

30 of music quality perception in HI listeners. This emphasizes the importance of provision of bilateral hearing
31 assistive devices for people with asymmetrical hearing impairment that can compensate for differences in
32 hearing loss between ears.

33 **Key Words:**

34 music quality; hearing impairment; binaural hearing; symmetry; asymmetry

35 **Financial Disclosures / Conflicts of Interest:**

36 This work was partially funded by National Science Foundation of China. (Grant No.81170921), Science
37 Foundation of GuangDong Province (Grant No.S2011010004576).

38 **INTRODUCTION**

39 People most often listen to music for their own enjoyment and music is generally
40 expected to sound pleasant. Music quality perception is associated with people's ability to
41 hear, process and understand subtle changes that correspond to music features [1, 2].
42 Therefore, normal hearing (NH) sensitivity is one of the essential factors for music quality
43 perception, which enables listeners to achieve an understanding and appreciation of music by
44 recognising and interpreting musical features (e.g. timbre, melody and pitch)[3-10]. Music
45 quality perception requires accurate perception of sound temporal envelope and energy
46 spectrum of its frequency components. Therefore, preserving normal hearing sensitivity can
47 help listeners to extract the fine frequency and temporal information from the music pieces.

48 In contrast, for people with hearing impairment, evidence indicates that their musical
49 perception is significantly damaged due to the reduced ability to fully utilize temporal fine
50 structure and poor frequency selectivity [11]. For example, Leek and Summers [11] reported
51 that the pitch of complex sound or music was distorted for people with sensorineural hearing
52 loss. This poor pitch perception was expected to be directly correlated to listeners' reduced
53 frequency discrimination and selectivity abilities, which was attributed to broadened auditory

54 filters. Another important factor is temporal resolution processing, which relies on both
55 analysis and comparison of the time pattern within each frequency band and affects the pitch
56 perception based on exact timing of neural synchrony firing. Therefore, as a consequence of
57 auditory filter and neural firing anomalies, poor frequency and temporal resolution, it is
58 generally accepted that ability of music perception is affected in hearing-impaired (HI)
59 subjects [7].

60 Studies by Most et al. [12] and Noble and Gatehouse. [13] investigated the improvement
61 of sound perception by fitting hearing aid devices after hearing impairment. Recently, it
62 seems clear that bilateral hearing setting has advantages over unilateral hearing fitting [12-15].
63 These studies have provided increasing support for the evidence that bilateral symmetrical
64 hearing benefits speech recognition and sound localization in noisy environments when
65 compared with asymmetrical hearing [16-18]. The mechanism behind binaural hearing
66 advantage is mainly due to the combined effects of binaural redundancy, head shadow and
67 binaural squelch, which can contribute to a signal to noise ratio (SNR) improvement of 8 dB
68 by attenuating the interfering sound on the side of the target sound [17, 18].

69 Several researchers have compared music quality rating performance in subjects with
70 different binaural hearing conditions, aiming to explore the symmetrical hearing effect on
71 music quality perception [12, 13, 19]. However, the results obtained from these studies
72 showed inconsistent effects. For example, Noble and Gatehouse [19] found better
73 performance of music quality rating in 103 participants with symmetrical hearing loss when
74 compared with 50 participants with asymmetrical hearing loss using a Speech, Spatial and
75 Qualities of Hearing Scale. In contrast, the study by Most et al. [12] reported that no
76 advanced binaural hearing benefit was found in music quality between bilateral and unilateral
77 hearing aids users using the same assessment. The discrepancy of effect of symmetry of

78 hearing loss on music quality obtained from different studies may be due to less reliability of
79 this music quality rating test, which was conducted only by asking the subjects to recall their
80 experience of music quality without actually listening to specific songs and it may cause a
81 degree of bias.

82 In addition, various factors influence music quality perception, such as listening habit,
83 individual music preference, and listening situation [1, 20]. In an earlier study, Cai et al [1]
84 adapted a music quality rating test by Looi et al. [20] that provides a standard method for
85 music quality rating and takes the variability of participant's listening habits into account.
86 This method was found to be an effective method for testing Chinese NH individuals.
87 Furthermore, the study by Cai et al. [1] found familiarity to be an important factor with
88 regards to sound quality of music.

