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Magnified interaural level differences enhance binaural unmasking in bilateral cochlear implant users

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ABSTRACT

Bilateral cochlear implant (BiCI) usage makes binaural benefits a possibility for implant

users. Yet for BiCI users, limited access to interaural time difference (ITD) cues and

reduced saliency of interaural level difference (ILD) cues restricts perceptual benefits of

spatially separating a target from masker sounds. The present study explored whether

magnifying ILD cues improves intelligibility of masked speech for BiCI listeners in a

"symmetrical-masker" configuration, which ensures that neither ear benefits from a long-

term positive target-to-masker ratio (TMR) due to naturally occurring ILD cues. ILD

magnification estimates moment-to-moment ITDs in octave-wide frequency bands, and

applies corresponding ILDs to the target-masker mixtures reaching the two ears at each

specific time and frequency band. ILD magnification significantly improved intelligibility

in two experiments: one with NH listeners using vocoded stimuli and one with BiCI

users. BiCI listeners showed no benefit of spatial separation between target and

maskers with natural ILDs, even for the largest target-masker separation. Because ILD

magnification relies on and manipulates only the mixed signals at each ear, the strategy

never alters the monaural TMR in either ear at any time. Thus, the observed

improvements to masked speech intelligibility come from binaural effects, likely from

increased perceptual separation of the competing sources.

I. INTRODUCTION

Bilateral cochlear implant (BiCI) use has become more common in recent years, in part because of the potential to provide CI users access to binaural cues. This can help address poor spatial hearing outcomes in BiCI users, including degraded performance on sound localization tasks (Dorman et al., 2016; Grantham et al., 2008; Jones et al., 2014) and spatial release from masking (SRM) tasks (D'Onofrio et al., 2020; Loizou et al., 2009) compared to their normal-hearing peers. These outcomes are due in part to poor sensitivity to interaural time differences (Noel and Eddington, 2013).

Historically, CIs have not provided a very robust representation of acoustic inputs (Lorenzi et al., 2006; Moore, 2008), especially interaural differences important in spatial hearing (Anderson et al., 2024; Grantham et al., 2008; Laback et al., 2015). Specifically, traditional coding strategies do not represent temporal fine structure (TFS); moreover, because processors are not synchronized across the ears, even interaural envelope differences are not very reliable. Several CI stimulation strategies have attempted to re-introduce or extend interaural time difference (ITD) information in BiCIs (van Hoesel et al., 2009; Long et al., 2003; Srinivasan et al., 2020; Thakkar et al., 2023), or TFS more generally (Ausili et al., 2020). However, there are other factors that reduce perceptual sensitivity, including current spread, frequency limitations on phase locking, and interaural asymmetry in electrode position (Anderson et al., 2024; Gray et al., 2021; Laback et al., 2015). In addition, reduced TFS sensitivity arising from the impaired auditory systems of CI users limits spatial hearing benefits even when devices are linked (Kan et al., 2015).

SRM can arise from monaural TMR improvements at the ear nearer the target,

as well as "binaural unmasking" effects based on interaural computations. In normal

hearing (NH) listeners, interaural level differences (ILDs) can provide benefits to speech

understanding both by affecting the monaural mixtures reaching each ear and by

changing the binaural comparisons available to the listener. BiCI users retain some

sensitivity to interaural level differences (Grantham et al., 2008), and thus may achieve

SRM from salient ILDs through both monaural and possibly binaural effects, if the ILDs

are sufficiently large.

Monaural aspects of SRM come about from acoustic changes in the mixture of

target and masker signals reaching an ear. When two competing sound sources arrive

at a listener's head from different directions, the target sound is closer to one ear than is

the masker, resulting in a greater acoustic target-to-masker energy ratio (TMR) in that

ear, a source of benefit termed the better-ear effect (Glyde et al., 2013a, 2013b). Even

in situations where there is no long-term average TMR benefit, ILDs can provide

dynamic short term better-ear advantages ("glimpses") at moments when one of the

maskers has an energy "dip" (Bronkhorst and Plomp, 1992; Gibbs et al., 2022; Glyde et

al., 2013a, 2013b).

Spatial benefits that result from the comparison across both ears, beyond

monaural effects, are referred to as binaural unmasking (Culling and Lavandier, 2021;

Dieudonné and Francart, 2019). Perceived spatial separation can provide binaural

unmasking (Freyman et al., 1999). While ITD cues often are thought to dominate

binaural unmasking effects, ILDs can also contribute to the perception of spatial

differences in competing sources, thereby promoting sound segregation and supporting

selective attention based on perceived source laterality (Best et al., 2005; Ihlefeld and

Shinn-Cunningham, 2008; Middlebrooks and Waters, 2020)producing SRM.

Naturally occurring ILDs thus support selective attention in NH listeners when

target and masker sound sources are sufficiently spatially separated through both long-

term and dynamic better-ear effects, and also by promoting sound source segregation

and enabling spatial selective attention. How ILD information can help BiCI users

perform selective attention is an open question. Here, we are interested in whether

enhancing ILDs can enhance binaural unmasking in BiCI listeners in spatial

configurations where monaural better-ear effects are minimized.

