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Auditory Training Tech

Aural rehab is vital to hearing device success, and apps can aid in this essential brain training.

Auditory Training: There's an App for That

Retraining the brain to hear after hearing loss is a game changer for patients, and gamified programs accessible by phone make the practice that much easier to incorporate into a hearing care plan.

By Melanie Hamilton-Basich

Fitting a hearing aid or activating a cochlear implant can be a significant step in an audiology patient's hearing journey, but it is often just the beginning. While advanced technology can restore access to sound, the brain must relearn how to process and interpret that new auditory information. This critical phase of aural rehabilitation targets the neural adaptation required for true comprehension, especially in the complex listening environments of daily life. For hearing care professionals, guiding patients through the process of auditory training is essential for maximizing device benefit and long-term satisfaction. Thankfully, there are apps available that can be of help on this journey.

As Arianna Bastys, AuD, an audiologist from HearCare Audiology Center in Sarasota, Florida, often tells her patients, "You hear with your brain, not your ears." This simple statement encapsulates the core principle of aural rehabilitation. Hearing devices deliver the input, but the brain does the heavy lifting of turning sound into meaning.

In a busy clinical setting, however, dedicating sufficient time to in-person auditory training can be a significant challenge. This is where a growing ecosystem of digital tools and mobile apps is creating new opportunities, offering structured, accessible, and engaging ways for patients to actively participate in their own hearing success.

The Neurological Need for Training

The fundamental goal of auditory training is to accelerate the brain's relearning process. Shruthi Raghavendra, PhD, is a hearing and auditory neuroscience researcher. Through her experience working alongside hearing care professionals and cochlear implant users—particularly in the areas of speech perception, listening

effort, and auditory rehabilitation—she has found this is not just a helpful supplement but a crucial component of care.

"Hearing devices restore access to sound, but the brain still has to adapt, especially for speech in noise, rapid speech, accents, or complex listening environments," Raghavendra emphasizes. "Auditory training targets this neural adaptation by strengthening the brain's ability to map sound input to meaning."

This need is particularly acute for certain patient populations. For cochlear implant users, the electrical stimulation reaching the brain is fundamentally different from natural hearing, requiring a significant period of adjustment. Even for hearing aid users, the impact of long-term auditory deprivation cannot be overlooked. Raghavendra notes that after extended periods of hearing loss, the brain may have "forgotten" how to efficiently process certain acoustic cues." Consistent training helps to rebuild these neural pathways, improving the brain's efficiency and ultimately leading to clearer speech perception.

While HCPs may understand this, patients might need some convincing to get on board.

Positioning Auditory Training in the Clinic

How hearing care professionals introduce these tools can significantly impact patient engagement and success. The most effective approach, according to Raghavendra, is to frame auditory training as an active, empowering part of the reha-

bilitation process rather than a chore. "In practice, auditory training apps are most successful when they are framed as rehabilitation, not homework," she says.

This reframing is often initiated at key moments in the patient's journey, such as during post-fitting follow-up appointments, after cochlear implant activation, or when a patient expresses frustration with understanding speech despite having well-programmed devices. Setting clear and manageable expectations is paramount. Raghavendra advises that clinicians recommend "short, consistent practice—10 to 20 minutes a day," and establish specific, achievable goals, such as improving speech clarity or gaining confidence in noisy settings.

Reassuring patients that initial difficulty is a normal part of the process is also vital. "When apps are positioned as a way to train the brain, not fix the device, patients are more likely to engage," she adds.

Benefits Beyond Better Hearing

When patients commit to consistent training, the results can be transformative, extending beyond simple improvements in auditory scores. The most commonly reported benefit is enhanced speech understanding, particularly in background noise, which remains one of the biggest challenges for individuals with hearing loss. This is often accompanied by a faster adaptation period to new hearing aids or cochlear implant maps, as the brain more quickly learns to work with the new signal.

Beyond these primary outcomes, many

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patients experience a reduction in listening effort and fatigue. The cognitive load required to decipher speech decreases as the brain becomes more efficient, making social interactions less draining. However, Raghavendra points to a powerful psychological benefit that is often overlooked.

“Patients feel empowered,” she says. “Instead of passively waiting for technology to ‘work,’ they feel they are actively participating in their own progress, which improves motivation and long-term outcomes.” Bastys echoes this sentiment, noting that daily auditory training “keeps patients motivated and provides them with a sense of control in their hearing outcomes.”

This active role can be the difference between a patient who feels their devices “weren’t worth it” and one who experiences a tangible improvement in their quality of life.

