Frequently asked questions

Audible Contrast Threshold (ACT™)





Question	Answer
What is ACT measuring?	The ACT diagnostic test is an above-threshold, non-language specific test that quantifies an individual's real-world ability to hear in noise, with the intention of determining the level of help in noise needed. The test applies the shape and levels of the audiogram to ensure that the correct stimulus intensity is applied. The ACT test then applies a client's audiogram to deliver an above-threshold stimulus (a siren-like sound) to objectively map their hearing-in-noise ability. In other words, where the audiogram measures the quantity, i.e. hearing ability, ACT measures the quality of hearing. This makes ACT a robust assessment that reflects a person's real-world hearing abilities.
When do I perform ACT?	A pure-tone audiogram must be completed prior to performing ACT as the test makes use of pure-tone thresholds to ensure audibility of the ACT stimulus. Most HCPs may choose to perform ACT straight after completing pure-tone audiometry. However, as long as an audiogram is selected, ACT can be performed at any stage of the client journey.
What information do I need from the audiogram to run ACT?	To run ACT, you must have stored air conduction thresholds for the following mandatory frequencies: 250 Hz, 500 Hz, 1 kHz, 2 kHz, and 4 kHz. Inter-octave frequencies will also be considered in ACT testing if they have been completed. Please note that a 'no response' will be factored into the ACT test, but a 'could not test' or 'did not test' will be excluded, and you will not be able to complete the ACT test.

Question	Answer
What equipment do I need to perform ACT?	 You will need: One of the following products which will offer ACT: Interacoustics Affinity Compact (software version 2.21.1. onwards) with licensed AC440 audiometry module including an ACT license. MedRx AVANT ARC, AVANT A2D+, AWRC, or AVANT (Stealth) GSI Audio Star Pro Connected PC and keyboard Headphones or insert earphones Client response button
Which clients can ACT be performed on?	ACT is intended to be performed on anyone over the age of 18 that can complete pure-tone audiometry. However, since ACT is tested above threshold, there are instances where the HCP should consider whether the test is appropriate for their client. Successfully obtaining an ACT value can be more difficult if your client has: • A severe-to-profound hearing loss • Hyperacusis or severe tinnitus • Less cognitive capacity to focus during the test
Can ACT be performed on those with a unilateral hearing loss?	The ACT value reflects a client's real-life, everyday hearing-in-noise ability by stimulating both ears using their audiogram. For this reason, most clients with a unilateral hearing loss are tested the same as any other patient. If a client has a hearing loss that requires only a single hearing aid to be fit for the better ear, the ACT test should be done with the correct audiogram for the aided ear, and a normal audiogram for the unaided ear. This is again to ensure the ACT value provided is reflective of the client's everyday listening.
Can ACT be performed on the pediatric population?	ACT studies have not been carried out with a pediatric population as of yet. The normative data is based on an adult population only. Therefore, the recommendation is to only perform ACT on clients over the age of 18.

Question	Answer
How frequently should I perform ACT on the same client?	 As a component of the test battery, ACT can be remeasured: When the pure-tone audiogram is remeasured, for a variety of reasons If a user continues to report difficulties hearing speech in noise after their fitting When a user reports an increase in hearing difficulties
Does performing ACT mean that I should not perform Real Ear Measurements (REM)?	No, it is still important to perform REMs. ACT will support you in setting the adaptive help features of your client's hearing aid, while REMs will support you in prescribing the correct dose of gain for your client and measuring gain to target.
Does performing ACT mean I do not need to perform a traditional speech in noise test?	The ACT test is a tool for predicting your client's aided speech in noise ability. The measured ACT value can be specifically used to objectively prescribe hearing aid help in noise. The ACT value is also a helpful tool for counseling and benchmarking your client's speech-in-noise abilities to those of other clients. This information is accessible to the HCP early in the client journey before a hearing aid discussion has taken place. With ACT, you are able to provide the appropriate help needed for clients who have difficulty understanding speech in noise. With a traditional speech-in-noise measurement, you are required to do the fitting before understanding or reflecting on your client's performance in noisy environments. ACT is not a validation measure, so if the wish is to measure speech-in-noise abilities unaided versus aided, as an example, then traditional speech-in-noise tests are appropriate.