BiCI configurations retain some ILD information, which means that listeners using

such devices can benefit from a positive TMR at the ear nearer the target (Litovsky et

al., 2009; Loizou et al., 2009). However, ILDs are reduced after CI processing (Dorman

et al., 2014; Gray et al., 2021), due to various factors, including dynamic range

compression associated with frontend automatic gain control that operates

independently at the two ears (Archer-Boyd and Carlyon, 2019, 2021; Spencer et al.,

2019), backend mapping (Khing et al., 2013), and independent peak picking (Gray et

al., 2021). These limitations on the perceptibility of better-ear effects help explain why

bilateral CI users show both reduced glimpsing (Gibbs et al., 2022; Hu et al., 2018) and

a reduced ability to selectively attend to a target in the presence of a spatially separated

masker (Akbarzadeh et al., 2020; Goupell et al., 2016). As a result, natural ILD cues

alone are not sufficient to support SRM in BiCI users (Ihlefeld and Litovsky, 2012).

Magnifying low-frequency ILD information (i.e., increasing ILD cue magnitudes to

be larger than those that occurs naturally) can significantly improve speech intelligibility

in BiCI users compared to presenting naturally occurring, unprocessed ILDs (Brown,

2014). Specifically, for a target talker to the left of midline and a masker talker to the

right, magnification of ILDs increases SRM (Brown, 2014). Because ILD magnification

works on the target-masker mixtures at each ear (changing both target and masker

identically in an ear), it does not change the TMR in either ear. This suggests that the

benefits from ILD magnification may be due to improved spatial selection of the target

stream. Although ILD magnification would require synchronization across devices, ILD

cues are simple to introduce into existing BiCI strategies because they only require

sensitivity to differences in stimulation intensity at each ear, which is better preserved in

electric hearing than is timing information.

The current study extends these previous results by comparing different ILD

magnification schemes. We tested speech intelligibility in both NH listeners presented

with vocoded stimuli (Experiment 1) and in BiCI users (Experiment 2). We used three

ILD magnification conditions: No magnification, which used naturally occurring spatial

cues via non-individualized head-related transfer functions (HRTFs; (Gardner and

Martin, 1994); Low-Frequency magnification, which applied the same HRTF-based

natural cues, then applied ILD magnification in frequency bands below 2 kHz where

naturally-occurring ILDs are less robust, similar to Brown (Brown, 2014); and

Broadband magnification, which applied ILD magnification in frequency bands spread

across a wider range of frequencies (125-5500 Hz). Crucially, the Broadband

magnification approach extends magnified ILDs into mid-frequencies (i.e. 1-5 kHz),

which are important for speech understanding (DePaolis et al., 1996).

We also changed the number of processing bands used, compared to what was

used earlier (Brown, 2014). Though listeners benefit from magnification applied to 20

ERB-wide bands below 2 kHz (Brown, 2014), we do not know how results would

change if magnification was applied to fewer independent frequency bands. This is an

important practical consideration if the strategy is to be implemented in BiCIs, since

fewer frequency bands reduces processor cycles, which in turn reduces processing

latency and improves battery life. The current study does not parametrically vary

processing band number due to testing time constraints. As few as six one-octave

processing bands significantly improved localization performance (Brown, 2018), so

here we explored whether benefits could be obtained using only four bands.

The current study also builds on previous iterations of ILD magnification by

testing performance using symmetrical-masker spatial configurations. We employed

these spatial configurations for a number of reasons. First, we wanted to observe the

effectiveness of the strategy in a more acoustically complex scene than the single-

masker configuration used previously (Brown, 2014). We also wanted to control for

better-ear acoustic benefits that arise from naturally-occurring ILD cues in asymmetrical

target-masker configurations, which lead to improved long-term monaural TMR (Glyde

et al., 2013a) and allow many opportunities for shorter-term glimpsing (Bronkhorst and

Plomp, 1992; Gibbs et al., 2022). In a symmetrical-masker configuration with the target

at midline and a masker on either side, better-ear benefits do not increase as target-

masker separation increases; instead, each masker moves closer to its ipsilateral ear

while target position does not change. Shorter-term glimpsing will also be reduced

compared to asymmetrical configurations. Given how we implement ILD magnification,

monaural TMR improvements cannot explain any of the perceptual benefits we observe;

the algorithm is applied to the mixed signals at each ear, decreasing the overall level of

one ear's total acoustic input (depending on the dominant ITD at that time and

frequency). Given this, the monaural TMRs in the two ears do not change with

magnification: one ear's signal will be unchanged, and the other's overall level will

decrease without changing the TMR.

In NH listeners with vocoded stimuli, we hypothesized that naturally occurring

ILDs alone would be insufficient to produce SRM at small target-masker separations,

but would be sufficient at large separations where ILDs are larger. We further

hypothesized that ILD magnification would improve task performance by increasing the

perceived spatial separation of target and maskers, allowing more successful spatial

selective attention. We expected Low-frequency magnification to yield better

performance than naturally occurring ILDs and that Broadband magnification would

produce the best performance (and the strongest SRM).

For BiCI listeners, we hypothesized that naturally occurring ILDs would fail to

produce any SRM (Brown, 2014; Ihlefeld and Litovsky, 2012), even for large target-

masker separations. We hypothesized that Low-frequency ILD magnification would

improve performance on our SRM task, and that Broadband ILD magnification would

produce even better performance.

II.   MATERIALS AND METHODS

A. Participants

Sixteen NH listeners (Experiment 1) and seven BiCI users (Experiment 2)

participated. A hearing screening with NH listeners confirmed that all listeners had

audiometric thresholds of 25 dB HL or lower at octave frequencies between 125 and

8000 Hz. BiCI users had at least 12 months of experience with both devices. During

testing, they used their everyday program without modification, except for a minor

volume adjustment to ensure that sounds were at a comfortable overall level. The NH

group were all between the ages of 19 and 37. The ages and devices used by each

BiCI user are shown in Table I. All participants were compensated for their participation

either monetarily or with course credit. All procedures were approved by the Institutional

Review Board of the University of Pittsburgh.

