Cochlear[®] Baha[®] 4 Systems Candidate Selection Guide



Introduction

This Candidate Selection Guide provides information to help you identify, evaluate and counsel candidates who may benefit from an implantable bone conduction solution.

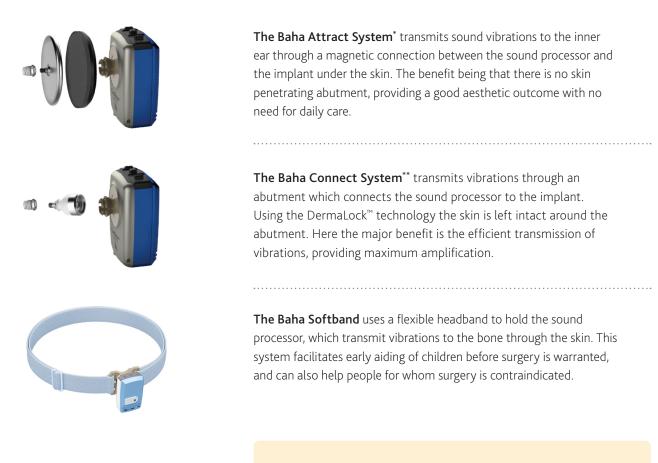
The main advantages of bone conduction implants are:

- Reduced need for amplification as conductive component is bypassed
- Excellent sound quality
- Proven performance, backed by numerous published clinical results
- Minimally invasive surgery, without risk of further damage to hearing
- No occlusion of the ear canal
- Ability to test the system before surgery



Using bone conduction, sound is conducted naturally through the bone directly to the cochlea, independent of the outer and middle ear. The Baha[®] System uses this natural process by amplifying sound signals, converting them into vibrations and transmitting them to an implant in the bone. Implantable bone conduction is, therefore, an effective hearing solution for people with conductive or mixed hearing loss because it bypasses any problems associated with the outer or middle ear. The system can also help people with single-sided sensorineural deafness by transmitting sound received on the deaf side directly to the hearing ear.

Once you have identified, evaluated and counseled potential candidates for a Baha System, they must be referred to an ENT specialist for a consultation. Several Baha Systems are available to suit the individual needs of each candidate:



A complete portfolio of sound processors is available to cater for varying degrees of hearing loss, skin attenuation and lifestyle.

* The Baha Attract System consists of: Cochlear Baha Bi300 Implant, Cochlear Baha BIM400 Implant Magnet, Cochlear Baha Sound Processor Magnet, Cochlear Baha Sound Processor. ** The Baha Connect System consists of: Cochlear Baha Bi300 Implant, Cochlear Baha BA400 Abutment DermaLock,[™] Cochlear Baha Sound Processor.

Identifying candidates

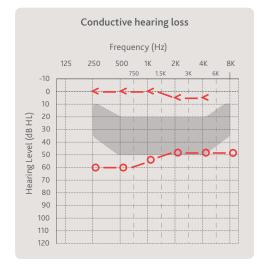
An audiological evaluation is the first step in determining those who will benefit from a Baha System.

Conductive hearing loss

Most candidates with conductive hearing loss will benefit from a Baha System. As the Baha System sends sound directly to the cochlea via bone conduction, the conductive element of the hearing loss is effectively bypassed. This means that less amplification is required compared to other solutions.

Selection criteria:

• Degree of conductive hearing loss - studies suggest that candidates with an air-bone gap of more than 30 dB (PTA4) will experience significant advantages from the Baha System, compared to using an air conduction (AC) hearing aid.¹⁻³

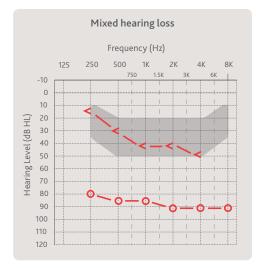


Mixed hearing loss

Many individuals with mixed hearing loss are suitable candidates. Bypassing the conductive element of the hearing loss means that less amplification is required because the Baha System only needs to compensate for the sensorineural loss.

Selection criteria:

- Degree of conductive hearing loss the air-bone gap is a good indicator of suitability for a Baha System. The greater the air-bone gap, the more the candidate will benefit from implantable bone conduction system. Studies suggest that candidates with an air-bone gap of more than 30-35 dB (PTA4) derive greater benefit from a Baha System than a hearing aid.⁴
- Extent of the sensorineural hearing loss those with a mild-tomoderate sensorineural component in their hearing loss are suitable Baha candidates. The Baha sound processor can compensate for some of the sensorineural loss but, as the conductive part of the loss is bypassed, only modest amplification is required – much less than is necessary with conventional hearing aids. The most powerful Baha sound processor can compensate for a sensorineural element of up to 65 dB HL (measured at 0.5, 1, 2 and 3 kHz).



