF YOU HAVE PUT THE HEARING AIDS IN THE DOCK SAY YOU HAVE GONE TO BED AT MIDNIGHT YOU WAKE UP AT 1:00 YOU'VE GOT SIX EXTRA HOURS IMMEDIATELY AVAILABLE TO YOU.

CHARGE TIME IS VERY QUICK.

>> ACTUALLY 30 MINUTES YOU'LL GET SIX HOURS.

FOR 30 MINUTES IF SOMEONE NEEDS IT, EVEN IF THEY CHARGE NOR TEN MINUTES THEY WILL GET A COUPLE OF HOURS ON THE HEARING AIDS.

IT ACTUALLY WAY THAT RECHARGEABILITY WORKS IT CHARGES UP FRONT VERY QUICKLY THEN AS CHARGE IS FILLING UP IT SLOWS DOWN.

AGAIN EVEN IF A PERSON NEEDS IT THEY CHARGE FOR TEN OR 15 MINUTES THEY WILL GET TWO TO THREE HOURS OF USE.

INITIALLY RECHARGEABLE HEARING AIDS THE BATTERIES WOULD ONLY LAST MAYBE 10 OR 12 HOURS ESPECIALLY FOR PERSON WHO WAS STREAMING A LOT ON THEIR PHONE OR THEIR IPAD.

HOWEVER THEY HAVE GOTTEN SO MUCH BETTER AND AS DR. BUTTARS MENTIONED, YOU CAN GET 20-24 HOURS EVEN WITH STREAMING.

IF YOU ARE DOING A YOUTUBE, YOU'RE ON YOUTUBE STREAMING FOR 12 HOURS STRAIGHT YOU PROBABLY WON'T GET 22 HOURS YOU MAY GET 14, 16 HOURS.

TYPICALLY THAT'S AN UNUSUAL SITUATION.

TYPICALLY YOU WILL GET A FULL DAY WITHOUT ANY PROBLEM.

WITH THE RECHARGEABLES.

>> I HAVE NOT HAD ANYBODY COMPLAIN AT ALL.

NO FAILURES IN THE BATTERIES, EITHER.

>> GREAT.

OUR COMMENT, MY OTICON AIDS REQUIRE A DONGLE FOR BLUETOOTH WHICH AS I THINK WHAT JEFF MENTIONED IN RESPONSE TO THE LAST QUESTION.

WE HAVE QUESTION, CAN YOU TALK ABOUT YOUR NEXT GENERATION MODEL BEYOND OPEN AND RUBY ANY EXCITING DEVELOPMENTS IN TECHNOLOGY AND RELEASE DATES? AND SUCH AS ANYTHING SUCH AS AI TO REMOVE BACKGROUND NOISE.

>> I CAN TELL YOU THAT BY FAR OTICON'S LARGEST INVESTMENT IS IN THEIR RESEARCH AND DEVELOPMENT.

THEY SPEND WELL OVER \$120 MILLION A YEAR IN DEVELOPING NEW PRODUCTS. THAT MAY NOT SOUND LIKE A LOT.

BUT THE HEARING AID INDUSTRY, THE COMPANIES AREN'T THAT LARGE.

FOR COMPANIES TO PUT SUCH A LARGE PERCENTAGE INTO R&D THERE'S ALWAYS SOMETHING NEW AND IMPROVED THAT THEY'RE LOOKING AT.

UNFORTUNATELY I DON'T HAVE ANY IDEA AT THIS POINT WHAT WE'RE LOOKING AT. OBVIOUSLY WE'RE ALWAYS STRIVING TO IMPROVE HOW A PERSON PERFORMS IN ALL SITUATIONS ESPECIALLY IN NOISE.

AND WE'RE LOOKING AT HOW TO MAKE THINGS MORE CONVENIENT, EASIER FOR PEOPLE TO USE.

