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Absorbance measurements from normal-hearing ears in the National Health and Nutrition Examination Survey, 2015 to 2016 and 2017 to 2020

4 Abstract

- 5 *Objective:* To summarize absorbance and impedance angles from normal-hearing ears within
- ⁶ the 2015-2016 and 2017-2020 U.S. National Health and Nutrition Examination Surveys
- 7 (NHANES).

⁸ Design: Two publicly available NHANES datasets were analyzed. Ears meeting criteria for

⁹ normal hearing and valid absorbance and impedance angle measurements were identified.

 $_{10}$ $\,$ Measurements were summarized via descriptive statistics within categories of age cohort,

¹¹ race/ethnicity cohort, sex (male, female), and ear (left, right).

Results: 7029 ears from 4150 subjects, ages 6-80 years, met inclusion criteria. Differences
between subgroups within all categories (age, race/ethnicity, sex, ear) were fractions of the
sample standard deviations. The largest differences occurred between age cohorts younger
than 20 years.

¹⁶ Conclusions: The NHANES absorbance and impedance angle measurements are consistent

¹⁷ with published literature. These results demonstrate that trained professionals, using the

¹⁸ Titan instrument in a community setting inclusive of all demographics, produce comparable

- ¹⁹ measurements to those in laboratory settings.
- 20 Keywords: wideband acoustic immittance, impedance angle, absorbance, NHANES

21 1. Introduction

Objective noninvasive medical tests do not exist for many pathologies that occur within 22 the auditory system. The development of a family of measurements known as wideband 23 acoustic immittance (WAI), or equivalently referred to as wideband reflectance (WBR), 24 includes absorbance and impedance measures, and has great potential for detecting a range 25 of middle-ear problems from a noninvasive acoustic measurement made in the ear canal (e.g., 26 Feeney, 2013). At the same time, ongoing and essential work continues in the areas of (1)27 describing normative WAI measurements and how such norms may or may not depend upon 28 age, race, and sex and (2) challenges involved with ensuring that measurements are not 29 corrupted by air leaks, calibration errors, or probes that are either clogged, oblique to the 30 canal or against the canal's wall. Aspects of these important issues can be better understood 31 through the analysis of data taken by the National Health and Nutrition Examination Survey 32 (NHANES). 33

The NHANES program, which sits within the Center for Disease Control and Prevention's 34 National Center for Health Statistics (National Health and Nutrition Examination Survey 35 Data, 2022), collects a wide range of health-related survey and measurement data from a 36 representative population across the United States. While data collection has historically 37 included audiometric surveys and threshold levels, WAI measurements were first added in 38 the 2015-2016 cycle and continued into the 2017-2020 cycle. The release of these WAI 39 measurements along with additional audiometric measures provides a large community-based 40 set of WAI data. 41

The NHANES WAI data associated with normal-hearing ears are summarized here and are available for download on both (1) the NHANES website which includes all WAI measurements made within the NHANES program (National Health and Nutrition Examination Survey Data, 2015-2016, 2017-2020) and (2) the literature-based WAI database website hosted by our group at Smith College (Voss and Horton, 2022).

47 2. Materials and Methods

48 2.1. NHANES database overview

Two independent cohorts of wideband acoustic immitance (WAI) data have been pub-49 lished to the National Health and Nutrition Examination Survey Data (NHANES) website. 50 The 2015-2016 NHANES data includes WAI measurements on subjects ages 20-69 years, and 51 the 2017-2020 NHANES data includes WAI measurements on subjects ages 6-19 and 70-80 52 years. The NHANES website includes multiple files with subject-specific demographics, au-53 diometric data, and WAI data. The WAI quantities of absorbance and admittance angle at 54 ambient ear-canal pressure were reported within the scope of the NHANES databases; the 55 quantity of admittance magnitude was not reported, and we have confirmed with the CDC 56 that the admittance magnitude was not saved during data collection. Here, we transform the 57 reported admittance phase to impedance, which we refer to as impedance angle, to be con-58 sistent with the format of the literature-based WAI database (Voss, 2019; Voss and Horton, 59 2022).60