Single-sided Sensorineural Deafness (SSD)

Candidates with SSD and normal hearing in their good ear may benefit from a Baha System.¹² The Baha sound processor picks up sound on the deaf side and sends it via bone conduction to the contralateral cochlea, overcoming the head shadow effect. This gives improved speech understanding and 360° sound awareness.⁵⁻⁷

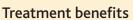
Selection criteria:

- The level of hearing in the good ear should be assessed. Candidates with normal hearing in their good ear will benefit from a Baha System.⁸ In cases where there is a more pronounced hearing loss in the good ear, a bone conduction implant may not be the best solution.
- Candidate motivation as SSD patients may have specific expectations due to their type of hearing loss, it is important to ensure such expectations are realistic and that they perceive the prospect of hearing from their deaf side as a need.

Possible causes of SSD:

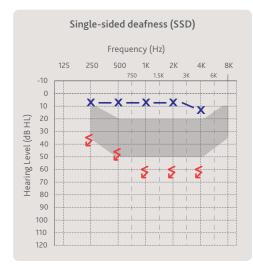
- Acoustic neuroma tumors
- Congenital factors
- Genetic factors
- Ménière's disease
- Neurological
 degenerative disease

- Ototoxic drugs
- Sudden deafness
- Surgical interventions
- Trauma



Compared to a CROS aid:13

- No occlusion of the hearing ear
- Proven solution backed by long term studies
- No need to wear hearing devices on both ears



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Medical indications

When evaluating candidacy in conductive/mixed hearing losses one should also take into account the type of medical condition that has caused the hearing loss. For some indications, such as chronic otitis media and allergies, implantable bone conduction may be the only feasible solution, regardless of the size of the air-bone gap.

Skin allergies

Allergies in the outer ear and/or the ear canal may be aggravated by the placement of an ear mold. In contrast, a Baha device maintains an open ear canal.

Congenital malformations

For most candidates with congenital ear malformations, surgical intervention or a bone-conduction (BC) hearing aid is often prescribed because an AC hearing aid is simply not an option. Baha Systems have several advantages over conventional BC hearing aids and, compared to surgical reconstruction, bone conduction implants provide a reliable and cost effective solution.⁹

Draining ears

A common problem for otologists when treating middle ear disease is difficulty in ensuring a dry ear with good hearing. If the candidate uses an AC hearing aid, the ear mold in the ear canal may aggravate this condition. With a Baha System, the ear canal remains open at all times, thus allowing the ear to dry.¹

Ear canal stenosis

Individuals with stenosis of the ear canal are not suitable for a surgical intervention, and the use of conventional hearing aids can also be difficult due to the presence of an ear mold. With a Baha System, the ear canal is bypassed.

Previous ear surgery

Candidates who have had previous surgeries using, for example, a canal wall down procedure, may find it difficult to wear an ear mold without feedback problems. The Baha System is a good solution because an ear mold is not required.

Radical cavity

Individuals treated for chronic mastoiditis with a radical cavity may be unable to use conventional AC aids because the ear canal could become occluded, thus aggravating their condition. With a Baha System, the ear canal remains open.

Syndromic hearing losses

Individuals with syndromes such as Down,¹⁰ Goldenhar and Treacher Collins;¹²⁻¹⁵ can be suitable candidates for a Baha System. Treatment of these individuals often requires special consideration and counseling. A personal counseling plan which takes account of the type of syndrome, the severity of the condition and the individual's general abilities is recommended. For such candidates, parents or caregivers will often play an active role in the maintenance of the system, so they will need to be involved early on in the candidate selection process.¹⁰⁻¹²

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Treatment benefits in conductive/mixed hearing loss

Compared to conventional air conduction (AC) hearing aids:2-4

- Less need for amplification because the conductive element of the hearing loss is bypassed
- No occlusion of the ear canal
- Reduced risk of sound feedback due to less amplification

Compared to middle ear surgery and middle ear implants:1

- Safe and reliable means of restoring hearing
- A reversible intervention
- No risk of additional hearing impairment by placing the implant
- Opportunity to evaluate benefit prior to surgery

Compared to conventional bone conductors:9,14

- Comfortable solution
- Better sound quality
- More aesthetic solution

Evaluation of adult candidates

Candidacy evaluation for an implantable bone conduction system includes audiological testing as well as a personal trial with the Baha System.

Conductive/mixed hearing loss

Audiological evaluation

Use the candidate's air-bone gap as a guide to the benefits that can be expected from choosing a Baha System. Comparing the results of functional gain measurements in the sound field, with and without the sound processor, will also be useful.

Field testing of a Baha sound processor fitted on a Softband or headband allows the candidate to hear through a Baha device before surgery. For a realistic experience, allow the candidate to test a sound processor in different sound environments (for example by taking a walk around the hospital/clinic or the surrounding area).

Recommended tests:

- Pure tone audiometry (average bone thresholds at 500, 1000, 2000, and 3000 Hz)
- Listening test, evaluation on a Softband, testband or headband (Please refer to the section "Listening through the Baha System" for a detailed description about how to perform listening tests)
- Speech audiometry, use words or speech in noise tests
- Sound field testing (Baha sound processor worn on a testband or test rod for short-term testing, and a headband or Baha Softband for longer trials)

Please refer to the section on page 18, Listening through the Baha System, for a detailed description about how to perform listening tests.