UNFORTUNATELY I DON'T HAVE A TIMETABLE AND I DON'T HAVE SPECIFICS FOR YOU.

I DON'T KNOW DR. CHALESE DID YOU HAVE ANYTHING TO ADD TO THAT?

>> I THINK JUST WHAT YOU SAID.

WE'RE REALLY GOING TO BE FOCUSING ON HOW CAN WE HELP PEOPLE IMPROVE ESPECIALLY IN BACKGROUND NOISE JUST THAT MUCH BETTER.

UNFORTUNATELY WE'RE KIND OF TIGHT LIPPED IN TERMS OF RELEASING NEW PRODUCTS.

I CAN'T GIVE A LOT OF DETAILS OR TIMELINE.

BUT THERE WILL BE AN IMPROVEMENT IN THE ABILITY TO BE ABLE TO HEAR AND UNDERSTAND IN BACKGROUND NOISE.

>> WE'RE NOT LOOKING AT WEEKS OR EVEN MONTHS.

THIS TAKES A LONG TIME FROM CONCEPTION TO DEVELOPMENT TO MANUFACTURING. FOR THIS YEAR, THE OPEN S MODEL, ARE PRETTY NEW MODELS THEY DIDN'T COME OUT TWO YEARS AGO.

THEY CAME OUT SEVERAL MONTHS AGO.

THEY ARE NEW PRODUCTS.

EXCEEDINGLY WELL RECEIVED AND THEY ARE VERY NICE IMPROVEMENT OVER OUR PREVIOUS LINE OF PRODUCTS.

WE STILL CONSIDER THE OPEN S A NEW AND VERY INNOVATIVE PRODUCT THAT WE HAVE AVAILABLE.

>> THANK YOU.

OUR NEXT QUESTION, WHAT OTICON MODEL IS FOR SEVERE TO PROFOUND HEARING LOSS.

>> IT'S CALLED THE EXCEED.

ACTUALLY WAS LAUNCHED IN SEPTEMBER OF LAST YEAR.

IT IS THE PRETTY NEW DEVICE.

WE'VE HAD A LOT OF SUCCESS WITH THAT FROM DIFFERENT HEARING CARE PROVIDERS.

THERE'S SOME SPECIFIC WAYS THAT THE HEARING AID FUNCTION, IS THAT OTICON HAS REALLY TRIED TO LOOK AT INDIVIDUALS WITH SEVERE TO PROFOUND HEARING LOSS BECAUSE WE KNOW THAT THAT HEARING LOSS IS QUITE A BIT DIFFERENT THAN LESSER DEGREES OF HEARING LOSS.

THERE ARE SOME THINGS THAT WE HAVE WITHIN THAT DEVICE THAT WE REALLY HAVE LOOKED AT AND RESEARCHED SEVERE TO PROFOUND HEARING LOSS TO TRY TO MAKE SURE THAT THAT CAN FUNCTION THE BEST THAT WE CAN FOR THAT GROUP OF INDIVIDUALS.

IT'S CALLED THE EXCEED.

>> THANK YOU.