61 Overview of NHANES measurement methodology

NHANES data were collected within mobile examination centers (MEC) by trained pro-62 fessionals who traverse the United States of America. Measurements were made on subjects 63 who were invited to and agreed to participate, with the goal of being representative of the 64 noninstitutionalized U.S. civilian population (e.g., meeting set racial and ethnicity goals). 65 Hearing-related measurements were conducted within a dedicated sound-isolating room of 66 the MEC (trailer #3); detailed audiometry procedures manuals are available online (Na-67 tional Health and Nutrition Examination Survey Data: Audiometry Procedures, 2015-2016, 68 2017-2020). Briefly, each subject completed a hearing-related questionnaire, otoscopic exam-69 ination, air-conduction audiometry, and the three middle-ear immittance measurements of 70 tympanometry, wideband reflectance (WBR) at ambient pressure, and acoustic reflex thresh-71 old screening. All WBR measurements were made at ambient ear-canal pressure with the 72 Titan instrument from Interacoustics, which reports measurements at 107 linearly spaced 73 frequencies from 226-8000 Hz. The quantities of absorbance and admittance angle were re-74 ported within the NHANES datasets at all 107 frequencies. We note that the procedure 75

manual incorrectly claims "Because WBR [wideband reflectance] makes measures just at the
background room air pressure, it does not require an airtight seal". In fact, absorbance and
impedance measurements are extremely sensitive to acoustic leaks between the instrument's
probe and the canal wall, as further discussed in the work presented below.

⁸⁰ 2.2. Definition for and inclusion of normal ears only

Ears that met the following four criteria were defined as normal and selected for inclusion 81 in the normative data reported here: (1) Normal otoscopy upon examination, (2) pure-tone 82 thresholds ≤ 20 dB at frequencies 500, 1000, 2000, and 4000 Hz, (3) tympanometric peak 83 pressures in the range -50 to 50 daPa, and (4) tympanometric compliance in the range 0.3 84 to 1.5 mmho (Keefe et al., 2017; Downing et al., 2022). Within the 2015-2016 dataset (ages 85 20-69 years), audiometric measurements were reported from 4582 subjects (8554 ears); a 86 total of 3609 of these ears met the normal-hearing inclusion criteria. Within the 2017-2020 87 dataset (ages 6-19 and 70-80 years), audiometric measurements were reported from 5147 88 subjects (9234 ears); 3420 ears met the normal-hearing inclusion criteria. 89

90 2.3. Data selection criteria (DSC)

WAI measurements can be corrupted by leaks in the acoustic seal between the measurement probe and canal walls (acoustic leak), calibration errors, clogged probes, and probes that are either oblique to the canal or against the canal's wall. Thus, we applied a data selection criteria (DSC) to each ear's measurements; when either the absorbance or impedance angle measurement did not meet the DSC, that ear's measurements were excluded from further analyses.

Groon et al. (2015) provided criteria for the identification of acoustic leaks using the 97 bandwidth 200-500 Hz; specifically they determined that a leak was likely when the average 98 absorbance exceeded 0.29 or the average impedance angle exceeded -0.12 cycles. However, the 99 Groon et al. (2015) 200-500 Hz range included 51 measurements with a frequency resolution 100 of 5.86 Hz, whereas the Titan system used for the NHANES data collection had a 226-500 Hz 101 range that included 13 measurements with a frequency resolution of 31.32 Hz. The average 102 absorbance and impedance angle are heavily influenced by the lower end of the available 103 frequency range because these quantities generally increase systematically from 200-500 Hz. 104

To address this issue, we applied modified criteria due to the issue of the Titan lacking data 105 for the lowest 8% of the Groon et al. (2015) criteria's frequency range where the measurement 106 values are the smallest. Specifically, to select measurements with probable leaks we defined 107 the DSC as the average from eight points at frequencies from 226 to 385 Hz (instead of 108 200-500 Hz) and used upper limits of 0.3 for absorbance and -0.13 for the impedance angle. 109 We note that there is no way to directly map the Groon et al. (2015) criteria to the Titan's 110 frequency range. The DSC applied here were less stringent than those from Groon et al. 111 (2015); for example, when the Groon et al. (2015) absorbance and impedance angle criteria 112 were applied across the Titan's available 226-500 Hz range, an additional 848 measurements 113 were eliminated as compared to what is presented in the lower panel of Fig. 1 which used 114 the DSC outlined here. 115