Bilateral or unilateral fitting

Bilateral fitting

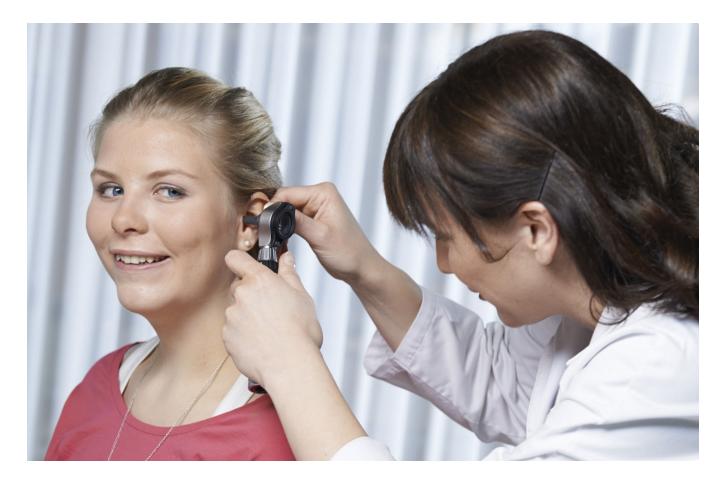
For candidates with binaural hearing loss, a bilateral fitting of Baha sound processors is recommended as this improves speech understanding, sound localization, and general candidate satisfaction.¹⁷ To optimize the benefit from a bilateral fitting, bone conduction thresholds should be symmetrical, with an average difference of less than 10 dB (PTA4) or less than 15 dB at individual frequencies. However, candidates with asymmetric thresholds may still perceive benefits from a bilateral fitting in terms of a reduction in the head shadow effect.¹⁷

Unilateral fitting

The general recommendation is to choose the side with the best cochlear function; ie. with the best bone conduction thresholds. However, the side from which the candidate perceives the greatest handicap should also be taken into account.

Practical points to consider:

- Candidate's manual dexterity
- Cosmetic aspects
- Driving needs. If the candidate is a taxi driver, for example, the passenger-facing side may be a good alternative.
- Telephone use. If the candidate uses a telephone frequently, the side which leaves the 'writing hand' free may be best.



Single-sided sensorineural deafness (SSD)

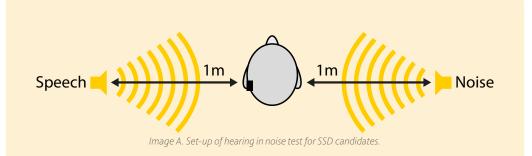
Audiological evaluation

For SSD, the main benefits of the Baha System will be a reduction in the head shadow effect and improved hearing in noisy situations. It is therefore important for candidates to compare their hearing when it is both aided and unaided. An extended trial (if possible), allowing testing of a Baha sound processor at home and/or work, may also be effective in indicating the potential benefit.

Recommended test:

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Hearing-in-noise tests, such as QuickSin or HINT, are recommended to evaluate the benefit of a Baha System. The recommended set-up is to place the candidate between two loudspeakers (see image below). Noise should come from the speaker facing the hearing ear, while speech comes from the speaker nearest the deaf ear. The test should first be preformed in an unaided condition to establish the signal-to-noise ratio under which the candidate will achieve 50 percent correct answers. The same test should then be carried out with the candidate aided by a Baha sound processor fitted on a headband or a Baha Softband. The difference in the signal-to-noise ratio between the two situations has been shown to be a good predictor of individual benefit. The bigger the difference between the two scenarios, the more benefit can be expected from the Baha System.¹⁸



NOTE: Use the most powerful head-worn sound processor that is available for this test, as the skin will attenuate the signal by on average 10-15 dB in a band fitting.

Listening test for SSD candidates

To evaluate the benefit of a Baha System for SSD candidates, a longer trial or testing opportunity away from the sound booth is crucial. This will usually provide a good indication of the benefits a candidate can expect. The candidate should be instructed to test the solution in situations where they normally struggle.⁹

Key things to consider when performing a listening test:

- Select the latest available sound processor as that will provide the most benefit in terms of signal processing
- If the candidate needs more audibility, use a more powerful sound processor
- Program the sound processor to the candidates hearing loss and connection type (see section on "Listening through a Baha" for further information)
- Instruct the candidate on how to handle the sound processor and fit the Baha Softband
- Instruct the candidate to test the sound processor in the situations and environments where they normally struggle
- Use of a formal listening test such as the Functional Listening Evaluation²⁰ can be valuable in evaluating benefit prior to system selection.