TABLE I. Age and device used in each ear, for each BiCI user.

Subject #	Age (years)	Left Ear Device	Right Ear Device
1	68	Cochlear Nucleus 5	Cochlear Nucleus 5
2	72	Cochlear Nucleus 5	Cochlear Nucleus 5
3	76	Cochlear Nucleus 5	Cochlear Nucleus 5
4	75	MED-EL Opus 2	MED-EL Opus 2
5	64	Cochlear Nucleus 5	Cochlear Nucleus 5
6	52	AB Harmony	AB Harmony
7	72	Cochlear Nucleus 5	Cochlear Nucleus 5

B. Stimuli and Signal Processing

Target speech was drawn from the CUNY sentence corpus (Boothroyd et al.,

1985) produced by a female talker. Masker stimuli were drawn from the IEEE corpus

(Rothauser, 1969), which were produced by a different female talker. Masker sentences

were concatenated if needed and then truncated to be equal in duration to the target

sentence chosen for a given trial.

Stimulus processing and presentation, as well as experiment control, were

accomplished using the Python programming language. All signal processing was

performed offline (see schematization in Fig. 1). To generate stimuli, each of the two

masker sentences were first adjusted in level relative to the target sentence level to

achieve a TMR of +2 dB. Then, naturally occurring binaural cues were applied

separately to the target and maskers by convolving each with appropriate non-

individualized HRTFs ((Gardner and Martin, 1994). Target sentences were simulated at

midline, while the maskers were symmetrically positioned around midline at azimuths of

± 0, 15, 30, 45, 60, 75, or 90 degrees, all at ear height (0 degrees elevation). Following

HRTF spatialization, target and masker tokens were summed into left and right ear

channels. Left and right ear channels were bandpass filtered between 125 and 5500 Hz

to simulate the limited bandwidth of CI processing and to set the effective bandwidth of

the signals to be comparable to that available to typically BiCI users (Exp 2).

FIG. 1. Signal processing flow diagram. Target and masker sound stimuli were first

spatialized using HRTFs. Then, working on the combined signal in the left and right

ears, signals were filtered into frequency bands, and windowed into 20 ms bins. For

each time-frequency bin, the peak of the cross-correlation was used to estimate an ITD.

This ITD was converted to an ILD with a lookup table, and applied via contralateral

attenuation. Finally, the stimuli were vocoded (in Experiment 1 only).

In the No magnification condition, no further spatial processing was performed

(stopped after "Bandpass Filter" in Fig. 1), and vocoding was applied (Exp 1 only). In the

ILD magnification conditions, target-masker mixtures were filtered into different

frequency bands, with the number depending on the processing condition ("Filterbank"

in Fig. 1). We chose the cutoff frequencies to fix the number of frequency bands in

which ILD magnification occurred to four. Both magnification filter banks used 4th-order

Butterworth filters. In the Low-Frequency magnification condition, the filter bank

comprised five contiguous bands with cutoff frequencies of 125, 250, 500, 1000, 2000,

and 5500 Hz. ILD magnification was applied to the lowest four bands.

In the Broadband magnification condition, four contiguous bands were created

using cutoff frequencies of 125, 300, 900, 3500, and 5500, and ILD magnification was

applied to all four bands, matching the number of processing bands in Low-frequency

magnification. As described in the Introduction, we were interested in whether fewer,

wider bands would provide similar benefit to speech intelligibility as magnification using

six independent frequency bands (Brown, 2018).

Following filtering, non-overlapping 20-ms boxcar-shaped windows of data were

created within each frequency band ("Window" in Fig. 1). In each window, an ITD was

estimated by finding the interaural delay corresponding to the lag of the maximum

output of the cross-correlation of the left and right channels ("cross-correlation ITD

estimation" in Fig. 1). We defined a maximum ITD of 750 μs, and only cross-correlation

maxima in the range [-750,750] were considered. This was to avoid implementing ITDs

outside of the natural range that might result from spurious cross-correlation maxima

due to interactions across the three sound sources. A lookup table was used to convert

the ITDs to ILDs. Specifically, a zero-µs ITD corresponded to a 0-dB ILD, a 750-µs ITD

corresponded to a 32 dB ILD, and intermediate values were linearly interpolated,

resulting in a linear weighting of approximately 0.043 dB/µs. The resulting ILD in each

20-ms segment was then achieved by attenuating the signal for the ear contralateral to

the direction of the ITD for that frequency band and time window, leaving the ipsilateral

ear segment unchanged. Although this processing approach causes intensity transitions

from window to window that are heard as a light 'static' sound when listening to the

broadband stimuli, pilot testing indicated that this static is not audible to either BiCI

users or NH listeners presented with vocoded stimuli.

It is worth noting that we included the 0-degree configuration (where target and

maskers were all co-located) in our experiments as a reference. Although stimuli in the

0-degree configuration went through the same processing pipeline, Low-frequency and

Broadband ILD magnification had a negligible effect on the stimuli when target and

maskers were co-located at 0-degrees azimuth. Specifically, in this spatial configuration,

estimated ITDs were essentially zero in all time-frequency analysis bins; therefore, ILD

magnification did not change the signal levels in any substantive way. Moreover, by

putting these stimuli through the same processing pipeline, we ensured that any

artifacts from the processing were present in this reference condition, as well.