NEXT QUESTION FROM THE SOPHISTICATED MAN.  
DEFINITELY WOULD APPRECIATE ANYTHING YOU FIND OUT REGARDING BORN WITH HEARING LOSS.  
I HAVE SEVERE TINNITUS BUT I WAS BORN WITH IT.  
IT'S THE NORM FOR ME AND I COULD EFFECTIVELY COPE.  
BUT FOR LATE DEAFENED FOLKS IT'S A NIGHTMARE.  
>> I'LL LOOK INTO THAT, TIM.  
LIKE I MENTIONED I HAVE YOUR E-MAIL I'LL GET BACK TO YOU IN WHAT I FIND.  
>> I WOULD JUST LIKE TO MENTION BRIEFLY ABOUT TINE NIGHTS, SOME PEOPLE REFER TO IT AS TINNITUS.  
WE FIND THAT THERE ARE QUITE A NUMBER OF PEOPLE WHO DO HAVE HEARING LOSS ALSO HAVE JUST ACCOMPANYING NOISE ON ONE SIDE OR THE OTHER OR GENERAL HEAD NOISE.  
WE FIND THAT IN MANY CASES JUST WEARING THE ACT OF WEARING THE HEARING AID WILL REDUCE THAT.  
BUT MOST AT LEAST OUR DEVICES OR PRETTY MUCH ALL OF OUR DEVICES HAVE A TINNITUS PROGRAM THAT YOU CAN ADD THAT SEEMS TO HELP REDUCE THE AMOUNT OF TINNITUS A PERSON IS EXPERIENCING.  
TIM, I DON'T KNOW IF YOU HAVE A TINNITUS FEATURE ON YOUR HEARING AIDS OR IF YOU DO, IF YOU ARE USING THAT.  
BUT SOMETHING THAT IF IT'S SOMETHING THAT IS BOTHERING YOU, LIKE YOU WERE SAYING YOU HAVE BECOME ACCUSTOMED TO IT BUT FOR MOST PEOPLE IT'S DISCONCERTING.  
THERE'S SOMETHING THAT THE PROFESSIONAL CAN DO TO TRY TO REDUCE THAT HEAD NOISE TO MAKE IT MORE COMFORTABLE AND ALSO EASIER TO CONVERSE.  
>> NEXT QUESTION FROM WENDY, MY APP RUNS VERY SLOWLY, ANY SUGGESTIONS? MY APP ALSO DROPS BLUETOOTH.  
>> THERE ARE A COUPLE OF THINGS.  
NUMBER ONE, MAKE SURE THAT YOU DON'T HAVE A WHOLE BUNCH OF STUFF RUNNING IN THE BACKGROUND ON YOUR PHONE.  
MANY PEOPLE USING IPHONES FORGET TO CLOSE OUT THINGS.  
I HAD ONE GENTLEMAN IN WHO HAD 78 WINDOWS OPEN SO THAT WILL REALLY SLOW DOWN THE PERFORMANCE OF THE IPHONE AS FAR AS BLUETOOTH GOES.  
IT WILL MAKE FOR INTERMITTENT THING.  
ALSO MAKE SURE THAT YOUR APP IS UP TO DATE.  
YOU SHOULD GO TO THE APP STORE AND SEE IF THERE IS AN UPDATE AVAILABLE.  
YOU MAY HAVE ALSO JUST BUNCH OF MEMORY THAT IS TIED UP WITH PICTURES AND THINGS LIKE THAT ON YOUR PHONE.  
YOU SHOULD DOWNLOAD A BUNCH OF THOSE AND GET THEM OFF.  
>> ONE MORE SUGGESTION, IF I CAN.  
IF YOU HAVE AN IPHONE, IF THERE IS AN IOS UPDATE THAT HAS CAUSED PROBLEMS WITH US IN THE PAST.  
JUST MAKING SURE THAT YOU'RE UP TO DATE WITH THOSE IOS UPDATES THAT OFTEN CAN HELP IN TERMS OF, IF IT IS DROPPING BLUETOOTH OR SOMETHING RUNNING SLOWLY.  
MAKING SURE THAT YOU STAY ON TOP OF IOS UPDATES AND APP UPDATES CAN ALSO HELP.  
>> YOUR IOS SHOULD BE 13.6 RIGHT NOW.  
SHOULD CHECK THAT WEEKLY.  
>> VERY LAST THING IS THAT AT LEAST FROM OTICON STANDPOINT WE HAVE UPDATES ON WHAT WE CALL OUR FIRMWARE AND SO THE MORE UPDATED YOUR FIRMWARE IS ON YOUR HEARING AID WHICH IS VERY SIMPLE THING THAT YOUR HEARING CARE PROFESSIONAL CAN PROVIDE IT WILL MAKE YOUR CONNECTIVITY RUN MUCH SMOOTHER AND MUCH FASTER.