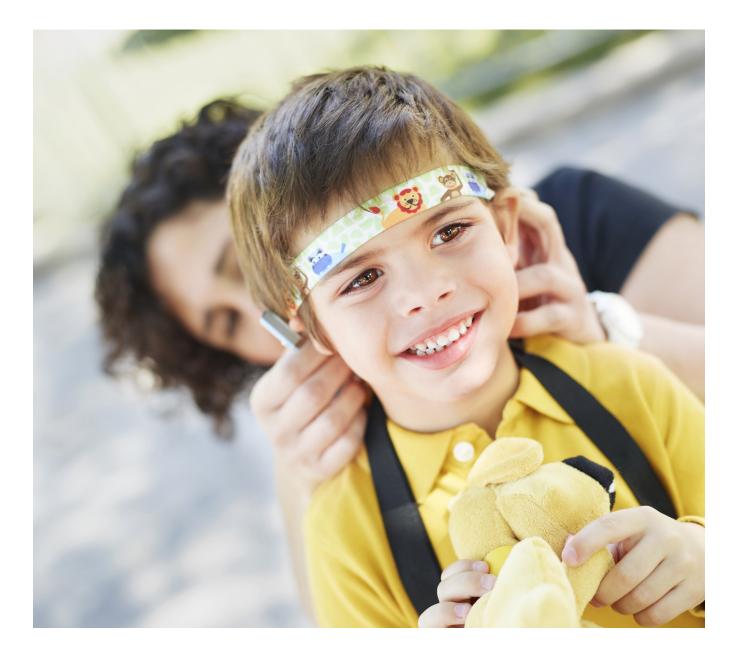


Pediatric candidacy

The Baha System can be fitted to infants and children in need of hearing amplification through bone conduction. The indications of their need are generally the same as for adults. In the USA and Canada, Baha implantation is indicated for children aged five years of age or older.

As in adult patient evaluations, the child's bone conduction threshold is the most relevant factor in an audiological assessment. Use the air-bone gap as a guide to the benefits that can be expected from choosing a Baha System. There may also be medical indications which show that a bone conduction implant system will be the best solution. If possible, compare the results of the functional gain measurements in the sound field booth, with and without the sound processor.

We recommend fitting infants and children who are not ready for implantation with the Baha Softband. This will instantly improve the child's hearing and is a very good introduction to the benefits, both for the child and parents or caregivers. The decision to implant the child is usually made easily once the benefits for the child have been observed.



Additional considerations

Early amplification

Early access to sound amplification is crucial for a child's speech, language and educational development. Yoshinaga-Itano reports that children who receive hearing rehabilitation before the age of six months perform significantly better in language tests at the age of three to four years than children who are treated later.²¹ The Yoshinaga-Itano study concludes that delay in intervention may lead to a permanent language deficit.²¹

Recommended age for implantation

Implantation must wait until the child has developed sufficient bone thickness and bone quality. How long this takes can vary from child to child but, according to studies, the child should be more than two years old and have a skull bone at least 2.5 mm thick.^{24,25} When fitting a child with the Baha Attract System, a skin thickness of at least 3 mm is required. For children where such conditions are not met, the Baha Softband can be used from infancy.

In the USA and Canada, Baha implantation is indicated for children five years of age or older.

Sound processor considerations when fitting the Baha Softband

Early access to sound amplification is crucial. In order to achieve good results, the sound processor should be programmed using Baha Fitting Software. Follow the procedure outlined in the Baha Fitting Quick Guide.

Use age appropriate tests to evaluate audibility:

- Behavioral Observational Audiometry (BOA): Infants
- Visual Reinforcement Audiometry (VRA): Children from about six months to two/three years
- Play audiometry: Children between three and five years*

WARNING! A Baha sound processor contains small components and constant adult supervision is required for Baha users under three years of age.

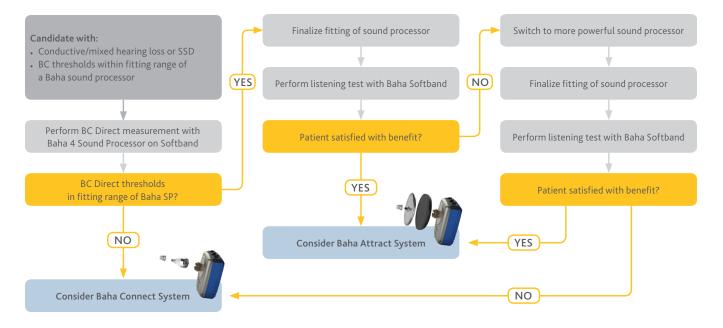
Choosing the right Baha System

Both the Baha Attract and Baha Connect systems are indicated for conductive hearing loss, mixed hearing loss and single-sided sensorineural deafness. The following guidelines may help you select the best system for your patient's individual needs.



Suggested evaluation process

Performing a listening test with the sound processor fitted on a Baha Softband will provide valuable input during the evaluation.



NOTE: For this evaluation the most recent sound processor may provide benefits in terms of signal processing and wireless capabilities. If the client needs more audibility, change to a more powerful sound processor.



Additional considerations regarding system selection

Conductive HL

Mixed HL

Both the Baha Attract System and the Baha Connect System will provide good audiological outcomes. Selection will depend on the amount of sensorineural hearing loss to compensate for.

SSD

SSD candidates with a large transcranial attenuation or a sensorineural hearing loss developing in the hearing ear may benefit from the additional amplification provided by the Baha Connect System.



Baha 4 Attract System

Maximum discretion For patients who value the discreet look of a magnetic system.