Finally, stimuli for NH listeners (Experiment 1) were processed with an 8-channel

sinusoidal vocoder to make the available information similar to what a CI user could

access. The first stage of the vocoder was a filterbank with cutoff frequencies spaced

logarithmically between 125 and 5500 Hz. In each band, the amplitude envelope was

extracted via half-wave rectification and low-pass filtering at the lesser of 400 Hz or half

the bandwidth. These envelopes were then used to modulate zero-phase sine tone

carriers with frequencies at the logarithmic center of the bands, which were then

summed. Because the carriers were zero-phase, they delivered a constant ITD of 0 μs.

C. Equipment & Procedures

1. Experiment 1 (NH Listeners)

All digital signals (sampling frequency 44.1 kHz) were converted to analog

signals with an RME Fireface UFX+ soundcard, and adjusted to an overall presentation

level of 70 dB SPL with Atlas AT100-RM passive attenuators. Listeners wore Etymotic

ER-3a insert phones. All participants sat in an audiometric booth during testing while the

experimenter sat in an acoustically isolated, but physically adjoined booth with a window

into the testing room and an intercom allowing verbal communication between

participants and the experimenter.

Listeners first heard ten target sentences presented in quiet to familiarize them

with the normal acoustic voice of the target talker and then heard 10 vocoded target

sentences. Listeners were instructed to verbally repeat back as many of the words as

possible produced by the centrally located "target" talker and to guess if they were not

sure. Ten sentences, each with an average of five keywords (nouns, verbs, adjectives)

for a total of 50 keywords, were presented in each ILD magnification (None, Low-

frequency, Broadband) and masker location (± 0, 15, 30, 45, 60, 75, and 90 degrees)

condition. No participant ever heard a sentence more than once. For each condition, we

quantified performance by calculating the total number of target keywords out of 50 that

were correctly identified.

2. Experiment 2 (BiCI Users)

Equipment and procedures were nearly identical to those used in Exp. 1, except

for a few minor differences. Specifically, instead of a 70-dB SPL presentation level, BiCI

users used the attenuators to adjust a practice trial to a comfortable level. Instead of

Etymotic ER-3 insert phones, direct-connect accessory cables connected to the CI

speech processors delivered sound. BiCI users used their everyday programs with no

adjustments, including for automatic gain control. Finally, BiCI practice consisted of 10

unprocessed target sentences in quiet.

III.   RESULTS

A.   Experiment 1

Figure 2 presents the across-subject average results for Experiment 1 (NH

listeners), showing the raw percent correct speech intelligibility for each condition as a

function of target-masker separation. In the co-located control condition, listeners

correctly reported roughly 50% of the keywords. Although performance in the co-located

condition is plotted separately for each ILD magnification, they represent acoustically

similar trials since all sound sources were located at midline– the only differences were

that the stimuli in the two ILD magnification conditions went through multiple processing

steps that introduced modest artifacts. In the No magnification condition, performance

was similar to the co-located configuration for less lateral maskers (±15, 30 & 45°), but

was better for more lateral masker locations (±60, 75 & 90°). In contrast, for both of the

ILD magnification conditions, performance was similar for all spatially separated masker

conditions; performance in the separated configurations was better than for the co-

located configuration. These results show that ILD magnification improves target

speech intelligibility compared to listening with naturally occurring ILDs when the

maskers are spatially separated from the target but relatively close to midline.

A Shapiro-Wilk test of normality was conducted to determine whether percent

correct data at spatially separated masker locations are normally distributed. The results

indicate that the data are normally distributed ($p = 0.143$). Additionally, Mauchly's test

indicated that in no case was the assumption of sphericity violated (all $p > 0.05$);

accordingly, no sphericity-based corrections were applied to our statistics. A 2-factor

repeated-measures ANOVA was computed with Masker location and ILD magnification

as the two main factors and percent-correct speech intelligibility as the dependent

factor. Significant effects were observed for the main factor of Masker location ($F(6,90)$

$= 10.43$, $p = 9.30e-9$, $\eta^2 = 0.088$) and the interaction between ILD magnification and

Masker location ($F(12,180) = 2.59$, $p = 3.00e-3$, $\eta^2 = 0.044$); the effect of ILD

magnification was nearly significant ($F(2,30) = 2.89$, $p = 0.071$, $\eta^2 = 0.009$). To interpret

the significant interaction, we conducted follow-up one-way ANOVAs separately for

each masker location. There was a significant effect of ILD magnification in the ±15

degree ($F(2,30) = 3.72$, $p = 0.036$, $\eta^2 = 0.076$) and ±30 degree ($F(2,30) = 7.81$, $p =$

0.002, $\eta^2 = 0.113$) conditions. Bonferroni-corrected pairwise t-tests within each masker

location showed that performance at ±15° was greater with Low-frequency ($p = 0.025$)

and Broadband ($p = 0.047$) magnification than with No magnification. At ±30°, both

Broadband ($p = 0.013$) and Low-frequency ($p = 0.050$) magnification increased percent-

correct keyword performance. This pattern of results suggests that ILD magnification

improved task performance for NH listeners, but only at small target-masker

separations.

FIG. 2. Experiment 1 Results. Average percent keywords correct as a function of

masker location for sixteen NH listeners in a BiCI (vocoded) simulation. Data are shown

for the three ILD magnification conditions: None (circles), Low-frequency (square), and

Broadband (diamonds). The symbols show the across-subject average and the error

bars show ±1 across subject standard error.

B. Experiment 2

Figure 3 presents the across-subject average results for Exp. 2 in 7 BiCI users,

showing the raw percent correct speech intelligibility for each condition as a function of

target-masker separation. In this population, performance in the co-located condition

(about 40 percentage points) was generally lower than in the spatially separated

conditions.

