

Age-related hearing loss

A guide for older adults, families and caregivers

Untreated hearing loss affects people in different ways

Hearing loss is the third most common physical condition after arthritis and heart disease. The Hearing Loss Association of America (HLAA) estimates that by age 65 one in three people have a hearing loss.

Someone who has lost hearing may not hear knocking at the door, the telephone ringing, or a smoke alarm sounding. Hearing loss can also make the simple exchange of feelings, ideas and other information much more difficult. Because hearing loss is not visible, these effects may be attributed to aloofness, confusion or personality changes.

Dr. Frank Lin, who studies the effects of hearing loss on older adults, says, "Hearing loss shouldn't be considered an inconsequential part of aging." Untreated hearing loss has a number of effects, including increased risk for faster cognitive decline, dementia, depression and falls.

Impact of untreated hearing loss

Studies have linked untreated hearing loss to:

- Feeling irritable or even angry.
- Having a negative outlook.
- More fatigue, tension and stress.
- Depression.
- Avoiding or withdrawing from social situations.
- Isolation and loneliness.

- Less awareness of environmental sounds and greater risk to personal safety.
- Trouble remembering things.
- More difficulty learning new tasks.
- Poor job performance and earning potential.
- Poorer psychological and physical health.

Signs of hearing loss

- Trouble distinguishing words that sound similar.
- Inappropriate responses in social situations.
- Hears men more clearly than women and children.
- Turns head to one side or cups one ear to hear better.
- Frequently responds with a smile and a nod without further comments.
- Difficulty conversing in the car.
- Not engaged during group discussions or family gatherings.
- Frequently does not hear the phone or doorbell.
- Turns up volume too loud when watching television or listening to the radio.

There is help for hearing loss

Learn more about treatment and improving access to information in the next few pages!

First step

If you suspect you or someone you care for may have a hearing loss, the Food and Drug Administration (FDA) recommends getting:

- a medical examination from a licensed physician (preferably an ear, nose, and throat physician), or
- a hearing test.

A hearing test measures hearing. The results are used to determine appropriate treatment. Keep a copy of the results, called an audiogram. The audiogram is used to purchase a hearing aid and to qualify for some programs and services.

Choosing a hearing professional

In Minnesota, audiologists and hearing instrument dispensers can administer hearing tests and recommend treatment.

The professional should have credentials from the Minnesota Department of Health.

You can find more information, including the professional's credential status, on the Minnesota Department of Health's website (<https://www.health.state.mn.us/facilities/providers/hid/consumerinfo.html>).

Choosing a hearing aid

Ask the hearing professional these questions to make informed decisions about your choices.

- What brands of hearing aids do they carry? (Most clinics will have several brands of hearing aids.)
- How much does the hearing aid cost?
- Does the hearing aid come with a telecoil?
- What accessories work with this hearing aid? (Ask about the cost of any accessories.)
- What guarantees or warranties come with the hearing aid?
- How long do the guarantees or warranties last?
- How much will it cost to service the hearing aid?
- Are loaner hearing aids available if the hearing aid needs repairs?
- Are there fees if the hearing aid is returned during the trial period?

If the hearing professional cannot answer these questions, consider shopping elsewhere:

Over-the-counter hearing aids

The **Over-the-Counter Hearing Aid** Act of 2017 will make hearing aids for high-frequency mild to moderate hearing loss available to adults for over-the-counter (OTC) purchase. This is expected to make hearing aids available at a lower cost. The FDA will issue safety and labeling requirements for this new category of OTC hearing aids to ensure that OTC hearing aids meet the same high standards as other medical devices. OTC hearing aids should become available in late 2020 to early 2021.

Other assistive technologies

Assistive technology provides access to everyday sounds, helping people with hearing loss live more independently and safely. Many helpful products are available at a lower cost than hearing aids. Prices vary depending on the options and quality; compare options to find devices that meet your needs.

It is a good idea to have your hearing tested before purchasing these devices, but it is not required.

- **Assistive listening devices** (ALD) use a microphone to pick up sound, and send the amplified sound to the ear through headphones or earbuds. Assistive listening devices can be helpful when using the phone, talking with friends and family, watching television, listening to music, going to the theater, participating in worship services and more. Assistive listening devices can be used with or without hearing aids.
- **Alerting devices** use a flashing light, extra-loud sounds or vibrations to alert the person with hearing loss to various environmental sounds.
- **Amplified phones** offer greater volume control as well as frequency boosting to make speech both louder AND clearer.
- **Captioned telephones** allow the person with hearing loss to listen to the caller and read the transcribed message on the captioned telephone screen.
- **Smartphone apps** are available that amplify speech, react to environmental sounds, transcribe spoken speech to text and more.