No wound care For patients who can't or don't want to deal with the maintenance of an abutment connection, e.g. patients with poor personal hygiene.

Minimal risk of skin infections For patients with higher risk of skin infection, e.g. certain medical conditions, living or working in high humidity, dusty/dirty environments.

Maximum ease For patients with dexterity problems who value or benefit from easy sound processor attachment and removal.

MRI up to 1.5 T^{*} For patients who are unlikely to require an MRI close to the implant site (Due to large artifact/ shadow on scans with a magnetic system).

Less risk of implant loss due to trauma For patients with a higher risk of implant loss due to trauma, e.g. children and people who practice contact sports.

Baha 4 Connect System

Maximum performance For patients who want or need maximum amplification with direct bone conduction.

Soft tissue condition For patients where the pressure from a magnet connection may cause skin problems, i.e. patients with very thin tissue or poor vascularity.

Maximum retention For patients whose active life makes retention a top priority.

MRI up to 3 T For patients who will need to undergo regular MRI's or need to have scans where the anatomy close the implant site needs to be visible.

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Selecting the sound processor

Type of hearing loss

Conductive hearing loss

For candidates with a purely conductive loss, we recommend focusing on the sound processor which offers the features most suitable for the candidate's own requirements. Any Baha device will provide sufficient amplification.

Mixed hearing loss

The fitting range of the selected sound processor must cover the extent of the sensorineural loss. In common with other hearing devices, the clinical rule of thumb is: if the hearing loss is in the lower third of the fitting range, a more powerful sound processor may produce better outcomes.

When using the Baha Attract System, soft tissue attenuation must be taken into account (see section on Choosing the right Baha system).

Single-sided sensorineural deafness (SSD)

For most candidates with SSD, the choice of sound processor can simply be based on which device they find offers the most useful features. In some cases, however, the sound processor may need to be capable of delivering added amplification to provide sufficient audibility in the contralateral ear. SSD candidates may benefit from a more powerful head-worn processor when there is:

- Larger than expected interaural attenuation. Extra amplification will be required to ensure audibility in the good ear.
- Sensorineural hearing loss progressively developing in the 'good' ear due to presbycusis or noise exposure. Extra gain will be required to amplify the sound above the candidate's thresholds.

Additional considerations regarding sound processor selection

Improved audibility in difficult listening situations

There may be circumstances where additional audibility is needed. A sound processor with wireless connectivity will provide benefits through the use of a remote microphone which can dramatically increase the signal-to-noise ratio. Alternatively, a more powerful processor will make sounds (especially those in higher frequencies, such as 's' and 'sh') easier to understand. A processor with a specific noise program may also ensure audibility and comfort.

Listening at a distance

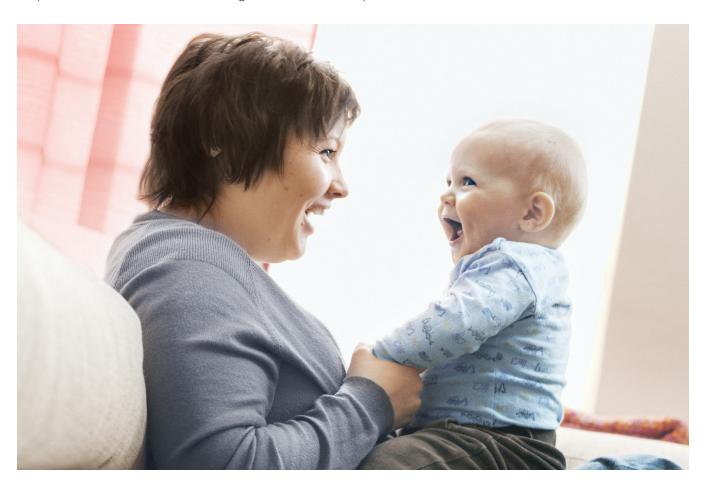
A sound processor with wireless connectivity will provide benefits through the use of a remote microphone located closer to the sound source, which can dramatically increase the signal-to-noise ratio. A more powerful sound processor will amplify soft sounds so they become more audible, enabling better hearing at a distance, in a church, for example. Accessories such as the Telecoil should also be considered as a means of improving hearing at a distance.

Sound processor handling

A sound processor with wireless connectivity will provide the benefit of a remote control for those who find it difficult to manipulate the buttons on the sound processor.

Pediatric considerations

For children a processor with wireless accessories like the mini microphone can be very useful for parents to communicate with their child in noisy environments like traffic or in the playground. A remote control may also be a very useful tool for the parent to monitor the status and settings of their child's sound processor.



Listening through the Baha System

There are several test devices which allow candidates to listen through the Baha sound processor:



Test rod

This is a simple device for quick evaluations. A sound processor is connected to the rod which can then be pressed against the bone behind the ear.



Testband

This is a spring-loaded headband designed for short tests, mainly inside the clinic, as the pressure of the plastic connector plate against the head is quite firm.



Baha Headband

This has a softer spring than the testband, which makes it suitable for longer term tests.