FIG. 3. Experiment 2 Results. Average percent keywords correct as a function of

masker location for seven BiCI users. Data are shown for the three ILD magnification

conditions: None, Low-frequency, and Broadband. The symbols show the across-

subject average and the error bars show across-subject ±1 standard error in each

condition.

A Shapiro-Wilk test of normality failed to reach significance ($p = 0.651$), so we

treated the data as normally distributed. Sphericity was also not violated in our

measurements (Mauchly's test, all $p > 0.05$), so no additional sphericity corrections

were applied. A 2-factor repeated-measures ANOVA was conducted with main factors

of masker location and ILD magnification, and percent-correct speech intelligibility as

the dependent variable. The ANOVA revealed significant main effects of ILD

magnification ($F(2,12) = 11.50$, $p = .002$, $\eta^2 = 0.092$) and Masker location ($F(6,36) =$

2.65, $p = 0.033$, $\eta^2 = 0.069$). The interaction between them was not significant ($F(12,72)$

$= 0.88$, $p = 0.57$, $\eta^2 = 0.039$). Bonferroni-corrected post hoc two-tailed paired t-tests

revealed that the Broadband ILD magnification strategy produced performance that was

significantly better than both No magnification ($p < 0.001$) and Low-Frequency

magnification ($p < 0.001$). However, there was no significant difference between

performance in the No magnification and Low-Frequency magnification conditions ($p =$

0.59). This pattern of data suggests that Broadband ILD magnification improved

performance for BiCI users. Unlike NH listeners, however, this effect was observed at

all spatial separations rather than only small spatial separations (i.e. we did not observe

an interaction). We also conducted post-hoc tests across masker location. These

showed that performance in the co-located condition was significantly poorer than ±15°

($p = 0.02$) and ±90° ($p = 0.038$), although the differences in percent correct are small.

Performance did not vary between any spatially separated masker location conditions.

IV. DISCUSSION

A. ILD Magnification improved speech intelligibility through a binaural mechanism

Broadband ILD magnification significantly improved speech intelligibility in a symmetrical-masker task for both NH listeners hearing vocoded stimuli (Experiment 1) and BiCI users (Experiment 2). Low-frequency magnification, however, only had a significant effect for NH listeners at small target-masker separations. Given that our ILD manipulations should not appreciably change monaural TMR (see below), the benefit of ILD magnification must be binaural in nature. As we discuss below, ILD magnification may cause modest changes in loudness, but the largest possible loudness changes are too small to explain our results. We thus argue that ILD magnification increases the perceived spatial separation between the target and the more salient masker in the time instances and frequencies where one masker dominates the sound mixture. To support this explanation, we first analyze the consequences of ILD magnification to rule out simple acoustic explanations for the effects we observed.

With naturally occurring ILDs, the better-ear effect contributes to improved speech intelligibility, and this effect grows as the separation between target and masker increases. One might reasonably wonder, then, whether introducing ILD magnification simply increases better-ear effects (i.e., increases monaural TMR), rather than increasing perceived target-masker separation. Non-adaptive beamformers, for example, facilitate SRM through both changes in monaural TMR and ILD-based

localization cues (Yun et al., 2021). However, the ILD magnification algorithms

presented here work by attenuating the summed target-masker mixture at one ear, as

dictated by the estimated ITD in a given spectro-temporal bin. That is, both the target

and masker in a given ear are attenuated by the same amount. Thus, the acoustic TMR

at either ear is not altered, logically ruling out any effects due to an increased better-ear

benefit.

We confirmed that monaural better-ear effects were unchanged in our stimuli and

that binaural loudness effects could not explain improvements in performance by

analyzing the final stimuli for spatial configurations used in this study after applying our

processing. Specifically, we spatialized and summed stimuli as in the experiments,

bandpass filtered and time windowed the left and right channels, and calculated the

estimated ITDs and associated ILD adjustments (the "gain tracks") to be applied at each

time and in each frequency in each ILD magnification condition and for each masker

azimuth.

An example of these gain tracks is shown in Fig. 4. Panel A depicts the

symmetrical-masker spatial configuration, with example waveforms for each source.

Panel B plots the applied ILDs in each time-frequency bin for the Low-frequency (upper

panel) and Broadband (lower panel) magnification conditions. The particular example in

the figure placed maskers at ±60°. The waveforms in Panel A are time-aligned to the

ILD tracks in Panel B. The legend at the bottom of the figure shows how ILD

magnitudes correspond to the different colors in Panel B. The highest frequency band in

the Low-frequency magnification plot (2 - 5.5 kHz) is solid blue, because ILD

magnification was not applied to this band. It is visually apparent that when a given

sound source is more intense than the others (dominates) in the mixture, it drives the

ITD estimate at that moment in time (for example, Masker 1 drives the ITD estimation at

around 0.25 s, whereas the Target drives it at around 1.1 s).

We calculated the TMR in each time-frequency window with and without ILD

magnification by applying the ILD gain tracks to the unmixed target and masker signals

independently (actual ILD magnification always works on the mixed signals). We found

that the difference in TMR between naturally occurring ILD stimuli and ILD magnified

stimuli at any given time-frequency bin for any stimulus was on the order of a rounding

error (ie., less than about 1e-13), as expected (given that the same gain track was

applied to the target, dominant masker, and weaker masker). This was true for all

masker azimuths: regardless of the magnitude of the level change in a given time-

frequency bin, the target and maskers were all equally attenuated in the contralateral

ear, resulting in no change in monaural TMR. Thus, changes in monaural TMR cannot

explain our results.