>> WENDY, YOU ARE RUNNING THE LATEST FIRMWARE I KNOW FOR A FACT.  
>> THANK YOU, JEFF.  
>> I THINK -- LET'S SEE IF THERE'S ANY MORE.  
WHERE DOES JEFF PRACTICE?  
I THINK WE CAN GET YOU THAT INFORMATION.  
>> I'M IN HOLLYWOOD AT THE CORNER OF HOLLYWOOD AND LABREA.  
WE'VE BEEN OPEN THE WHOLE TIME THE COVID THING.  
ALSO I'D LIKE TO MENTION ONE THING.  
FOR SEVERAL PEOPLE BECAUSE OF THIS MASK THING HAS REALLY BEEN CAUSING A  
LOT OF PROBLEMS.  
I'VE HAD PEOPLE COME IN AND I'M CREATING A SECONDARY THING WE CALL IT THE  
MASK PROGRAM.  
AND BASICALLY I'M ADDING SOME HIGH FREQUENCY AND MID FREQUENCY SO PEOPLE  
ARE ABLE TO HEAR A BIT BETTER THROUGH MASKS.  
YOU CAN JUST DO THAT THROUGH YOUR PHONE OR BY TOUCHING BUTTONS ON YOUR  
HEARING AIDS TO ACCESS IT.  
>> ONE THING I WOULD CAUTION YOU AS FAR AS WEARING MASKS WE'RE HAVING  
MUCH HIGHER DEGREE OF PEOPLE LOSING THEIR HEARING AIDS WHEN THEY DO TAKE  
THEIR MASKS OFF AND ON.  
I WOULD CAUTION YOU TO BE A LITTLE BIT MORE CAREFUL WITH THAT TO MAKE  
SURE WHEN YOU DO REMOVE YOUR MASK THAT YOU YOUR HEARING AIDS ARE STILL IN  
YOUR EAR.  
>> WE'VE BEEN HAVING PEOPLE GET THE EYEGLASS RETENTION THINGS FOR THE  
READERS.  
SLIP THEM OVER THE HEARING AIDS THEN RUN CORD BEHIND THEIR BACKS.  
IF ONE PULLS OUT THE OTHER ONE WILL GENERALLY HOLD IN PLACE.  
THOSE WORK PRETTY WELL.  
>> ALSO MASKS NOW LOT THAT DON'T GO AROUND THE EARS AND TIE IN THE BACK  
OF THE NECK I'M WAITING FOR MY DELIVERY.  
WE'LL SEE HOW THOSE WORK OUT.  
>> I'VE BEEN SEEING PEOPLE -- I HAD LOT OF PEOPLE USING FACE SHIELDS  
COMING IN NOW.  
THAT ARE ON LIKE GLASSES THEY HAVE BIG CLEAR PLASTIC FACE SHIELD THAT  
GOES RIGHT ACROSS THE FACE.  
THEY CAN LIP READ AND THEY STILL HAVE THE PROTECTION WITH STUFF SPRAYING  
IN THEIR FACES AND HEARING AIDS DO NOT GET PULLED OFF VERY NICE STUFF.  
>> DID I SEE ONE QUESTION I'LL ANSWER QUICKLY THEN I KNOW YOU HAVE OTHER  
THINGS TO GET TO.  
AS FAR AS ANDROID PHONES, WE DO HAVE -- WE DO STREAM DIRECTLY TO IPHONES,  
ANDROID PHONES YOU DO NEED WHAT WE CALL OUR CONNECT CLIP WHICH WE REFER  
TO EARLIER WHICH IS REMOTE MICROPHONE.  
BUT IT ALSO WILL BE THE PIECE THAT WILL COMMUNICATE BETWEEN THE ANDROID  
PHONE AND YOUR HEARING AIDS.  
YOU CAN DO THAT BUT IT DOES REQUIRE AN EXTRA PIECE.  
WITH THAT, SHARON, I KNOW YOU HAVE OTHER BUSINESS TO GET TO.  
I MUST COMPLIMENT THESE GROUP OF PEOPLE THAT ATTENDED TODAY, YOU'VE  
ASKED EXCELLENT QUESTIONS.  
YOUR PARTICIPATION IS REALLY APPRECIATED.  
JEFF, I WANT TO THANK YOU FOR PARTICIPATING IN HELPING US OUT HERE.  
DR. CHALESE, AGAIN, THANK YOU VERY MUCH.  
IF YOU DO HAVE FURTHER QUESTIONS MAYBE JEFF CAN PROVIDE HIS E-MAIL  
ADDRESS TO EVERYONE AND HE'LL BE HAPPY TO ADDRESS THOSE QUESTIONS ONES  
THAT HE CAN HE'LL CONTACT CHALESE AND MYSELF.