Baha Softband

The elastic Baha Softband is designed to allow long term use by children or adults who are not candidates for surgery. It is available with bilateral or unilateral connectors.

To fit band devices:

When using the Baha Softband, tighten it until it is tight enough to ensure effective sound transmission, but loose enough so as not to cause discomfort.



Step 1 Attach a sound processor to the plastic snap connector disc.



Step 2 Make sure the sound processor is working

then covering your ears

while introducing sound.

by first fitting the band around your own head and



Step 3

Put the band on the candidate's head, placing the plastic snap connector disc against the selected mastoid.



Step 4

Position the sound processor behind the ear. To avoid feedback, make sure the processor doesn't touch the ear or skin.

NOTE: For candidates with bone defects or other problems where a testband/ headband is not suitable, the Baha Softband may provide a better testing solution

Sound processor considerations for pre-operative tests

We recommend using the most recent sound processor available for this test as it may provide benefits in terms of signal processing and wireless capabilities. If the client needs more audibility, change to a more powerful sound processor.

For SSD candidates, a head-worn sound processor should be used, as a body-worn device will not help alleviate the head shadow effect due to its microphone placement.

While factory settings may be a starting point for quick demonstrations, it is suggested that the processor is programmed using Baha Fitting Software to ensure the best possible experience for the candidate. Baha Fitting Software offers several features which may help optimize demonstrations with a headband or Baha Softband.

To program the sound processor for a demonstration, follow these steps:

- Enter the patient's bone conduction thresholds in the Baha Fitting Software, or import them from NOAH
- Select your sound processor in the Selection Screen and click on the Detect button
- Connect the sound processor to the Baha Softband (or headband) and place it on the candidate's head
- In BC Select, select Demo as the connection type
- Run a Feedback Analyzer measurement if supported by the sound processor
- · Perform a BC Direct measurements, which is a threshold test in-situ
- Make sure to click "Save" before disconnecting the sound processor

Formal listening tests during system selection:

It is important for the candidate to have a chance to test out the Baha System on a Softband. A more formal evaluation is in order to help determine benefit. The following listening tests can be incorporated into the clinical setting with a little practice and minimal equipment.

Functional Listening Evaluation (FLE) - designed to determine how listening skills are affected by noise, distance, and visual access in an everyday listening environment. The evaluation with and without the Baha System on a Softband provides evidence of benefit.

The FLE can be used for children and adults by varying the target materials and listening environments.

NOTE: For more details on how to fit a Baha System please refer to the Baha Fitting Guide and instructions for use.



Selection of implant side

Clinical research suggests that children with binaural conductive hearing loss should be fitted with bilateral sound processors on a Baha Softband, preferably before the age of six months^{21,22} If bilateral fitting is contraindicated, fit the side with the best bone conduction thresholds. For children with SSD, the Baha sound processor should be placed on the deaf side.

Counseling

Parents of hearing-impaired children have a great need for counseling. They may have questions about hearing loss and how it will affect their child's development. They need guidance about how to help their child achieve the best possible results, especially in speech and language development. They will want to know why a Baha System is the best solution for their child. In addition, counseling should cover the treatment process from both a short and long-term perspective. Therefore, both the Baha Softband and the prospect of surgery should be discussed.

Device selection

Due to weakening of the sound signal as it passes through the skin, the gain from a Baha sound processor fitted on the Softband will be reduced by 10-15 dB, some of which may be compensated with extra amplification by fitting the child with the Baha Fitting Software. We recommend using the most recent sound processor as it may provide benefits in terms of signal processing and wireless capabilities. If the child needs more audibility, change to a more powerful sound processor. The benefit of a stronger processor is most noticeable at higher sound frequencies because these are weakened to a greater extent than low frequency signals when passing through the skin?⁰



Fitting the Baha Softband for children

It is important for a child to have a positive first experience with the Baha Softband.

- Program the sound processor for the child's individual hearing loss using the Baha Fitting Software. Optimize the sound processor fitting by selecting suitable parameters in the BC Select screen. Also, whenever possible, conduct BC Direct measurements, which are in-situ bone conduction thresholds, using the child's processor.
- 2. Attach the sound processor to the plastic snap connector disc.
- 3. Test that the sound processor works by first putting the Softband around your own head, covering your ears and introducing sound.
- 4. Put the Softband around the child's head, quite loosely at first. It may be helpful to let the child become familiar with the Softband before putting in on the head.
- 5. Place the plastic snap connector disc against the mastoid or another bony location on the skull. Avoid placing it on the temple bone, as this may be uncomfortable for the child. Check that the entire snap connector disc is in contact with the skull.
- 6. Tighten the Softband until it is close-fitting enough to ensure effective sound transmission, while also loose enough so as not to cause discomfort. Make sure your can fit one finger between the head and the Baha Softband this will ensure it is not too tight.
- 7. Ask the parent or caregiver to talk to the child or sing a song to provide a pleasant hearing experience. Watch for the child's reaction.