FIG. 4. Acoustic analysis example sentence. Panel A shows the relative positions of the

target (T), masker 1 (M1) and masker 2 (M2), along with corresponding example

waveforms. Panel B shows applied ILDs in spectro-temporal bins for Low-frequency

(top plot) and Broadband (bottom plot) magnification. In this example, maskers were

spatialized to +/-60 degrees. The legend at the bottom maps color to the applied

attenuation in each ear (i.e., the ILD), and the estimated ITD for reference. The

waveforms in Panel A and the ILD plots in Panel B are time-aligned, making it easier to

observe that when a given sound source is more intense than the others, that source

biases the ITD estimation toward its azimuth. Eg., when M1 (spatialized to the left) is

relatively high at around 0.25 s, the ILD applied is to the left. Note that the highest

frequency band in Low-frequency magnification (2000-5500 Hz) always shows a 0 dB

ILD, as no magnification was applied in this band.

As shown in Figure 4, our ILD magnification approach only changes signals in

time instances and frequency bands where one of the maskers dominates. In those

time-frequency bins, the algorithm reduces the sound level of the mixed signal reaching

the ear contralateral to the dominant masker. This can cause reductions in the

perceived loudness of the target as well as both masker sounds, which could contribute

to changes in speech intelligibility results. However, studies of binaural loudness

summation show that reductions in binaural loudness are considerably less than would

be predicted strictly from the acoustics (Epstein and Florentine, 2009). For instance,

going from a diotic presentation to a monaural presentation reduces the total sound

energy summed across both ears by 3 dB. Yet, the perceived change in binaural

loudness for a diotic signal vs a monotic signal is considerably less than changing the

monaural level by 3 dB. For a sound that is more intense in one ear, reducing the signal

level of the ear with the less intense sound will change binaural loudness even less than

for a diotic sound. The only large change in binaural loudness caused by our ILD

magnification approach would affect the non-dominant masker, where we attenuate the

ear signal that contains the more intense sound. In such instances, the binaural

loudness will depend on the levels of the signals reaching each ear and the amount of

attenuation applied. In the most extreme case, if the sound level in the less intense ear

was too quiet to be detected and the attenuation at the more intense ear dropped the

sound level in that ear below detection threshold, attenuation could render that signal

inaudible.

In all of our tested spatial configurations, the target is located at midline;

therefore, ILD magnification will reduce the binaural loudness of the target by 3 dB at

most. Similarly, the dominant masker source loudness will decrease by less than 3 dB–

and typically by even less than the diotic target loudness changes, since in most

frequency bands, the dominant masker will already be less intense in the ear that is

attenuated. Thus, our algorithm will either cause a decrease in or leave unchanged the

target-to-dominant-masker loudness ratio, since the dominant masker loudness cannot

be decreased by more than that of the target loudness.

It may be that the non-dominant masker's binaural loudness is reduced by the

algorithm by more than any changes in the binaural loudness of the target, which could

contribute to increased intelligibility. In the most extreme case, the non-dominant

masker may change from being audible to being inaudible due to magnification.

However, practically speaking, the non-dominant masker is unlikely to contribute to

masking in the time-frequency bins where our "gain track" calculation causes a large

attenuation, since the non-dominant masker is, on average, less intense than the

dominant masker in those moments and frequencies.

This is demonstrated in Figure 5A, which plots the mean (and standard error) of

the energy ratio of the left masker vs. the right masker as a function of the calculated

ITD (and thus the applied ILD), averaged across individual time-frequency analysis

windows. The plot only includes time-frequency bins where the target does not

dominate (i.e., this analysis excludes time-frequency voxels when the target is more

intense than each of the maskers; the applied ILD in those cases is almost always close

to zero). The maskers were placed at ±90° for this analysis. In those time-frequency

bins in which attenuation is applied, the non-dominant masker intensity typically is

already much less intense than the dominant masker – almost never 3 dB or less, most

often at least 10 dB, and on the order of 20 dB when the applied attenuation is greatest

– strongly suggesting that attenuation from magnification is unlikely to contribute

significantly to reduced loudness of the non-dominant masker relative to the target.

Figure 5B illustrates that the algorithm enhances the perceptual separation

between sound sources. Specifically, the distribution of calculated ITDs across time-

frequency bins has a pronounced trimodal distribution, with peaks that correspond to far

left, center, and far right; these modes in turn correspond to cases where the most

intense source in a given time-frequency bin is the left masker, center target, or right

masker, respectively. This analysis demonstrates that, e.g., left-indicating ILDs are

applied by the algorithm when the left source dominates the mixture. Together, Figures

5A and 5B support the argument that the main effect of ILD magnification is to enhance

the perceived laterality of lateral sources that dominate the sound mixture, rather than

by reducing the binaural loudness of the nondominant masker.

Figure 5. Source-to-source ratio analysis. Panel A shows the mean and standard error of the energy ratio between right and left masker sounds over time-frequency bins in 20 example stimulus sets as a function of the estimated ITD (and therefore the to-be-applied attenuation in each ear). Only time-frequency bins in which the target does not dominate are shown: bins in which the target was greater than 3 dB more intense than the combined masker signals are excluded. The estimated ITD shown is for maskers placed at ±90°. The gray shaded error shows the limits of ±3 dB right to left masker ratio: all points where non-zero attenuation is applied are outside this region. Panel B shows the percentage of time-frequency bins in which each sound source dominates as a function of estimated ITD. Values are binned based on equally spaced estimated ITD

values (±750 µs, ±563 µs, ±375 µs, ±188 µs,0 µs), and bin widths of 188 µs. Large

attenuation is only applied when a given source is more intense than the others.