AGAIN I WANT TO THANK HEARING LOSS ASSOCIATION OF AMERICA ESPECIALLY SHARON TO YOU AND TO TIM FOR INVITING US.  
WE HOPE PEOPLE FOUND THIS TO BE WORTHWHILE AS FAR AS ATTENDING AND HOPEFULLY EDUCATIONAL AS WELL.  
THANK YOU VERY MUCH.  
GOOD LUCK WITH EVERYTHING.  
EVERYONE STAY SAFE AND STAY HEALTHY.  
>> THANK YOU, SHARON, THANK YOU, TIM.  
>> THANK YOU SO MUCH JEFF AND CHALESE AND MY APOLOGIES FOR BUTCHERING ALL THE LAST NAMES OF ALL THE PEOPLE WHO I CALLED OUT AND CHALESE I KNOW I STARTED WITH YOU.  
I ALWAYS THOUGHT TINNITUS WAS TINNITUS, I DON'T KNOW IF TINNITUS IS OFFICIAL TERM OR GO EITHER WAY.  
ANYWAY, I HOPE EVERYBODY GOT THE GIST OF THE CONVERSATION.  
>> LET ME GIVE YOU MY E-MAIL ADDRESS.  
PERSONAL E-MAIL JUST -- OR JUST TYPE IT IN.  
>> PUT IT IN THE CHAT, JEFF, ALSO.  
>> JEFFGRAMA@GMAIL.COM.  
>> AGAIN EVERYONE HAVE A NICE WEEKEND.  
>> THANK YOU SO MUCH DAVID AND CHALESE FOR REALLY INFORMATIVE TALK.  
I THINK IT'S JUST IMPORTANT FOR ALL OF US TO REALIZE ALL NUANCES OF OUR SITUATIONS HOW IT IMPACTS US ON SO MANY DIFFERENT LEVELS.  
I THINK WE HAD SOME SPOUSES AND FRIENDS SHARE IN THIS PRESENTATION SO THEY CAN GET A BETTER SENSE OF HOW TO HELP US COPE AND DEAL WITH THE REALITIES OF TODAY'S WORLD.  
ON TOP OF THE REALITIES THAT WE'VE ALREADY BEEN FACING SOME OF US SINCE BIRTH AND SOME OF US FOR A NUMBER OF YEARS.  
THANK YOU.  
WE NOW HAVE A VERY, VERY EXCITING PRESENTATION FOR YOU THAT WE'RE GOING TO -- OUR SCHOLARSHIP COMMITTEE THAT HEADED UPPEP BY HEATHER HAS BEEN HARD AT WORK IN RAISING FUNDS TO SUPPORT A HIGH SCHOOL SENIOR INCOMING FRESHMAN ATTEND COLLEGE I WILL LET HEATHER, WE HAVE OUR WINNER WITH US TODAY.  
I WILL LET HEATHER START OUT BY DISCUSSING THE PROGRAM A LITTLE BIT THEN WE WILL BE VERY PROUD TO INTRODUCE OUR RECIPIENT.  
OF THE HLAA-L.A. SCHOLARSHIP FUND FOR THIS COMING YEAR.  
HEATHER IF YOU CAN UNMUTE YOURSELF.  
>> HI, EVERYBODY.  
HOW ARE YOU?  
I'M SO HAPPY TO SEE YOU ALL.  
I CAN'T STAND IT!  
I'VE MISSED YOU ALL SO MUCH AND, THIS IS JUST TERRIFIC.  
I CAN'T BELIEVE THE TURN OUT.  
EVERYONE OF YOU JUST BY LOGGING IN HERE IT'S WONDERFUL.  
I ACTUALLY DID VERY LITTLE WORK ON THIS, PERSON WHO DID MAJORITY OF THE HEAVY LIFTING WAS SHARON.  
IN TERMS OF OUR WONDERFUL SCHOLARSHIP, WE DID A LOT OF WORK TO RAISE MONEY OVER THE YEARS WE ARE SO EXCITED BY THIS YOUNG PERSON, JULIE, WHO IS GOING TO BE GOING TO CAL, GO BEARS!  
THAT'S MY ALMA MATER.  
YOU HAVE NO IDEA HOW GREAT YOUR EXPERIENCE IS GOING TO BE JULIE.  
IT'S A WONDERFUL SCHOOL.  
YOU SHOULD BE SO PROUD OF YOURSELF FOR WORKING SO HARD BECAUSE I KNOW IT'S IMPOSSIBLE TO GET INTO NOW.