NOTE: Once the Baha Softband is tight enough to transmit sound effectively, additional tightening will only increase the sound marginally.²³

Counseling of candidates

Before receiving treatment, candidates should be motivated, well informed and carefully counseled about having realistic expectations of their Baha System. During counseling, it is important to understand an individual's diagnostic background so that advice is given to meet their particular needs.

The main areas that should be covered during counseling are:

- Benefits of the Baha System in relation to the individual's own needs
- The complete treatment process
- Expectations of hearing improvement
- Aftercare
- Costs/reimbursement/funding

Benefits of Baha System for candidates

Conductive/mixed hearing loss

The use of an implantable bone conduction solution provides several unique advantages over other treatments for conductive/mixed hearing loss. In most cases, the Baha System may deliver significantly improved sound quality, comfort and speech intelligibility.

Single-sided sensorineural deafness (SSD)

As SSD candidates may have specific expectations due to their type of hearing loss, it is important to ensure these expectations are realistic. The audiologist or physician can help individuals understand their perceived handicap and, more importantly, their motivation for better hearing.

NOTE: After fitting, the full restoration of directional hearing should not be expected as all sounds will be processed by the remaining functioning cochlea.⁵

Treatment process

Once candidates have had an opportunity to test the Baha System, they should be informed of the treatment process.

- You should tell the candidate that they will need to have surgery. Emphasize that the surgical procedure is considered minor and may be performed in an outpatient setting under local or general anesthetic. Assure the candidate that all of their questions about the procedure will be answered by the surgeon at the time of that consultation.
- Explain that a small titanium implant will be placed just behind the ear.
- Clarify that the implant will be connected either to an abutment or a magnet. The abutment will protrude through the skin, while the magnet provides a connection without a skin penetrating abutment. At this point, showing a visual of the Baha System may reduce any anxiety.
- Explain how the sound processor will be fitted.

NOTE: Emphasize that there is no risk of damage to the candidate's hearing from Baha surgery and point out that the procedure is fully reversible. More detailed information about the surgical procedure should be provided by the surgeon.

Expectations

Ensure the candidate has realistic expectations of hearing improvement. Preoperative Baha testing is essential in this respect and listening through a Baha sound processor on a testband or Baha Softband will give candidates an experience comparable to that of the post-surgical outcome.

Aftercare

Candidates who will have the Baha Connect System must be able to maintain and clean the area around the abutment, either by themselves or with help from others. Careful consideration must therefore be given to the candidate's ability to maintain proper hygiene. With children, explain to parents or caregivers that hygiene will be their responsibility. No special aftercare is necessary for the Baha Attract System.

Cost, reimbursement and funding

Reimbursement of the cost of a Baha System is an important issue and this should be discussed during the preoperative counseling. Terms and conditions for reimbursement and funding vary between regions. For information about the terms and conditions applicable in your area, please consult your local Cochlear representative.

NOTE: Please contact your Cochlear representative for details of cost, reimbursement and funding available in your country.

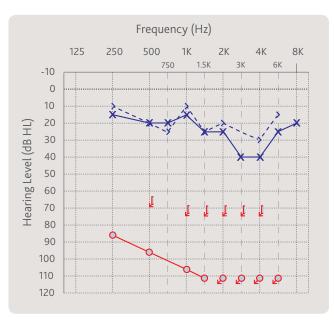
Case histories

Case history 1

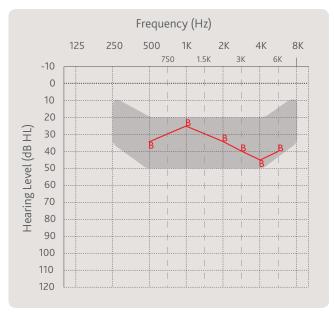
Patient:	Male
Age:	70
Occupation:	Retired
Type of Hearing Loss:	SSD
Diagnosis:	Sudden Sensorineural Deafness and Tinnitus since 1998.
Aided Side:	Right
Baha System:	Baha 4 Attract System
Sound Processor:	Baha BP110 Power
History:	Patient has been deaf on his right ear since 1998, received a Baha 4 Attract System in 2013. Fitted with the Baha BP110 Power Sound Processor and Sound Processor Magnet 3. Speech perception increased from 6 – 84% at 65dB. Very happy with the outcome.
PTA ₄	N/A

Improvement:

Unaided audiogram



Aided audiogram



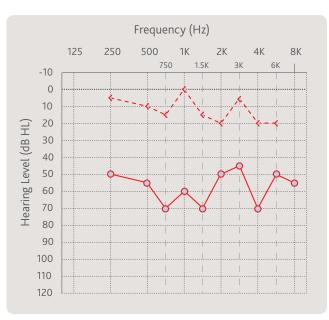
B = Aided threshold with Baha sound processor in soundfield testing



