

Loud and Clear

Cochlear implants can improve quality of life

After 50 years as a grounds maintenance landscaper, Bob Erdahl, 73, was enjoying retirement, hosting family gatherings and watching his grandkids' baseball games.

However, while retirement gave him more quality time with his family, hearing loss increasingly created distance between Bob and those he loved most.

"Part of the impetus to get the cochlear implants was that it was tough to interact with my kids and especially my grandkids," Bob said. "The grandkids don't understand why Grandpa can't hear them or why Grandpa is ignoring them."

After decades of exposure to noise from mowers, tractors and excavating equipment, Bob's hearing had diminished. He had worn hearing aids for nearly 35 years, but his hearing continued to worsen and deplete his quality of life. In early 2025, he scheduled an appointment to explore other options through the Froedtert & the Medical College of Wisconsin Koss Cochlear Implant Program, one of the largest cochlear implant programs in the Midwest.

HEARING EVALUATION

During Bob's initial appointment, Jamie Jensen, CCC-A, AuD, audiologist, evaluated how well he functioned with hearing aids and whether a cochlear implant could improve his communication. The evaluation included repeating words and sentences in a hearing booth.

"Hearing aids amplify everything," Bob said. "It almost makes things worse."

People with hearing loss often rely on visual cues and closed captions, struggle in noisy social settings and develop listening fatigue. Some simply smile and nod or withdraw. Still, cochlear implants are underutilized. Some people have concerns about surgery or appearance. Others don't recognize how poorly they are hearing.

Bob, however, had reached a tipping point. After qualifying for a cochlear implant, his next steps included a CT scan and a consultation with Michael Harris, MD, otolaryngologist and MCW faculty member.



JAMIE JENSEN, CCC-A, AuD



MICHAEL HARRIS, MD

COCHLEAR IMPLANT

In June 2025, Dr. Harris implanted an internal receiver behind Bob's right ear and placed an electrode array in a tiny opening in the cochlea. The outpatient surgery required general anesthesia.

Afterward, Dr. Harris sat down with Bob's family, in part, to reemphasize that an external device would not be activated for



BOB ERDAHL

several days. The work Bob put in after the activation was as essential as the surgery itself.

"It's not just flipping a switch," Dr. Harris said. "It really is a fascinating interplay between the brain and this technology. For that reason, it takes some work."

When the time came for Jensen to place the external device behind Bob's ear and activate it, he could hear everything — including the HVAC buzzing in the background. As is typical, Jensen adjusted the device to ensure a comfortable volume level. However, Bob described the sound quality as "tinny."

Some patients describe the initial sound as robotic or unclear, but improvements in clarity often occur within the first six months after surgery and can continue for up to two years. The best outcomes result when patients wear the external device throughout their waking hours.

Consistently engaging in listening therapy also produces strong outcomes. For example, reading aloud helps patients draw connections between spoken words and how they sound through the implant. These practices help retrain the brain to adapt to new kinds of input, a phenomenon known as neuroplasticity.

"I tell my patients, if I wanted to run a marathon and I put on my running shoes and then did not change anything else about my lifestyle, I'm not making progress toward my goal," Jensen said. "If they get a cochlear implant and put it on, but they are not increasing their listening throughout the day, they're not going to improve their understanding."

To fine-tune the devices, patients meet several times with their audiologist throughout the first year after surgery and continue periodic visits throughout their lives. For convenience, the audiologists offer remote visits, an innovative approach for a program of this kind.

Because of his strong ties to family and his church community, Bob frequently interacted with others, which helped accelerate improvement in his right ear. Within weeks, he knew he wanted cochlear implants in both ears, and in October 2025, Dr. Harris performed a second surgery.

Today, Bob enjoys sharing his experience with others, even serving as a panelist at Koss Cochlear Implant Program patient and family informational meetings. Cochlear implants have increased his independence, improved his quality of life and strengthened interactions with his family and friends.

"My wife and I hike, and I can hear the wind rustling through the trees now," Bob said. "I can hear all kinds of wildlife. I'm a lot more connected with everything around me."

For an appointment with a hearing specialist, call **414-777-7700**. Learn more about cochlear implants at ***froedtert.com/cochlear-implant***.