Therefore, a sound source will not be attenuated when it dominates the mixture and

drives perceptual masking.

In BiCI users, insertion depths, neural survival, and programming differences

may lead to changes in binaural fusion. Binaural fusion in BiCI users is strong for pitch

and often spans a wide range (Reiss et al., 2014, 2018). In our stimuli, if BiCI users

show strong fusion, this may lead to poor segregation. This is something that the

perceptually salient ILDs we create addresses. If different bands are dominated by

different sources, they may be less likely to fuse and segregation will improve because

of the imposed ILDs causing greater perceptual separation in a given frequency band.

It may also be that binaural fusion is reduced due to interaural asymmetries in array

insertion depth (Kan et al., 2013). If a BiCI user is receiving two slightly different,

unfused versions of the scene, then contributions of the dominant masker in the to-be-

attenuated ear may add interference, but not produce perceived spatial separation

between target and masker because of the reduced fusion. In this case, attenuation

from the applied ILD may simply be reducing the intensity of what is essentially a

monaural interferer– the dominant masker in the contralateral ear. However, binaural

fusion appears to be, if anything, overly broad for BiCI users (Reiss et al., 2014, 2018).

Thus, a lack of binaural fusion, particularly for broadband stimuli like speech, does not

seem to be a likely contributor to our results. In addition, poor fusion would not explain

the performance of the NH group, who should have good fusion in any event. Given that

the patterns of results across the two experiments track closely with one another and

appear to be binaural in nature, this possibility seems unlikely to be a significant factor

in the outcome of the current study.

In NH listeners in BiCI simulation, we hypothesized that both Low-frequency and

Broadband magnification would significantly improve performance compared to No

magnification (ie., naturally occurring ILD cues). Supporting these hypotheses, we

observed a significant benefit from Low-frequency and Broadband magnification, but

only at small spatial separations (±15° and ±30°). These results are generally in line

with a previous study that showed a significant increase in intelligibility even for low-

frequency ILD magnification using different ILD magnification algorithm parameters and

a different spatial configuration (Brown, 2014). The spatial configuration used here, with

a masker to either side of the target, poses much greater challenges, both for the

algorithm and for the listener, than when hearing a target to one side and a single

masker to the other. Better-ear acoustic effects only occur in glimpses (moments and

frequencies where one of the two maskers happens to be low in overall intensity) in the

symmetric masker configuration. Together, these differences produce much more

perceptual interference in the symmetrical masker configuration than the spatial

configurations of this previous study, which may explain why there is no significant

effect of Low-frequency ILD magnification in that previous work. The more challenging

listening situation tested in the current study may require spatial separation in higher

frequency regions important for speech intelligibility (DePaolis et al., 1996; Hogan and

Turner, 1998; Vickers et al., 2001). Consistent with this hypothesis, Broadband

magnification yielded significantly greater benefit than Low-frequency magnification.

In BiCI users, we hypothesized that both Low-frequency and Broadband

magnification would produce greater benefit from spatial separation between target and

maskers than naturally occurring ILD cues. We observed a significant improvement in

performance with Broadband magnification over No magnification; however, Low-

frequency magnification provided no statistically significant benefit. This effect did not

interact with masker location; that is to say, Broadband magnification improved speech

intelligibility for all masker locations. It is worth noting that we observed significant

effects of Broadband magnification here even though the subject pool comprised only 7

listeners. The lack of statistically significant differences between the No magnification

and Low-frequency magnification may be due to a lack of power rather than a failure of

ILD magnification. To estimate how many participants would be needed to observe an

effect of Low-frequency magnification, we conducted a post-hoc power analysis using

G*Power (Faul et al., 2007). This analysis suggested that 32 BiCI users would be

needed to observe a difference between No magnification and Low-freq magnification

with power of 0.80 and $\alpha = 0.05$.

For BiCI users, naturally occurring ILD cues failed to produce SRM, even with

maskers at ±90°. Only in the magnified ILD conditions did spatial separation yield

performance that was better than in the co-located configuration. This result supports

our hypothesis that BiCI users require greater ILDs to perceive a separation between

target and maskers. This is also consistent with the literature (Brown, 2014; Ihlefeld and

Litovsky, 2012), and is likely due to the compressed perceptual space BiCI listeners

experience for sources in the horizontal plane with naturally occurring cues (Grantham

et al., 2007). ILD magnification can mitigate this limitation for BiCI users by expanding

the perceptual space (Brown, 2018). While neither naturally occurring ILDs (No

magnification) nor Low-frequency ILD magnification improved performance for our BiCI

users compared to the co-located configurations, Broadband ILD magnification did.

Given that our ILD magnification approach does not alter the TMR at either ear, these

results suggest that Broadband ILD magnification allows BiCI listeners to more

effectively deploy spatial selective attention, focusing on the target stream and

suppressing the maskers. However, neither naturally occurring ILDs nor Low-frequency

ILD magnification allowed the BiCI users to focus spatial attention effectively.

Though we demonstrate that ILD magnification improved speech intelligibility in

both NH listeners hearing vocoded signals and in BiCI users, there are a number of

questions our study cannot answer. For instance, vocoding only captures first-order

effects of listening to BiCI signals (ignoring current spread, mismatches in binaural

stimulation, compressed level dynamic range, etc.). Thus, it may not be surprising that

our two groups showed different patterns of results. Our two groups also differed in age

demographics (NH listeners, 19-37 years; BiCI users, 52-76 years). Future studies

could address how such factors influence the utility of ILD magnification.