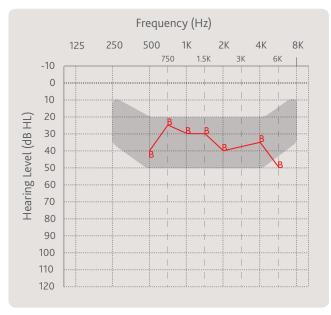
Case history 2

Patient:	Female
Age:	48
Occupation:	Office worker
Type of Hearing Loss:	Unilateral conductive
Diagnosis: Since 2006	CSOM since 2008, Left side AN surgery, deaf.
Aided Side:	Right
Baha System:	Baha 4 Attract System
Sound Processor:	Baha 4 Sound Processor
History:	Patient has been deaf in her left ear since 2006 after an acoustic neuroma surgery. Chronic suppurative otitis media in the right ear since 2008. Received a Baha 4 Attract System in 2013. Fitted with the Baha 4 Sound Processor and Sound Processor Magnet 5. Speech perception increased from 0 – 66% at 65dB.
PTA₄ Improvement:	59 to 36dB

Unaided audiogram



Aided audiogram



B = Aided threshold with Baha sound processor in soundfield testing

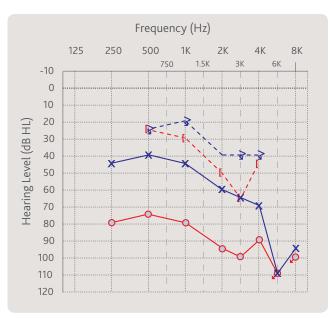
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Case history 3

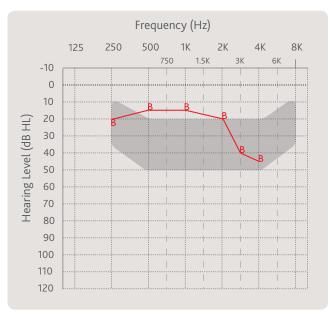
Patient:	Male
Age:	53
Occupation:	Nurse
Type of Hearing Loss:	Bilateral mixed hearing loss
Diagnosis:	Chronic otitis media, middle ear bones removed after osteomyelitis, tympanic membranes ruptured bilaterally.
Aided Side:	Right
Baha System:	Baha 4 Connect System
Sound Processor:	Baha BP110 Power
History:	The client has had hearing problems his entire life. The client received his Baha System in 2004. In 2007 he received a new implant after losing the original due to trauma. He uses his Baha System constantly and is extremely pleased with the sound.
	extremely pleased with the sound.

Improvement:

Unaided audiogram



Aided audiogram



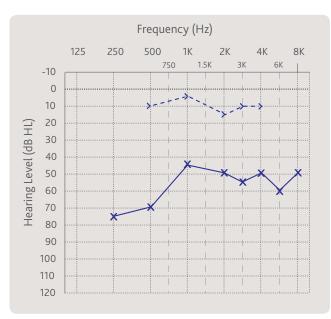
B = Aided threshold with Baha sound processor in soundfield testing



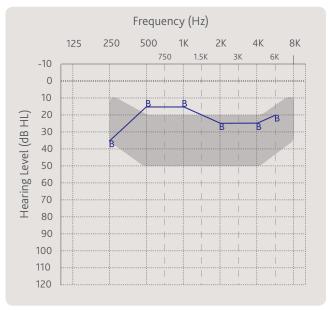
Case history 4

Patient:	Female
Age:	13
Occupation:	Student
Type of Hearing Loss:	Bilateral Conductive hearing loss
Diagnosis:	Treacher Collins syndrome
Aided Side:	Left
Baha System:	Baha 4 Connect System
Sound Processor:	Baha 4 Sound Processor
History:	The client has used Baha System since she was 3 years old. She experiences great benefit from the Baha System in classroom situations
PTA₄ Improvement:	54 to 20dB

Unaided audiogram



Aided audiogram



B = Aided threshold with Baha sound processor in soundfield testing

NOTE: Results obtained in case studies are not predictive of results in other cases, which may vary from those detailed.

Hear now. And always

As the leading global expert in implantable hearing solutions, Cochlear is dedicated to bringing the gift of sound to people all over the world. For thirty years, Cochlear has pioneered this technology, helping more than a quarter of a million people reconnect to their families and friends.

Along with the industry's largest investment in research and development, we continue to partner with leading international researchers and hearing professionals, ensuring that we are at the forefront of hearing science.

For our customers, that means access to our latest technologies throughout their lives, and the ongoing support they need.

As your patient's partner in hearing for life, Cochlear believes it is important to convey not only the benefits, but also the potential risks associated with a Baha procedure.

Not everyone with hearing loss is a candidate for a Baha System. The Baha System is contraindicated in patients with inadequate bone quality or quantity to provide stability and support for the implant, or in patients who will be unable to maintain and clean the skin around the abutment. In the U.S., use of the implanted fixture is also contraindicated in children under age 5 years.

All surgical procedures include an element of risk, and it is impossible to guarantee success. The device may fail to osseointegrate for a number of reasons, including physiological and surgical issues as well as traumatic impact to the implant site. On rare occasions the skin around the abutment may become inflamed from a mild infection or the skin may grow back towards its original thickness. For complete information regarding the risks and benefits of a Baha procedure, please refer to the Instructions for use for the Baha Implant available at www.Cochlear.com/US/BahaIndications

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