The effects and causes of calibration errors on WAI measurements are less well studied 116 than the effects of acoustic leaks. In general, calibration errors likely result from changes in 117 the equipment between the time of measurements and calibration, which could be caused by 118 a partially clogged probe or a change in the orientation of or compression on the probe within 119 the canal. One clear sign of a calibration error is when the WAI measurements are "out of 120 range", which we defined as measurements with values that are outside the range that is 121 physically possible. We defined the DSC to identify measurements that are out of range as: 122 (1) The absorbance value was less than zero at five or more frequencies of the measurement. 123 or (2) The impedance angle was either less than -0.25 cycles or greater than 0.25 cycles at 124 five or more frequencies of the measurement. We chose the out of range DSC to cover the 125 frequency range 200-6000 Hz and not to the upper limit of the NHANES data (8000 Hz) to 126 be consistent with many published WAI measurements with upper measurement limits of 127 6000 Hz. 128

The DSC were applied to measurements from all ears identified as normal hearing. First, the out of range DSC were applied to the measurements from all ears, and appropriate measurements were labeled as "Out of Range". Next, the DSC for an air leak were applied to the remaining ears, and appropriate measurements were labeled as "Probable Leak". All remaining measurements were labeled as "Meet Criteria".

¹³⁴ We note that WAI measurements can also be corrupted by probes that are wedged against

the ear canal wall, which may or may not lead to out of range measurements. Voss et al. (2016) suggested this condition might be identified by the WAI measurement of impedance magnitude exceeding the normal range, due to a small air volume terminating the probe. The NHANES datasets cannot be evaluated for this possibility because the impedance magnitudes were not saved as part of the data collection process.

¹⁴⁰ 2.4. Demographics for ears that met the data selection criteria

One goal of the NHANES program is for the subject demographics to be representative of the entire population of the United States. While we started with all subjects within the NHANES databases that included WAI measurements, the demographics of the collection of normal-hearing ears for which the WAI measurements met the DSC are not identical to the original NHANES demographics. Table 1 categorizes the numbers of subjects and ears that were included in the WAI analyses for the normal-hearing ears.

147 2.5. Statistical Analyses

Analysis of variance calculations were performed with the Matlab (ver 2021b) function
 "anova1".

150 3. Results

Figure 1 summarizes all absorbance (left column) and impedance angle (right column) measurements made on the 7029 normal-hearing ears within the NHANES programs from 2015-2020. The upper row plots measurements from the 5591 (80%) of these ears that met the DSC; the middle row plots measurements from the 850 ears (12%) that produced out of range measurements; and the lower row plots measurements from the 588 ears (8%) identified as including probable leaks. We note that it is likely that some of the measurements in the out of range category were also affected by leaks.

Figure 2 summarizes the data by comparing measurements within the categories of age cohort (upper row), race cohort (upper-middle row), sex (lower-middle row), and left/right ears (lower row). The groups within each of these categories were chosen to summarize the data while keeping the number of groupings small enough to ensure visibility.

Differences between the groups in each category are relatively small fractions of the 162 standard deviations of the entire sample absorbance and impedance angle; the standard 163 deviations are largely homogeneous between all groups (not shown) and to simplify the plots 164 we summarize them using the overall standard deviation. The largest group differences occur 165 within the age cohort category, with the younger three cohorts (spanning 6-19 years) showing 166 systematic differences from the two adult cohorts (spanning 20-80 years). Specifically, the 167 younger cohorts show slightly lower absorbance means below about 1000 Hz. In the range of 168 about 1500-5000 Hz, the absorbance means for the three younger cohorts show a systematic 169 increase in absorbance with decreasing age cohort; at these higher frequencies the larger 170 differences between the means of the youngest and oldest age cohorts approach one half of 171 a standard deviation of the sample mean. Similarly, there are also age-cohort effects in the 172 impedance angle, with younger age cohorts exhibiting larger angles than the adults in the 173 1000-2000 Hz region, and the younger age cohorts exhibiting smaller impedance angles in the 174 4000-6000 Hz range. The largest differences in impedance angle are on the order of about 175 two thirds of a standard deviation of the sample mean. 176

The remaining three categories – race cohort, sex, and left/right ears - show minimal differences in absorbance and impedance angle within their respective groups. In all cases, differences between the groups are generally well below one half of the standard deviations of the entire population's absorbance and impedance angle.