The overall benefit of ILD magnification observed in the current study is less than

what was observed when listeners heard a target presented with a single masker

(Brown, 2014). In this earlier non-symmetric masker study, ILD magnification increased

percent correct performance by about 30 percentage points. In contrast, Broadband

magnification in the current study improved performance by around 20 percentage

points over no magnification. This difference likely reflects the perceptual difficulty

associated with the symmetrical masker configuration used here. Another potential

factor is the number of processing bands, which was reduced from 20 in the previous

study to 4 here. Follow-up studies are needed to establish the relationship between

processing band number and speech benefit. Nevertheless, 20 percentage points of

masking release represents a substantial benefit and indicates that ILD magnification

can be effective in relatively complex auditory scenes.

The question remains as to the mechanism by which ILD magnification provides

speech intelligibility benefit. As we argue above, we believe that any changes in TMR or

in binaural loudness caused by ILD magnification are too modest to account for the

improvements we observe. Instead we propose that magnified ILDs enhance perceived

spatial separation between sound sources, which enhances binaural unmasking

(Freyman et al., 1999). This enhanced spatial separation allows spatial selective

attention to be deployed more successfully. NH listeners can use auditory spatial cues

to selectively attend to a target amongst spatially separated maskers (Noyce et al.,

2021; Shinn-Cunningham, 2017; Shinn-Cunningham and Best, 2008). This process

occurs through coordinated activity in multiple areas of the brain, including prefrontal

cortex, parietal cortex, and auditory cortex (Alho et al., 2014; Choi et al., 2014; Deng et

al., 2019a, 2019b; Noyce et al., 2022). Spatial auditory attention is less effective in

listeners with hearing loss; indeed, performance is inversely correlated with spatial

discrimination thresholds (Bonacci et al., 2019; Dai et al., 2018). Similarly, limitations of

electrical stimulation reduce CI users' ability to capitalize on naturally occurring spatial

cues to direct selective attention (Akbarzadeh et al., 2020; Goupell et al., 2016). This

underscores the need for processing algorithms like ILD magnification that facilitate

greater perceptual segregation and more effective deployment of spatial attention.

B. Corrective ILD Magnification and Future Work

The current approach maximizes the perceptual separation between target and masker, which provides significant improvement in speech intelligibility. But there are other spatial configurations in which the current strategy will likely be less effective, if not detrimental. Specifically, if a target and masker are spatially separated, but on the same side of midline, ILD magnification may decrease the perceptual separation between them. This is because there is a limit to the perceived lateral position of a sound source. Aggressive ILD magnification like that used in the current study may cause ipsilateral sources to be hyper-lateralized (sources perceived to be as far to the side as possible), which may actually lead to reduced perceptual separation between them.

Corrective ILD magnification (Brown, 2018) may represent a potential compromise. Whereas the ILD magnification strategy used in the current study was designed to maximize the perceptual separation between target and maskers for our configurations (with the target at midline and maskers to the sides), corrective processing is designed to minimize rms error between perceived and actual locations of the sources in the mixture. When tailored to individual BiCI users, corrective ILD magnification significantly improves localization accuracy; two users presented with this strategy exhibited localization performance on par with a group of NH listeners. Individually tailored corrective ILD magnification could also address confounds of automatic gain control or electrode inactivation, which we did not control for in this study since BiCI users used their everyday programs. Future studies will likely need to strike a

balance between maximizing SRM task performance, as in the current study, and

maximizing perceptual accuracy of source location (Brown, 2018).

Continued research should further characterize the frequency-, azimuth-, and

subject-specific benefits of magnified ILD cues in an SRM paradigm. Important

parameters to explore include the number of magnification bands, the cutoff frequencies

of those bands, and the ITD-to-ILD mapping function (lookup table). Four magnification

bands were used in this study to explore whether SRM benefits could be obtained using

a small number of frequency bands, which is less computationally demanding than

similar past approaches (Brown, 2014). Relatedly, the optimal processing bandwidth will

also need to be established. Both the number of bands and the bandwidths that provide

the maximum benefit may be frequency-, azimuth-, or subject specific.

The algorithm we used in the current study was specifically designed to

manipulate ILDs without requiring any a priori knowledge of the specific locations of

sound sources; the algorithm will accentuate the spatial separation between a central

target and maskers to one or both sides of the listener, or when the target is on one side

of the head and any maskers are in the opposite hemifield . This allows the algorithm to

be effective even in relatively complex acoustic environments like the symmetrical-

masker configuration employed in the current study. It also works best with modulated

maskers (as it operates during "glimpses" where one masker dominates), which have

proven to be more difficult for traditional noise reduction approaches. But there are

spatial configurations that may pose a problem. For example, if a target and masker are

spatially separated but on the same side of midline, ILD magnification may actually

reduce the perceptual separation between them. Future work should explore this

possibility.

We argue that the observed benefits for understanding target speech come from

enhancing the perceived spatial separation between target and maskers. Future

experiments can explicitly examine this hypothesis by measuring neural responses to

sound in both normal hearing listeners and BiCI users completing spatial selective

attention tasks with and without ILD magnification. If the magnified ILD cues used here

do, in fact, allow for greater sound source segregation, this should be evident from

neural signatures of spatial selective attention.

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VI. CONFLICTS OF INTEREST

The authors have no conflicts to disclose.

VII. ETHICS STATEMENT

This study was reviewed and approved by The University of Pittsburgh

Institutional Review Board. The patients/participants provided their written informed

consent to participate prior to their participation in this study.

VIII. DATA AVAILABILITY STATEMENT

The raw data supporting the conclusions of this article will be made available by the authors, without undue reservation.

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