Telehealth in Audiology and the World's **First Trans-Atlantic Hearing Test**

THE AMERICAN ACADEMY OF Audiology's Web content editor, Douglas L. Beck, AuD, sat down with De Wet Swanepoel, PhD, to learn more about "e-health" and "telehealth" issues and the benefits of incorporating these technologies around the world. Don't miss this featured session. Moderated by James W. Hall III, PhD, Dr. Swanepoel will present with Mark Krumm, PhD, and Dirk Koekemoer, MB-ChB, tomorrow, Saturday, April 4, from 8:00-9:30am.

Academy: Good Morning, De Wet. Swanepoel: Good Morning, Doug.

I know your time is limited and I very much appreciate you speaking with me today. I recall your amazing article in Audiology Today from 2008. The facts you brought forward about world health, with particular regard to hearing loss

identification and management in Sub-Saharan Africa was startling. Congratulations on that eye-opening and groundbreaking article.

Thanks, Doug, that's very kind.

De Wet. I know vou're working with Jay W. Hall, PhD, on a telehealth project to be broadcast here, live at AudiologyNOW!, in Dallas. First, let me note that the term "telehealth" has been with us in the United States for decades, and it implies a "telephone-based" program, but in this case, you and your colleagues have maintained the traditional term ("telehealth") so as to give the basic idea, but it's really more about computer-to-computer communications, or perhaps we might call it "e-health." is that right?

Yes, that's correct. We use the term "telehealth" as it is more familiar than "e-health" and it gets the discussion started.

Very good. Okay, then, please tell me why we need to learn about "ehealth" and what is it that you'll be doing tomorrow morning?

Doug, as you know, even across the United States, audiologic services are simply not available in some far out rural and innercity areas. However, in many developing countries, trained hearing health-care personnel do not even exist. Telehealth allows us to provide audiologic services to underserved regions through technological advances. So, tomorrow morning, my colleagues, Dr. Mark Krumm and Dr Dirk Koekemoer, and I will present a discussion moderated by Dr. James W. Hall III, and then we'll offer a demonstration of the first trans-Atlantic hearing test for the audience to experience tele-audiology firsthand.

I recall 15 years ago giving a presentation at the Academy meeting—we had slide projectors back then. Of course, during my presentation, the bulb burned out and there were no spares to be found. That was a "technical disaster" at the time. I can only imagine the technical concerns you'll be faced with tomorrow morning! Nonetheless, please tell me a little more about the world situation and the need for audiologists to be involved with e-health.

Hearing loss is the third largest contributor to the global disease burden across the globe.



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In 2006, the World Health Organization (WHO) estimated there were 642 million people with mild or greater hearing loss, about 10 percent of the world population. The amazing thing is that the vast majority of these individuals live in regions where there are no such services. The WHO reports only 1 of every 40 people who would benefit from hearing aids has one. Telehealth offers the opportunity to provide audiologic services to underserved regions by capitalizing on technological advances. So then, this Saturday, our session will consider and review the principles and applications of tele-health in audiology across the United States and developing countries, with an emphasis on the value of technology as the primary hope for widespread impact across underserved re-

gions. That is, telehealth has unmatched potential to deliver services to the millions of people globally who live in regions where conventional audiology is not an option.

And, I believe you're also going to launch the Tele-Audiology Network? Yes. The network is dedicated to improving hearing health of individuals globally through technology. Our primary goal is to increase access to hearing professionals and hearing devices across the world. The Tele-Audiology Network (TAN) has been designed to provide a virtual platform where hearing health skills and resources can be linked to underserved areas through telemedicine and e-medicine technologies. The Tele-Audiology Network Web site is up and running, and the readers can learn more from the

Web site (www.teleaudiology. org). Audiologists from around the globe can volunteer their services virtually at a clinic or clinics of their choice.

Where does the funding come from?

Funds for the purchase of telemedicine audiometers and other expenses will be dependent on donations from individuals or organizations. Sponsors will be able to see how many people are being treated and the impact they're having. For the initial program, the clinics will be in South Africa. Once the resources are available, clinics from any country can be included. We're hoping audiologists will volunteer their services, and hopefully organizations and individuals will donate funds to support the network.

This is a fascinating project and I wish you all the best as you launch the new network.

Thanks, Doug.

My pleasure, De Wet. Again, I'd like to urge the readers to attend the session tomorrow morning, and please visit the Web site, too, www.teleaudiology.org. Additionally, readers can send an e-mail directly to you if they need more information at dewet.swanepoel@up.ac.za.

REFERENCE

Swanepoel, D. (2008): Infant hearing loss in developing countries – a silent health priority. Audiolog y Today, 20(3):16-24.

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