I NEVER BOO HAVE BEEN ABLE ABLE TO GET IN TO THE 100,000 YEARS AGO THAT I TRIED.

ANYWAY, I WANT TO SAY CONGRATULATIONS TO JULIE.

I CAN'T IMAGINE HOW HARD IT WAS FOR YOU TO GET THROUGH HIGH SCHOOL, IT IS SO MUCH MORE CHALLENGING NOW, THE WORKLOAD IS INSANE ON TOP OF HAVING A HEARING LOSS.

ON TOP OF HAVING SOCIAL ISSUES THAT GO ALONG WITH HIGH SCHOOL AND EVERYTHING HEARING LOSS.

ALL OF OUR HEARTS GO OUT TO YOU.

BECAUSE WE ALL KNOW HOW HARD IT IS.

WE ARE EXTREMELY PROUD OF YOUR ACCOMPLISHMENT, YOU ARE AN INCREDIBLE CANDIDATE.

WE ARE VERY HAPPY TO HELP SUPPORT YOU A LITTLE BIT.

I KNOW HOW EXPENSIVE COLLEGE IS.

I HAVE THREE KIDS IN COLLEGE RIGHT NOW.

ANYWAY, HATS OFF TO YOU WE ARE THRILLED TO HAVE YOU HERE WE ALL JUST WANT TO SAY CONGRATULATIONS.

>> THANK YOU, HEATHER.

THAT WAS GREAT INTRO.

I SECOND MANY OF HEATHER'S COMMENTS.

I ALSO HAVE THREE.

I BEAT YOU BECAUSE I HAVE TWO IN COLLEGE ONE ABOUT TO START -- ONE APPLIED TO GRADUATE SCHOOL THAT WILL MAKE COLLEGE TUITION SEEM LIKE A JOKE.

SHE'S GOING TO BE RESPONSIBLE FOR BIG SOME PIECE OF THAT.

I WANT TO INTRODUCE JULIE WANG WHO WE ARE AWARDING OUR \$1500 SCHOLARSHIP TO THIS YEAR.

JULIE IS ABOVE AND BEYOND QUALIFIED.

HAS GPA THAT IS UNHEARD OF, LIKE HEATHER GETTING INTO UC TODAY IS INSANELY MORE DIFFICULT AND CHALLENGING THAN IT WAS IN OUR DAY.

HER TRANSCRIPT SHE ACED EVERYTHING FROM APLIT TO APCALC AND EVERYTHING IN BETWEEN.

WHILE DEALING WITH THE CHALLENGES OF HEARING LOSS, WEARING A HEARING AID. HAVING A COCHLEAR IMPLANT.

AND ALL OF THE CHALLENGES THAT I AM SURE HAVE BEEN SIGNIFICANT.

I AM AN ADULT, LATER ADULT, I GUESS DEAFENED WOMAN SO MY LOSS STARTED IN MY LATE 20S I REALLY STARTED TO I THINK HAVE VERY BEGINNING OF REALIZATION WHEN I WAS IN GRADUATE SCHOOL.

BUT THAT WAS IN MY MID 20S IT WASN'T UNTIL LATE 20S THAT I WAS DIAGNOSED. IT'S BEEN CHALLENGING ENOUGH GETTING THROUGH LIFE SINCE THEN.

SO I CAN ONLY IMAGINE WHAT YOU'VE GONE THROUGH TO GET TO THIS PLACE.

I WANT TO SAY THAT THERE'S BEEN -- I'VE BEEN IN PART OF HLAA FOR ALMOST THREE YEARS.

THERE'S BEEN ABSOLUTELY NOTHING MORE GRATIFYING IN MY WORK OR MORE EXCITING THAN TO BE ABLE TO HELP IN THIS SMALL WAY TOWARDS HELPING SOMEBODY IN OUR COMMUNITY BE ABLE TO HOPEFULLY REALIZE THEIR DREAMS OF GOING TO COLLEGE.

AND WE WELCOME YOU TO OUR COMMUNITY AND TO OUR GROUP AND WE HOPE THAT WE WILL BE ABLE TO PROVIDE SOME SUPPORT AND PLACE TO LEARN AND EDUCATE AND COME BACK AND LET US KNOW HOW YOU'RE DOING.

SO ANYWAY, I'D LIKE TO JUST INTRODUCE JULIE.

HAVE HER JUST SAY HI TO THE GROUP AND TELL US A LITTLE BIT ABOUT HERSELF YOU JUST NEED TO UNMUTE YOURSELF ON THE BOTTOM LEFT.

>> HI, EVERYBODY.

I'M JULIE, I'M GOING TO STUDY ENGINEERING I'M HOPING TO WORK WITH PROBABLY RENEWABLE ENERGY IN THE FUTURE. THEN I HAVE HAD A HEARING LOSS SINCE I WAS A BABY PRETTY MUCH I USED TO LIKE HAVE HEARING AIDS IN BOTH EARS I HAD A COCHLEAR IMPLANT LATER AROUND FOURTH GRADE.

>> WE'RE VERY EXCITED FOR YOU.

I DON'T KNOW ARE YOU GOING TO BE PHYSICALLY MOVING TO BERKELEY OR ARE YOU STAY IN L.A. DOING REMOTE VERSION?

>> FOR FALL SEMESTER I'M DOING REMOTE VERSION BECAUSE IT DOESN'T SEEM LIKE I'D ACTUALLY BE ABLE TO HAVE MUCH OF A COLLEGE EXPERIENCE IF I MOVED.

THERE'S GOING TO BE A LOT OF RESTRICTIONS GOING ON.

I'M HOPING THAT I CAN MOVE IN THE SPRING BE LIKE MORE OF TRUE COLLEGE EXPERIENCE.

>> WE WISH YOU ALL THE PLUCK IN THE WORLD.

JUST ENJOY RAND PLEASE COME BACK WE HAVE MEETINGS EVERY MONTH ON FOURTH SATURDAY OF THE MONTH ON VARIETY OF TOPICS.

SOMETIMES WE HAVE RAP SESSIONS TO JUST TALK ABOUT THINGS THAT ARE GOING ON AND AFFECTING US.

IT'S A LOT OF SUPPORT AND EDUCATION AND THIS ORGANIZATION DOES A LOT OF ADVOCACY FOR LEGISLATION TO BRING IN TELECOILS AND DO ALL KINDS OF THINGS TO HELP US COMMUNICATE IN THE WORLD AND ENTERTAINMENT VENUES HOPEFULLY ONE DAY BE ABLE TO REJOIN GETTING CAPTIONS ON DIFFERENT ZOOM AND SKYPE AND WHOLE BUNCH OF WAYS THAT HELP US ALL TO COMMUNICATE IN THE WORLD.

WELCOME TO OUR COMMUNITY.

WE'RE SO HAPPY TO HAVE YOU.

WE JUST WISH YOU ALL THE BEST.

I WANT TO THANK ALL OF YOU FOR JOINING.

WE LOST A FEW PEOPLE BUILT WE HAD I THINK WHAT I HOPE WAS A VERY SUCCESSFUL MEETING I HOPE EVERYBODY LEARNED SOMETHING TO HELP THEM OR TO HELP PERSON THAT THEY LOVE AND LIVE WITH DEAL WITH THEIR HEARING SITUATION.

WE ALSO WANTED TO DO SOME POLLING BUT THOUGHT IT WOULD BE TOO MUCH TO DO ON TOP OF OTICON'S POLLING.

WE'RE GOING TO BE SENDING OUT SOME TYPE OF SURVEY IN THE NEXT COUPLE OF WEEKS TO GET A SENSE OF SOME OF THE THINGS THAT WOULD BE MOST BENEFICIAL AND INTERESTING TO EVERYBODY ESPECIALLY DURING THIS TIME WHEN WE HAVE TO MEET IN THIS WAY AND SO WE WELCOME YOUR FEEDBACK SO THAT WE CAN TRY TO CREATE PROGRAMMING AT LEAST FOR THE NEXT SEVERAL MONTHS THAT WILL INCORPORATE WHAT WILL BE MOST BENEFICIAL FOR EVERYBODY.

ANYBODY ELSE HAVE ANYBODY THEY WANT TO ADD BEFORE WE SIGN OFF?

I SEE NO RAISED HANDS.

I THANK YOU ALL FOR JOINING US TODAY.

THANK YOU, HEATHER FOR HAVING HAD THE VISION TO START THIS BECAUSE IT REALLY IS JUST A WONDERFUL GIFT FOR THE RECIPIENT AND FOR THOSE OF US WHO GOT TO BE PART OF THIS PROCESS.

I WISH YOU ALL A GREAT SATURDAY.

THANK YOU FOR SHARING YOUR MORNING WITH US, WE WILL SEE YOU ON THE FOURTH SATURDAY OF AUGUST.

>> SHARON, TIM RAISED HIS HAND.

>> REST OF YOUR SUMMER.

>> JUST WANTED TO MAKE SURE WE THANK OUR CAPTIONER DEANNA.

>> THANK YOU.

THIS IS -- THAT IS ALWAYS THE MOST IMPORTANT THING THAT I FORGET TO DO,  
TAKE IT AWAY.

>> DEANNA, WE WOULD HAVE BEEN SO LOST WITHOUT YOU ESPECIALLY TODAY.  
ESPECIALLY WITH OVER 60 PARTICIPANTS.

AND YOUR CAPTIONING WAS SEAMLESS, IT WAS SPEEDY, IT WAS BEAUTIFUL.  
AND PERFECT.

AND THANK YOU SO MUCH FROM THE BOTTOM OF MY HEART.

>> DEANNA: IT WAS A PLEASURE.

>> PLEASE SAVE FOURTH SATURDAY OF AUGUST TO BE WITH US.

>> DEANNA: WILL DO.

>> TAKE CARE.

WE'LL SEE YOU SOON.