89 In order to further understand music quality perception in HI people, the present study
90 compared the music quality perception in HI individual with different binaural symmetrical
91 conditions (i.e., unilateral, bilateral symmetrical, and bilateral asymmetrical hearing losses).
92 In addition, the music quality differences in terms of pleasantness, naturalness, fullness,
93 roughness and sharpness were also compared between HI and NH individuals when using
94 Chinese MQRT, which would indicate its effectiveness used in HI people. The outcome will
95 contribute towards better understanding of the influence of audiometric configurations on
96 music quality perception, and consequently facilitate further development of strategies for
97 improving the music quality perception in HI people.

98 **MATERIALS AND METHODS**

99 **Participants**

100 Twenty-nine NH participants between 28 to 45 years of age and fifty-eight participants
101 with sensorineural hearing loss between 25 to 48 years of age were recruited, including 20
102 with unilateral hearing loss (UHL), 20 with bilateral symmetrical hearing loss (BSHL) and 18
103 with bilateral asymmetrical hearing loss (BAHL). All participants were recruited via
104 advertisements from either ENT/Audiology clinics (subjects with sensorineural hearing loss)
105 or staff and students (NH subjects) at the Sun Yat-sen Hospital, China. Written consent was
106 obtained from all participants before proceeding with any of the study procedures.

107 A clinical and audiometric assessment was performed. The clinical history included
108 onset and duration of hearing loss, together with history of audiological rehabilitation.
109 Although HI participants had various hearing loss either on one side or both sides, none of
110 them had any experience with using hearing aids before being involved in this study.
111 Professional musicians and subjects having regular musical training of more than two years
112 were excluded from this study.

113 A summary of participant details is provided in Table 1. The audiometric threshold of
114 the HI participants ranged from mild to moderately severe sensorineural hearing loss, i.e., no
115 hearing threshold was worse than 70 dB HL at 500, 1000, 2000 and 4000 Hz in any ear. In
116 the present study, the definitions of “symmetrical hearing” and “asymmetrical hearing” were
117 adapted from the study by Noble and Gatehouse [19], i.e., symmetrical hearing is defined as
118 an interaural difference of less than or equal to 15 dB in the thresholds averaged at 0.5 to 4
119 kHz, while asymmetrical hearing is defined as an interaural difference of more than 15 dB in
120 the thresholds averaged at 0.5 to 4 kHz. Participants were excluded from this study if they
121 had an air-bone gap larger than 10 dB at one or more frequencies on a pure tone audiogram.
122 All the NH and HI participants were also required to have a type A tympanogram bilaterally.

123 **Please insert Table 1 near here**

124 **Materials and experiment procedure**

125 The musical materials and experimental procedures were adopted from a previous study
126 [1]. In summary, six validated music pieces were used for the music quality rating test
127 (MQRT) based on the highest percentage difference in familiarity levels and paired as
128 ‘familiar music piece’ and ‘unfamiliar music piece’ in the categories of Classical music,
129 Chinese folk music and Chinese pop music (for detailed information, please refer to the study
130 by Cai et al. [1]). Meanwhile, all the music pairs were identified as sharing a similarity on the
131 rhythm, tempo and frequency spectrum. They were:

- 132 ● Classic music: “Serenade ‘Eine kleine Nachtmusik, K525, 1st movement’”
133 Mozart (familiar music) and “Concerto in D major K.218 Allegro” Mozart
134 (unfamiliar music)
- 135 ● Chinese folk music: “Jasmine flower (茉莉花)” (familiar music) and “Missing
136 lover (想郎)” (unfamiliar music)
- 137 ● Chinese pop music: “You don’t have to say goodbye (大约在冬季)” (familiar
138 music) and “Winter rain (冬雨)” (unfamiliar music).

139 The music quality rating scale is a continuous measurement, consisting of five music
140 quality dimensions, i.e., ‘pleasantness’, ‘naturalness’, ‘fullness’, ‘roughness’ and ‘sharpness’,
141 which were adapted from the previous studies[20-27]. Figure 1 demonstrated the
142 ‘pleasantness’ and ‘naturalness’ dimensions ranging from ‘unpleasant’ to ‘pleasant’ and
143 ‘unnatural’ to ‘natural’ with equivalent scores from 0 to 10 respectively. In contrast, the other
144 three dimensions (i.e., fullness, roughness and sharpness) were assessed with mid-point
145 scales (MPS) from a minimum value of -5 to a maximum value of 5. All the participants were
146 informed that they can rate real number for each rating scales.

147

Please insert Figure 1 near here

148

149

150

151

152

153

154

155

An 8 Gb Apple iPod MP3 player (Apple Inc., USA), together with headphones (Beyerdynamic DT 880 Pro) was used to deliver the pieces of music. The listening level was set up at approximately 40 dB above the hearing thresholds of the better ear for each participant initially. However, considering the potential risk of causing hearing damage and sound distortion, initial listening level never exceeded 80% of volume bar (equivalent to approximately 85 dBA) for participants with moderate to moderately severe hearing impairment. All participants were requested to adjust to individual comfort listening levels when they listened to each music piece.

156

157

158

159

160

161

162

163

All participants were given full instructions as well as being asked to practice by listening to musical training pieces representing different music quality dimensions in order to familiarise themselves with the music quality dimensions, and consequently improving the reliability and accuracy of the tests. For example, the musical training piece for the sharpness scale was selected in terms of the degree of high frequency components, which enabled participants to identify and understand the dimensions of the dullness and sharpness scales. Before formally performing the MQRT, participants were required to assess the familiarity level of the six music pieces based on the familiarity assessment questionnaire [1].

164

Data analysis

165

166

167

168

169

170

The data was analysed using SPSS version 16.0 to perform parametric and non-parametric tests. Repeated-measures analysis of variance (RM-ANOVA) was conducted to examine the effects of the following factors: symmetry of hearing loss (NH, UHL, BSHL and BAHN groups), music familiarity (unfamiliar and familiar) and category (classical, folk and pop music) on the rating scores of the music pleasantness, naturalness, fullness, roughness and sharpness dimensions. The familiarity and category effects were chosen for statistical

171 analysis because previous research showed that these two effects might influence the music
172 quality rating in NH and HI subjects[1, 20, 28]. Moreover, Pearson tests were separately used
173 to explore the relationship between hearing thresholds and music quality rating in HI
174 participants, respectively. A p level of less than 0.05 was considered statistically significant.

175 **RESULTS**

176 **Demographic data and hearing thresholds among the groups**

177 Table 1 shows general information for participants, including gender ratios, mean and
178 standard deviation for age, and hearing levels of the better and worse ears. A Chi-squared test
179 and a one-way ANOVA were performed to analyze the gender and age differences
180 respectively among the NH, UHL, BSHL and B AHL participants. No significant differences
181 were found.

182 **Comparison of music quality rating between subjects among NH, UHL, BSHL and** 183 **B AHL groups**

184 For the purpose of identification of the familiarity effect on music quality rating, the
185 music familiarity assessment was performed before the MQRT [1]. All the participants were
186 required to listen to all music pieces, and they consequently rated the familiarity level of each
187 music piece by choosing one of the following three options:

188 A. I definitely know this music piece;

189 B. I may have heard this music piece before, but I am not sure;

190 C. I definitely do not know this music piece.

191 As a result, all the participants rated the familiarity level of each music piece consistent
192 with the previous results [1], i.e., the participants that definitely knew the familiar music

193 piece at the familiar level chose ‘Definitely know the song’, and chose the paired unfamiliar
194 music piece regarded as ‘unsure’ or ‘Definitely unknown the song’ in the familiarity
195 assessment.

196 The effects of hearing impairment on music quality perception were explored when
197 comparing the quality ratings between each group. RM-ANOVA on the pleasantness rating
198 showed the significant effects of symmetry of hearing loss ($F(3,83)=28.41, p<0.001$) and
199 music familiarity ($F(1,83)=79.61, p<0.001$). A significant interaction was also found between
200 music category and symmetry of hearing loss ($F(6,166)=2.53, p=0.023$) which led to a
201 separate music familiarity \times symmetry of hearing loss ANVOA analysis for each category.
202 Significant greater pleasantness rating for NH participants compared with the other three HI
203 groups (i.e., UHL, BSHL and B AHL) was observed for classical music ($F(3,83)=22.83,$
204 $p<0.001$), folk music ($F(3,83)=14.72, p<0.001$) and pop music ($F(3,83)=17.67, p<0.001$)
205 (See Figure 2). Moreover, significant differences were found between UHL and B AHL in all
206 three music categories and between BSHL and B AHL in classical ($p=0.012$) and pop music
207 ($p=0.023$). Even though there was no significant difference in folk music, the ratings on the
208 pleasantness scale were higher for BSHL group than B AHL group (See Figure 2).

209 Please insert **Figure 2** near here

210 A separate RM-ANOVA was also performed for the naturalness rating for each music
211 category. The results revealed a significant effect of symmetry of hearing loss ($F(3,83)=42.12,$
212 $p<0.001$) and significant interaction between music category and symmetry of hearing loss
213 ($F(6,166)=3.34, p=0.004$) (Figure 2). Similarly, there was a significant difference between the
214 NH group and the three HI groups for each music category. In addition, significant difference
215 on the naturalness rating was found between the BSHL and B AHL groups for classical music
216 ($p=0.013$) and pop music ($p=0.020$).

217 In addition, because the '0' point of the fullness, roughness and sharpness rating scale
218 meant perfect sound quality for the music piece, the distance between the rated value and the
219 '0' position indicated distance from perfect sound, regardless of whether the values were
220 positive or negative. Therefore, the absolute values of the fullness, roughness and sharpness
221 ratings were used for the analysis. Figure 3 shows the group mean values of the fullness,
222 roughness and sharpness ratings in the categories of Classical, Folk, and pop music for NH
223 and HI individuals. For fullness rating, significant effect was only found in symmetry of
224 hearing loss ($F(3,83)=6.35, p=0.01$). A Bonferroni-adjusted comparison demonstrated that
225 fullness rating was significantly poorer for BAHL group than for NH ($p<0.001$) and UHL
226 ($p=0.021$) groups.

227 Roughness rating revealed significant differences in symmetry of hearing loss
228 ($F(3,83)=9.07, p<0.001$) and familiarity factor ($F(1,83)=4.51, p=0.037$) as well as significant
229 interaction between category and symmetry of hearing loss ($F(6,166)=2.61, p=0.019$), which
230 led to a separate RM-ANOVA for each category. As Figure 3 shows, a significant difference
231 of symmetry of hearing loss was found in classical ($F(3,83)=8.01, p<0.001$) and pop
232 ($F(3,83)=12.04, p<0.001$) music. Further Bonferroni-adjusted analysis showed that roughness
233 perception was rated significantly poorer in BAHL group than NH ($p<0.001$) and UHL
234 ($p=0.002$) groups in both classical and pop music.

235 Sharpness perception, RM-ANOVA showed significant difference in symmetry of
236 hearing loss [$F(3,83)=3.70, p=0.015$], music familiarity [$F(1,83)=11.27, p=0.001$] and
237 significant interaction of category x familiarity x symmetry of hearing loss [$F(6,166)=3.41,$
238 $p=0.003$]. Therefore, separate one-way ANOVA was performed for each music piece.
239 Significant difference in symmetry of hearing loss was found in familiar classical music
240 [$F(3,83)=3.79, p=0.013$], unfamiliar classical music [$F(3,83)=4.37, p=0.007$] and familiar pop

241 music [$F(3,83)=18.05, p<0.001$]. Following Bonferroni-adjusted comparison noted that
242 significant poorer rating in sharpness perception was found in BAHL group than other three
243 hearing groups in familiar classical music [BAHL vs NH, UHL, BSHL ($p=0.048, =0.047,$
244 $=0.022$)], unfamiliar classical music [BAHL vs NH, UHL ($p=0.030, =0.006$)] and familiar
245 pop music [(BAHL vs NH, UHL, BSHL ($p<0.001, <0.001, =0.001$) (see Figure 3).

246 **Please insert Figure 3 near here**

247 **Correlations between hearing thresholds and music quality rating in HI groups**

248 The correlations between the hearing thresholds of the better as well as the worse ear
249 and the five mean qualities rating of the six music pieces in HI groups were conducted. The
250 pleasantness and naturalness negatively correlated significantly with the better ear and the
251 worse ear in the BSHL group (better ear: $r_p=-0.678, p=0.001$; worse ear: $r_p=-0.710, p<0.001$,
252 Figure 4a; better ear: $r_n=-0.595, p=0.006$; worse ear: $r_n=-0.535, p=0.015$, Figure 4b). While
253 significant correlation between quality perception (both pleasantness and naturalness) and
254 hearing thresholds of the better ears was found in the BAHL group ($r_p=-0.774, p<0.001$; $r_n=-$
255 $0.752, p<0.001$, Figure 4c). However, no significant correlation between hearing thresholds
256 of the worse ear and music quality rating was observed in the BAHL group (pleasantness: $r=-$
257 $0.362, p=0.140$; naturalness: $r=-0.106, p=0.674$, Figure 4d) and in UHL group (pleasantness:
258 $r=-0.155, p=0.515$; naturalness: $r=-0.437, p=0.06$). There were no significant correlations
259 between hearing thresholds and fullness, roughness or sharpness ratings for any of the HI
260 groups (UHL, BSHL and BAHL).

261 **Please insert Figure 4 near here**

262 **DISCUSSION**

263 **The effect of hearing impairment on music quality perception in general**

264 Significantly reduced music quality ratings were found in participants with various
265 hearing impairment using a music quality rating test. In the present study, HI participants
266 rated music quality perception lower than NH participants in terms of pleasantness and
267 naturalness in classical music, folk music and pop music as well as fullness, roughness and
268 sharpness in pop music. These results are consistent with the findings of Leek et al. [29] who
269 found music pieces were rated as less pleasant and distorted for HI listeners.

270 Music quality perception is closely related to the accuracy of music timbre perception,
271 which requires listeners to perceive both the music temporal envelope as well as the
272 frequency spectrum of harmonic components [25]. According to the tonotopic theory, the
273 cochlea breaks down sounds according to its frequency content and sends them up to the
274 primary cortex [30]. These frequencies are multiples of a common fundamental frequency
275 (F_0), which form the perception of pitch. For the HI subjects, a significant sensorineural
276 hearing impairment would lead to reduced frequency selectivity and spectrum discrimination
277 [31]. Moore has suggested that the filter bandwidths generally increased when the hearing
278 loss increased above 25 dB [31]. Moreover, the bandwidths can reach twice the values of
279 normal hearing when hearing loss reached about 40 to 50 dB. These results have revealed that
280 auditory filters in HI subjects are often broader than in NH people and consequently hearing
281 impairment restricts pitch perception and appreciation. It is interesting to note that hearing
282 threshold is correlated to music quality perception in HI listeners. In the present study, the
283 results indicated that music pleasantness and naturalness were negatively correlated with the
284 pure tone average of both ears in BSHL and the better ear in BAHL listeners, which suggests
285 that music quality perception is related to the degree of hearing loss of the better ear.

286 **The effect of symmetrical and asymmetrical hearing impairment on music quality**
287 **perception**

288 Current participants with BSHL had superior performance in the music pleasantness and
289 naturalness than participants with B AHL, which is consistent with previous studies [14, 17,
290 32]. Balfour and Hawkins [32] showed a binaural symmetry advantage in terms of the music
291 quality perception in HI people fitted with binaural hearing aids than those fitted with
292 monaural hearing aids. Moreover, they found significant binaural preference in overall
293 impression, fullness and spaciousness ratings associated with binaural listening. Noble and
294 Gatehouse [19] further pointed out that binaural symmetry of hearing surpassed the
295 asymmetry of hearing group not only in terms of sound qualities, but also spatial localization
296 and speech in noise, these improvements were due to the combination binaural effects [17].
297 For example, binaural summation enables an enhanced sensitivity to small changes of
298 intensity and frequency that contribute to improved discrimination of sound qualities or
299 speech [33].

300 However, there were non-significant differences in terms of fullness, roughness and
301 sharpness between the BSHL and B AHL groups. The possible reason may lie in the fact that
302 the difference between symmetry of hearing and asymmetry of hearing is not able to be
303 detected in these specific dimensions when evaluating the music quality perception. For
304 example, Blauert and Hawkins [32] suggested that binaural symmetry of hearing has weak
305 advantages in some specific music quality dimensions, such as smoothness, and brightness.

306 In the present study, the hearing thresholds of the better and the worse ears from BSHL
307 participants as well as the better ears from B AHL participants were negatively correlated to
308 the pleasantness and naturalness perception. This indicates that perceived quality of music is
309 likely to be related to the audiometric threshold of the better ear. Better audibility in the ear
310 may play the major part to the sound perception, listeners may well adapt to altered interaural
311 intensity and frequency difference between the better and worse ear, and possibly learn to

312 determine and discriminate sound quality [13]. However, it is noteworthy that people with
313 UHL had lower pleasantness and naturalness ratings than NH people in the present study,
314 although they had normal hearing thresholds in the better ears. This finding is consistent with
315 the study by Dwyer et al. [14], who found NH subjects outperformed UHL subjects in terms
316 of sound quality, spatial localization and speech in noise. A lack of binaural symmetrical
317 hearing in people with UHL may be an important factor contributing for the poor music
318 quality perception [14].

319 **Familiarity effect on music quality perception**

320 In the present study, significant differences in music quality rating between familiar and
321 unfamiliar music pieces were found in HI subjects. Listeners rated familiar music
322 significantly higher in pleasantness than unfamiliar music for each music category. This
323 effect seemed associated with the subjects' experience of listening to music [34]. For
324 example, Peretz et al. [34] suggested that music enjoyment was improved by listening to a
325 familiar music piece or by repetitively being presented with a music piece. This suggestion
326 was further supported by a recent neurophysiological study, which identified the music
327 familiarity effect on listeners' pleasure experience by revealing increased hemodynamic
328 activity and positive correlation with sympathetic nervous system activity [35]. Therefore, on
329 the basis of the results derived from the present study, the familiarity effect seems to be
330 beneficial for improving their music quality perception in people with hearing loss, and
331 listening familiar music should be considered as a part of initial aural rehabilitative strategy
332 to help improving music enjoyment.

333 **CONCLUSION**

334 There were significant decreases in music quality perception in terms of pleasantness,
335 naturalness, fullness, roughness and sharpness rating among the HI participants in

336 comparison with NH participants when using the MQRT. Music quality perception in
337 participants with hearing impairment appeared to be affected by degree of hearing loss,
338 symmetry of hearing loss and music familiarity when they were assessed using the MQRT.
339 Adverse effect of degree of hearing loss was found on the pleasantness and naturalness rating
340 in BSHL and B AHL participants. In addition, subjects with BSHL rated classical and pop
341 music as more pleasant and natural than subjects with B AHL. These indicate the importance
342 of binaural symmetrical hearing for music quality perception in HI listeners, such as
343 providing bilateral hearing assistive devices for people with asymmetrical hearing
344 impairment in order to improve the binaural balance and compensate for differences in
345 hearing loss between ears. Furthermore, significantly better pleasantness and sharpness
346 ratings for familiar music were found in all HI patients. This result suggests that listening to
347 familiar music should be considered as a part of initial aural rehabilitative strategy to improve
348 their music quality perception.

349
350
351
352
353
354
355
356
357
358
359
360

361

362

363

364

365

366 **Acknowledgments**

367 We would like to acknowledge Dr. Christopher Wigham for his proof reading.

368

369

370

371
372
373
374
375
376
377
378
379
380
381
382
383
384
385
386
387
388
389
390
391
392
393
394
395

References:

1. Cai Y, Zhao F, Zheng Y (2013) Development and validation of a Chinese music quality rating test. *INT J AUDIOL* 52(9): 587-595
2. Pomerantz J (2003) *Perception: Overview*. Nature Publishing Group, London
3. Chasin M, Russo FA (2004) Hearing AIDS and music. *TRENDS AMPLIF* 8(2): 35-47
4. Drennan WR, Rubinstein JT (2008) Music perception in cochlear implant users and its relationship with psychophysical capabilities. *J REHABIL RES DEV* 45(5): 779-789
5. Gfeller K, Lansing CR (1991) Melodic, rhythmic, and timbral perception of adult cochlear implant users. *J Speech Hear Res* 34(4): 916-920
6. Kong YY, Stickney GS, Zeng FG (2005) Speech and melody recognition in binaurally combined acoustic and electric hearing. *J ACOUST SOC AM* 117(3 Pt 1): 1351-1361
7. Looi V, McDermott H, McKay C, Hickson L (2008) Music perception of cochlear implant users compared with that of hearing aid users. *Ear Hear* 29(3): 421-434
8. Moore BC (2008) The role of temporal fine structure processing in pitch perception, masking, and speech perception for normal-hearing and hearing-impaired people. *J Assoc Res Otolaryngol* 9(4): 399-406
9. Wright R, RM Uchanski, (2012) Music perception and appraisal: cochlear implant users and simulated cochlear implant listening. *J Am Acad Audiol* 23(5): 350-365
10. Uys M, van Dijk C (2011) Development of a music perception test for adult hearing-aid users. *S Afr J Commun Disord* 58: 19-47
11. Leek MR, Summers V (2001) Pitch strength and pitch dominance of iterated rippled noises in hearing-impaired listeners. *J ACOUST SOC AM* 109(6): 2944-2954
12. Most T, Adi-Bensaid L, Shpak T, Sharkiya S, Luntz M (2012) Everyday hearing functioning in unilateral versus bilateral hearing aid users. *Am J Otolaryngol* 33(2): 205-211

- 396 13. Noble W, Gatehouse S (2006) Effects of bilateral versus unilateral hearing aid fitting on
397 abilities measured by the Speech, Spatial, and Qualities of Hearing Scale (SSQ). INT J
398 AUDIOL 45(3): 172-181
- 399 14. Dwyer NY, Firszt JB, Reeder RM (2014) Effects of unilateral input and mode of hearing
400 in the better ear: self-reported performance using the speech, spatial and qualities of
401 hearing scale. Ear Hear 35(1): 126-136
- 402 15. Noble W (2010) Assessing binaural hearing: results using the speech, spatial and qualities
403 of hearing scale. J AM ACAD AUDIOL 21(9): 568-574
- 404 16. Bronkhorst AW, Plomp R (1988) The effect of head-induced interaural time and level
405 differences on speech intelligibility in noise. J ACOUST SOC AM 83(4): 1508-1516
- 406 17. Ching TY, Incerti P, Hill M, van Wanrooy E (2006) An overview of binaural advantages
407 for children and adults who use binaural/bimodal hearing devices. Audiol Neurootol 11
408 Suppl 1: 6-11
- 409 18. Schneider BA, Li L, Daneman M (2007) How competing speech interferes with speech
410 comprehension in everyday listening situations. J AM ACAD AUDIOL 18(7): 559-572
- 411 19. Noble W, Gatehouse S (2004) Interaural asymmetry of hearing loss, Speech, Spatial and
412 Qualities of Hearing Scale (SSQ) disabilities, and handicap. INT J AUDIOL 43(2): 100-
413 114
- 414 20. Looi V, Winter P, Anderson I, Sucher C (2011) A music quality rating test battery for
415 cochlear implant users to compare the FSP and HDCIS strategies for music appreciation.
416 INT J AUDIOL 50(8): 503-518
- 417 21. Gabrielsson A, Hagerman B, Bech-Kristensen T, Lundberg G (1990) Perceived sound
418 quality of reproductions with different frequency responses and sound levels. J ACOUST
419 SOC AM 88(3): 1359-1366
- 420 22. Gabrielsson A, Schenkman BN, Hagerman B (1988) The effects of different frequency