To learn more about assistive technologies and our Telephone Equipment Distribution program, visit our website (<https://mn.gov/deaf-hard-of-hearing>).

Know the facts about hearing loss

Myth	Fact
My hearing loss is hardly noticeable.	Often, hearing loss is so gradual that we don't realize what sounds we're missing. A hearing test is the best way to determine the level of hearing loss and monitor changes in hearing.
If I had a hearing loss, my family doctor would have told me.	Only 14% of physicians routinely screen hearing during a physical. Without special training and an understanding of the nature of hearing loss, your doctor may not even realize that you have had changes to your hearing.
My hearing loss is normal for my age.	It is normal for many things to change over time, including hearing and vision. It is also normal to use glasses or hearing aids to improve your quality of life. Both can increase comfort and independence, and reduce unwanted side effects.
My hearing loss cannot be helped.	In the past, many people with hearing loss in one ear, with a high frequency hearing loss, or with nerve damage (sensorineural) may have been told they could not be helped. With today's technology, nearly 95% of people with a sensorineural hearing loss find hearing aids helpful.
Hearing aids will make me look "older" and "handicapped."	Looking older is affected by many factors other than hearing aids. It is not the hearing aids that make one look older, but instead what one believes they imply. Smiling and nodding your head when you don't understand what's being said makes your condition more apparent than the largest hearing aid.
Hearing aids will make everything too loud.	At one time, hearing aids amplified everything so the user could hear soft speech or other soft sounds. Normal conversation, then, would have been too loud. Today's hearing aids, however, adjust the amount of amplification based on the input level.

Communication tips

- Begin the conversation by getting the person's attention.
- Do not assume the person hears or understands everything you say, even if they wear a hearing aid.
- Converse in a quiet environment with few visual and auditory distractions.
- Communicate in a well-lit area, but avoid standing in front of bright lights or windows.
- Keep your face and mouth clearly visible. Do not eat, smoke, chew gum, cover your mouth or turn away while talking.
- Enunciate your words clearly. Do not make exaggerated lip movements or shout.
- If you have a tendency to talk fast, try to slow down a little (but don't talk too s-l-o-w-l-y).
- Maintain eye contact. If you have to turn away from the older adult, wait until you re-establish eye contact before continuing your conversation.
- Use facial expressions and gestures to clarify your message. Pointing to appropriate objects or using visual aids can also be very helpful.
- Introduce one idea or fact at a time.
- Take turns in group conversations. Encourage one person to talk at a time.
- Rephrase your message if the older adult does not understand you.
- Be patient.

Tips for caregivers

- Protect hearing by reducing environmental noise and treating ear infections.
- Be aware of ototoxic drugs that may damage hearing and cause tinnitus (or make it worse).
- Recognize the signs of hearing loss and make appropriate referrals to specialists for diagnosis and treatment.
- Learn about hearing loss and the resources available to assist you in meeting the needs of the older adult in your care.
- Appreciate the impact hearing loss has on the older adult and the stages of adjustment they may go through before accepting it.
- Be aware of the myths associated with hearing loss and dispel them with facts.
- Modify the environment, when possible, to accommodate the needs of those with a hearing loss.
- Seek support from professionals with experience providing quality care to older adults with hearing loss.

- Learn and use effective communication strategies that work for the individual.
- Use assistive technology to improve communication, improve understanding and promote independence.



Finding help

Deaf and Hard of Hearing Services Division (DHHSD) is here to help individuals experiencing hearing loss, their families and caregivers:

- Learn more about hearing loss.
- Identify assistive technology that meets the individual's unique needs.
 - The Telephone Equipment Distribution Program provides devices that make using the phone easier. There is no cost to those who qualify.
- Connect to mental health services for support.
- Find resources in the community.

Phone: 800-657-3663

DHHSD's website:

<https://mn.gov/deaf-hard-of-hearing>

Additional Resources

American Academy of Audiology (AAA)

11480 Commerce Park Drive, Suite 220

Reston, VA 20191

Phone: 800-222-2330

AAA's website: www.audiology.org

Association of Late-Deafened Adults (ALDA)

8038 Macintosh Lane, Suite 2

Rockford, IL 61107-5336

Phone: 815-332-1515

ALDA's website: <https://alda.org>

Hearing Loss Association of America (HLAA)

7910 Woodmont Avenue, Suite 1200

Bethesda, MD 20814

Phone: 301-657-2248

HLAA's website: www.hearingloss.org

National Institute on Deafness and Other Communication Disorders

31 Center Drive, MSC 2320

Bethesda, MD 20892-2320

Phone: 800-241-1044

NIDCD's website: www.nidcd.nih.gov/health/hearing/Pages/Age-Related-Hearing-Loss.aspx

800-657-3663

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