An Array of App Offerings

The many auditory training apps available offer clinicians and patients a wide array of tools tailored to different needs and goals. These platforms range from

comprehensive rehabilitation systems to gamified exercises and progress-tracking utilities.

Some platforms, like Neurotone’s Lace AI Pro, function as robust, multi-faceted training systems. Lace AI Pro uses artificial intelligence to create personalized training plans, adapting the difficulty of exercises in real time based on user performance. It has recently further expanded its offerings to include features like training with the cloned voices of family members, an extensive library of educational videos on communication strategies, and a branded portal for clinicians to track patient progress. This level of integration supports a more holistic approach to aural rehabilitation. HCPs can make Lace AI Pro available to their patients by paying for a subscription through Neurotone.

For cochlear implant users, specific tools like Med-El’s ReDi (Rehabilitation Digital) app are designed to address their unique challenges. ReDi also uses AI to provide tailored auditory and speech exercises that can be started immediately after CI activation. A key feature is its dual-component system: an app for the patient

to use independently and the ReDi Studio, a backend platform where hearing care professionals can create and assign custom activities, monitor progress remotely, and provide personalized care from a distance.

Some apps without specific ties to the audiology field focus on engagement and motivation through gamification of exercises. Hearoes, for example, offers over 75 different games designed to improve skills like phonetic awareness, auditory memory, and listening in background noise. By presenting challenges in a game-like format, such platforms aim to make the repetitive nature of training more enjoyable and sustainable.

Similarly, the HearingSuccess portal, a collaboration between Phonak and Advanced Bionics, provides a suite of resources for both hearing aid and cochlear implant users, including apps like SoundSuccess, which focuses on building communication confidence, and WordSuccess, designed to improve word discrimination in quiet and noise.

Finally, some tools are centered on performance monitoring. Advanced Bionics’ AB ListenFit app provides users with a series of tests to check their ability to hear

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in various everyday situations. This allows them to set goals, receive instant feedback, and track their progress over time, reinforcing their motivation and keeping them actively involved in their hearing care journey.

The Critical Challenge of Adherence

Despite the clear benefits and the variety of tools available, the single greatest obstacle to successful auditory training is patient adherence. "Patient compliance and commitment are definitely challenges I have encountered," says Bastys. "For optimal outcomes, patients need to be consistent

in completing their daily auditory training exercises."

Raghavendra agrees, identifying adherence as the "biggest challenge" she has seen in incorporating auditory training apps into patients' hearing care plans. She explains that many apps rely heavily on a patient's self-motivation, and without consistent clinician follow-up or personalization, usage can drop off quickly. Several factors contribute to this, including exercises that feel generic or do not seem to generalize to real-world listening situations, a lack of clear feedback for the clinician to review with the patient, and accessibility issues for older adults who may be less comfortable with technology.

This is why the role of the hearing care professional is so indispensable. An app, no matter how sophisticated, is not a standalone solution. "Auditory training is effective, but it's not magic," Raghavendra

cautions. "It works best as part of a broader rehabilitation plan."

The Clinician's Role in Maximizing Success

To overcome the adherence challenge and ensure patients get the most out of these digital tools, clinicians must remain at the center of the process. This is true when HCPs are working alone or in concert with speech language pathologists or other specialists. The most successful outcomes occur when auditory training is treated as a clinical intervention, not merely a recommendation.

Raghavendra advises clinicians who may be hesitant to integrate use of these apps into their practice to "start small." She suggests recommending short, structured use and, most importantly, following up on it during subsequent appointments, just as one would with any other aspect of treatment. Discussing progress, troubleshooting issues, and reinforcing the "why" behind the training can dramatically improve engagement. Bastys finds that user-friendly apps with provider-facing progress tracking, like Lace AI, facilitate this process. "It's easy for providers to track their patient's progress," she says. And in her experience, "The app is not complicated even for patients who are less comfortable with technology."

Ultimately, the professional's clinical judgment is key. Not all apps are suitable for all patients, and outcomes can vary based on factors like the duration of hearing loss, age, and cognitive function. "Clinicians should look for apps that adapt difficulty based on performance, target real-world listening challenges, provide measurable progress metrics, and are easy to use and engaging," Raghavendra recommends. Most importantly, she stresses the need to match the app to the patient's specific, personal goals, whether that be understanding grandchildren, participating in work meetings, or simply reducing the fatigue of listening.

Auditory training apps are powerful tools that can significantly enhance patient outcomes, but they are not a replacement for professional guidance. By thoughtfully integrating these technologies into a comprehensive aural rehabilitation plan, hearing care professionals can empower their patients to train their brains, take control of their hearing journey, and achieve success far beyond what hearing devices alone can provide. ▀