- 421 responses on sound quality judgments and speech intelligibility. *J Speech Hear Res* 31(2):
422 166-177
- 423 23. Gabrielsson A, Sjogren H (1979) Perceived sound quality of sound-reproducing systems.
424 *J ACOUST SOC AM* 65(4): 1019-1033
- 425 24. Gabrielsson A, Sjogren H (1979) Perceived sound quality of hearing aids. *Scand Audiol*
426 8(3): 159-169
- 427 25. Gfeller K, Witt S, Adamek M, Mehr M, Rogers J, Stordahl J, et al. (2002) Effects of
428 training on timbre recognition and appraisal by postlingually deafened cochlear implant
429 recipients. *J AM ACAD AUDIOL* 13(3): 132-145
- 430 26. Lundberg G, Ovegard A, Hagerman B, Gabrielsson A, Brandstrom U (1992) Perceived
431 sound quality in a hearing aid with vented and closed earmould equalized in frequency
432 response. *Scand Audiol* 21(2): 87-92
- 433 27. Ovegard A, Lundberg G, Hagerman B, Gabrielsson A, Bengtsson M, Brandstrom U
434 (1997) Sound quality judgment during acclimatization of hearing aid. *Scand Audiol* 26(1):
435 43-51
- 436 28. Gfeller K, Christ A, Knutson J, Witt S, Mehr M (2003) The effects of familiarity and
437 complexity on appraisal of complex songs by cochlear implant recipients and normal
438 hearing adults. *J Music Ther* 40(2): 78-112
- 439 29. Leek MR, Molis MR, Kubli LR, Tufts JB (2008) Enjoyment of music by elderly hearing-
440 impaired listeners. *J AM ACAD AUDIOL* 19(6): 519-526
- 441 30. Kaas JH, Hackett TA, Tramo MJ (1999) Auditory processing in primate cerebral cortex.
442 *CURR OPIN NEUROBIOL* 9(2): 164-170
- 443 31. Moore BC (1996) Perceptual consequences of cochlear hearing loss and their
444 implications for the design of hearing aids. *Ear Hear* 17(2): 133-161
- 445 32. Balfour PB, Hawkins DB (1992) A comparison of sound quality judgments for monaural

- 446 and binaural hearing aid processed stimuli. *Ear Hear* 13(5): 331-339
- 447 33. Firszt JB, Reeder RM, Skinner MW (2008) Restoring hearing symmetry with two
448 cochlear implants or one cochlear implant and a contralateral hearing aid. *J REHABIL*
449 *RES DEV* 45(5): 749-767
- 450 34. Peretz I, Gaudreau D, Bonnel AM (1998) Exposure effects on music preference and
451 recognition. *Mem Cognit* 26(5): 884-902
- 452 35. Salimpoor VN, Benovoy M, Longo G, Cooperstock JR, Zatorre RJ (2009) The rewarding
453 aspects of music listening are related to degree of emotional arousal. *PLOS ONE* 4(10):
454 e7487
- 455

456 **Figure Legends**

457 Fig.1 The rating scales in the music quality rating test. (Adapted from Cai et al. 2013)

458 Fig.2 Comparisons of music pleasantness and naturalness perception in normal hearing
459 subjects and HI subjects with different audiometric configurations. *Note:* * there was a
460 significant difference at $p<0.05$. * in green bar indicated significant difference between NH
461 group and other three hearing groups. “NH, UHL, BSHL and BAHL” represent normal
462 hearing, unilateral hearing loss, symmetrical hearing loss and bilateral asymmetrical hearing
463 loss, respectively

464 Fig.3 Comparisons of music fullness, roughness and sharpness perception in NH subjects and
465 HI subjects with different audiometric configurations. *Note:* * there was a significant
466 difference at $p<0.05$. “NH, UHL, BSHL and BAHL” represent normal hearing, unilateral
467 hearing loss, symmetrical hearing loss and bilateral asymmetrical hearing loss, respectively

468 Fig.4 Correlations between hearing thresholds and music quality ratings in BSHL and BAHL
469 groups

470