To help quantify the observed group differences in absorbance and angle, we carried out an analysis of variance for age cohort, race cohort, sex, and left/right ears. To reduce the number of tests, we adopted a reviewer suggestion and picked the single frequency of 2000 Hz across all groups comparisons. All eight overall F-tests were highly significant (all p-values < 0.0001), which is not unexpected given the large number of measurements (n=5591).

186 4. Discussion

Figure 3 compares the NHANES normal-hearing measurements to published measurements from Downing et al. (2022); Groon et al. (2015), and Rosowski et al. (2012); these three studies were chosen because their results are representative of the larger literature. An important conclusion from Figure 3 is that the NHANES measurements are consistent

with the wider WAI literature. This result demonstrates that trained professionals using 191 the Titan instrument, in a community setting inclusive of all demographics, produce similar 192 results as measurements taken by researchers in laboratory settings. At the same time, we 193 note that 20% of the measurements did not meet the DSC. As researchers develop a better 194 understanding of how WAI data can be corrupted during the measurement process, improve-195 ments in the automation of measurement systems like the Titan can be applied in real time 196 to measurements. While it was possible here to remove measurements that were clearly 197 corrupted (out of range and probable leaks), more work is needed to determine appropriate 198 data selection criteria for measurements that are either from very young ears or ears that 199 are not normal – such populations would have data selection criteria that differ from the 200 normal-hearing, 6-years-and-older population considered here. Additionally, more research 201 is needed in all populations to differentiate valid from corrupt measurements in cases where 202 the probe is either clogged, oblique to the canal or against the canal's wall. 203

We also offer a few thoughts on some details within the summary means plotted in 204 Figure 3. The NHANES data were collected with version 3 of the Titan Suite measurement 205 system (Interacoustics, 2022), which appears to result in a characteristic pattern with small 206 and systematic oscillations in frequency in all of the means; it is likely that this pattern 207 results from slight imperfections in the calibration cavities associated with version 3 of the 208 Titan. The Downing et al. (2022) measurements were collected with version 4 of the Titan 209 system which has an updated calibration cavity design and no measurement oscillations. 210 Nonetheless, the two systems produced similar results across similar age groups. The Groon 211 et al. (2015) data were collected with a lab-specific system that used a probe similar to 212 that in the commercial Titan, and the Rosowski et al. (2012) data were collected with the 213 commercial HearID system from Mimosa Acoustics (Mimosa Acoustics, 2022). It is notable 214 that the low-frequency absorbance means from these latter two studies show a larger gap 215 than other comparisons in the plot. One explanation is the location of the probe tip for the 216 two systems; the Titan-based probe tip used by Groon et al. (2015) likely sits more laterally 217 in the ear canal than the HearID-based probe tip used by Rosowski et al. (2012), effectively 218 leading to a deeper insertion associated with the Rosowski et al. (2012) data. Abur et al. 219 (2014) showed a similar systematic difference of about 0.1 in absorbance below 1000 Hz 220

with differences in insertion depth of 6 mm; thus, it seems likely that these differences in low-frequency absorbance result from different probe placements. Data selection criteria may also need to consider probe placement when using low-frequency absorbance values as a criterion.

This work has used descriptive statistics to summarize the largest-to-date WAI dataset 225 taken on normal-hearing ears within a community setting across a broad demographic. Dif-226 ferences in absorbance and impedance angle were nominal within the categories of age cohort, 227 race cohort, sex, and left/right ears. While there were some systematic trends, most of the 228 group differences were far smaller than the corresponding standard deviations; the largest 229 variations occurred when age was the parameterized category and between the younger age 230 groups. To examine the small systematic differences within each of the four categories, one 231 would need to account for the multiple comparisons inherent with 107 measurement frequen-232 cies and the various age and race groups chosen for analyses, along with sex and ear side. 233 While an analysis of variance did demonstrate significant differences among groups at 2000 234 Hz, and similar analyses would result in significant differences among groups at additional 235 frequencies, caution must be taken in reading too much into these small differences due to 236 the complications of multiple comparisons. Additionally, statistical significance of small dif-237 ferences, which result from a large number of measurements, is less important than whether 238 or not the differences among the groups are clinically significant. In fact, the findings that all 239 groups have very similar standard deviations that are far larger than inter-group differences 240 suggests that most of the reported differences among groups are likely clinically insignificant. 241

