

Estudio número 4

Asociación del uso de audioprótesis o implantes cocleares con cambios en los síntomas de depresión en personas mayores.

La hipoacusia es una afección frecuente en ancianos, que a menudo va asociada al desarrollo de depresión. En estudios transversales publicados previamente se ha descrito menor incidencia de depresión entre personas que utilizan audioprótesis. Sin embargo, no existen estudios prospectivos que investiguen los efectos del tratamiento para la sordera en los síntomas de depresión.

Los autores han realizado un estudio prospectivo observacional con 113 participantes con una mediana de 69 años, que recibieron prótesis auditivas (n=63) o implantes cocleares (n=50) entre los años 2011 y 2014.

Los síntomas de depresión fueron evaluados con una escala habitualmente utilizada en pacientes geriátricos, al inicio, a los seis y a los doce meses tras la intervención.

Ambos grupos estudiados han mejorado los síntomas depresivos a los seis meses tras el implante o la adaptación protésica y dicha mejoría persistía tras los doce meses en pacientes receptores de implantes cocleares.

Se requieren más estudios para valorar el efecto a largo plazo de la rehabilitación auditiva en la salud mental de los ancianos.

Association of Using Hearing Aids or Cochlear Implants With Changes in Depressive Symptoms in Older Adults.

Importance

Hearing loss is a common health problem in older adults that is strongly associated with the development of depression. Previous cross-sectional studies have reported lower odds of depression among individuals who use hearing aids. However, there have been limited prospective studies investigating the effect of hearing loss treatments on depressive symptoms.

Objective

To investigate the association between treatment with a hearing aid or cochlear implant with depressive symptoms in older adults.

Design, setting, and participants

A prospective observational study was conducted of 113 participants 50 years or older who received hearing aids (n = 63) or cochlear implants (n = 50). Participants were recruited from August 1, 2011, to January 31, 2014, at a tertiary care academic center.

Intervention

Hearing aid or cochlear implantation.

Main outcomes and measures

Depressive symptoms were evaluated by the 15-item Geriatric Depression Scale (GDS) at baseline and at 6 and 12 months after intervention. The score ranges from 0 to 15, and various scores between 3 and 10 have been used as being suggestive of depression.

Results

The median age of the 113 study participants was 69.6 years (interquartile range, 63.5-77.4 years). At baseline, the mean GDS score for the participants was 41% lower (95% CI, 7%-63%) among those receiving hearing aids (mean score, 1.5; 95% CI, 0.7-3.3) compared with those receiving cochlear implants (mean score, 2.6; 95% CI, 1.3-5.1). Cochlear implant recipients' GDS scores improved from baseline to 6 months after treatment by 31% (95% CI, 10%-47%) and from baseline to 12 months after treatment by 38% (95% CI, 18%-54%). Hearing aid recipients' GDS scores improved by 28% (95% CI, 0%-48%) at 6 months after treatment but were not significantly different from baseline at 12 months after treatment (16%; 95% CI, -24% to 43%).

Conclusions and relevance

There was a significant improvement in depressive symptoms at 6 months after treatment for patients receiving cochlear implants and hearing aids; this improvement persisted to 12 months for those who received cochlear implants. Further research is warranted to assess the long-term effect of hearing rehabilitation on mental health in older adults.

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