Question	Answer
How loud is the ACT test?	The ACT test is automatically adjusted based on pure-tone audiometry results. This means the ACT stimulus is clearly audible for all clients. For a person with normal audiometric hearing thresholds, the ACT stimulus is presented at 63 dB SPL, aligned with conversational speech. For clients with hearing loss, audibility is considered for each ear and each 1/3-octave band in the stimulus frequency range, with the stimulus shaped such that there is at least 15 dB of audibility in all 1/3-octave bands.
Is there a cut-off severity or degree of hearing loss that the ACT test is not recommended for?	Affinity suite will issue a warning if the hearing loss limit has been exceeded and the transducers are unable to provide 15dB SPL above threshold. In this case, the test can run with a reduced compensation for hearing loss that will not meet 15 dB SPL at all frequencies.
How can I recognise a false positive or false negative?	Just as in pure-tone audiometry, some ACT runs may indicate inconsistent responses by the client. False positives (for instance, the client pressing the button too often) are automatically registered by the software and shown in the top right-hand bar of the ACT screen. False negatives (for instance, if the client does not respond to an ACT stimulus that they previously responded to, at the contrast level being tested) can be addressed by the HCP by altering the testing method. In the case of inconsistent runs, it can be helpful to deviate from the Hughson-Westlake (2 down, 1 up) procedure. Please refer to the Interacoustics ACT Quick Guide for examples and potentially helpful deviations.

Question	Answer	
How can I interpret my client's ACT value?	ACT values are determined by level of ACT value lies between -4 and +4 dB mean that the client can hear the con levels, while higher ACT values mean hear the contrast at much stronger conormal. This means that the higher the speech-in-noise help the client will not moderate or severe ACT value, assist communication training can be considerable.	nCL. Lower ACT values strast at near normal that the client can only ontrast levels than ne ACT value, the more eed. For those with a live devices and dered. The table below
	e (dB nCL) ACT value (dB nCL) 7 to <10	ACT value (dB nCL) 10 to 16
	cy Level Severity Level ild Moderate	Severity Level Severe
What does nCL stand for?	The ACT value is denoted as dB nCL we'normalised Contrast Level' and indicator detecting speech-like modulation with normal hearing persons. In brief, definition of nCL stands for: • n (normalised): the scale is normalised normative data acquired from your hearing thresholds within normal lief. • C (contrast): clients are detecting a modulation of a signal. • L (level): this is a dB measure and is	ates a client's threshold is in noise, compared , the background sed based on ng individuals with imits a contrast in the
Can I use the ACT value to help prescribe the level of technology?	Yes. The ACT value serves as a pre-fit can help you choose the appropriate location. The combination of your client audiogram and, to a lesser extent, ag meaningful for predicting a client's specisely. The ACT value is therefore that an HCP should consider when che Knowing the client's ACT value can also confidence in knowing when assistive counselling tools can be a valuable adsolution.	hearing aid for your 's ACT value, pure-tone le, is clinically beech-in-noise ability one of many factors oosing a hearing aid. so help build your e listening devices and

Question	Answer
Which hearing aids have automatic integration for the ACT value?	Hearing aids on the Polaris R platform (Oticon Real and onwards) can use an ACT based prescription of help-in-noise which is automatically integrated into Oticon Genie 2.
How do I access the ACT value in the fitting?	In Oticon hearing aids on the Polaris R platform and onwards, the integration of the evidence-based ACT prescription into Genie 2 will allow an automatic, personalised first fit that provides contrast between speech and noise. You will have the option of choosing ACT-based personalisation during the fitting and the ACT value will be visible in the personalisation screen in Genie 2. If an ACT value is available in the user database, it will be read out directly by Genie 2. You also have the option to manually enter an ACT value, and the prescribed help-innoise settings will be automatically applied to the hearing aid fitting. If an ACT-based fitting is chosen, the first-fit settings in the MoreSound Intelligence (MSI) screen in Genie 2 will be adjusted to reflect the objectively predicted speech-in-noise difficulties of the user, while remaining adjustable for fine-tuning if needed.