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Table 1: Demographics for both NHANES datasets. The NHANES demographic field of "RIDRETH3 - Race/Hispanic origin w/ NH Asian" was used to create four race/ethnicity groupings reported here. Three groups come directly from the NHANES coding and are: (1) Non-Hispanic White, (2) Non-Hispanic Black, and (3) Non-Hispanic Asian. Our fourth group (4) "Other" combines the remaining NHANES groups of Mexican American, Other Hispanic, and Other Race - Including Multi-Racial. The column labeled # Ears reports the total number of ears that met the data selection criteria (DSC); in some subjects only a single right or left ear met the criteria and in other subjects both ears met the criteria.

NHANES 2015-2016 (Ages 20-69 years)					
Group	# Subjects	Right only	Left only	Both Ears	# Ears
All Normal-Hearing Subjects	2174	359	380	1435	3609
Meet Data Selection Criteria (DSC)	1851	428	400	1023	2874
– Non-Hispanic White (meet DSC)	541	148	125	268	809
– Non-Hispanic Black (meet DSC)	412	88	84	240	652
– Non-Hispanic Asian (meet DSC)	257	44	54	159	416
– Other (meet DSC)	641	148	137	356	997
– Male (meet DSC)	673	185	166	322	995
– Female (meet DSC)	1178	243	234	701	1879
NHANES 2017-2020 (Ages 6-19 and 70-80 years)					
Group	# Subjects	Right only	Left only	Both Ears	# Ears
All Normal-Hearing Subjects	1976	259	273	1444	3420
Meet Data Selection Criteria (DSC)	1731	395	350	986	2717
– Non-Hispanic White (meet DSC)	557	132	117	308	865
– Non-Hispanic Black (meet DSC)	433	102	103	228	661
– Non-Hispanic Asian (meet DSC)	137	30	24	83	220
– Other (meet DSC)	604	131	106	367	971
– Male (meet DSC)	836	215	176	445	1281

²⁹⁷ Figure Captions

Figure 1: WAI measurements of absorbance (left column) and impedance angle (right 298 column). In each plot, thin lines are individual measurements that correspond to "Meet 299 Data Selection Criteria" (upper, n=5591), "Out of Range" (middle, n=850), and "Probable 300 Leak" (lower, n=588). The measurements that meet the data selection criteria (upper row) 301 are summarized by their median (thicker black line), their 25-75% range of data (thinner 302 black line), and their 5-95% range of data (vellow dotted lines); these summary statistics 303 for the measurements meeting the data selection criteria are included on all plots to aid in 304 visual comparisons across the groups. 305

Figure 2: Comparisons of WAI measurements within the categories of age cohort (upper 306 row), race cohort (upper-middle row), male/female (lower-middle row), and left/right ears 307 (lower row), each broken into appropriate groups. The four columns show the mean ab-308 sorbance for each group (left column), the differences in absorbance between the groups 309 (left-center column), the impedance angle for each group (right-center column), and the dif-310 ferences in angle between the groups (right column). In each plot, solid lines are the means 311 or the mean differences that correspond to the group within the row's legend; lightly dashed 312 lines indicate 5-95% range of the plotted quantities; and the dashed black lines on the differ-313 ence plots show the standard deviation for the absorbance and impedance angle calculated 314 from all measurements (Fig. 1, upper row, n=5591). Plots of differences (left-center and 315 right columns) are relative to the quantity at the bottom of the respective legend and are 316 defined in the labels on the y-axes. 317

Figure 3: Comparison of WAI measurements of mean absorbance (left column) and mean impedance angle (right column) between the NHANES data from this work and published studies. The NHANES data are summarized by plotting the NHANES mean data from the two age groups that are most different from the overall NHANES mean. Impedance angle data are not available for Downing et al. (2022). The comparison data were plotted by accessing them through the WAI database hosted at Smith College (Voss and Horton, 2022).



Figure 1:



Figure 2:



Figure 3: