

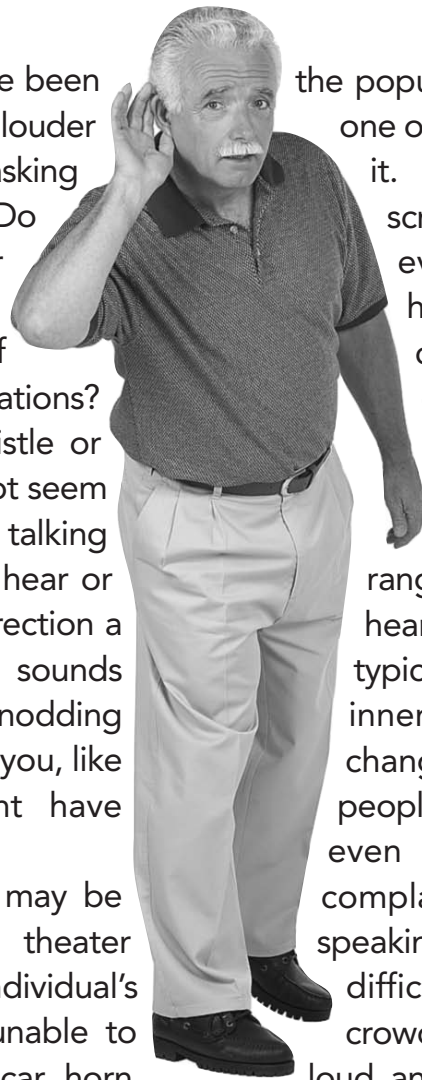
Do you hear what I hear?

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Do you find that you have been turning up the volume louder on your television and asking people to repeat themselves? Do you avoid talking on the phone or going out to restaurants and other crowded places because of difficulty understanding conversations? Do you ever hear a ringing, whistle or humming that other people do not seem to hear or get asked why you are talking so loudly? Do you ever strain to hear or have trouble telling from what direction a sound is coming? If any of this sounds familiar and you find yourself nodding your head 'yes' while reading this you, like 22 million other adults, might have hearing loss.

Without adequate hearing, it may be difficult to enjoy music, attend theater performances or movies. An individual's safety may also be affected if unable to hear a doorbell, fire alarm, or car horn. Hearing loss is well known to effect social and emotional well-being and people who suffer from it often report depression and withdraw from social activities. This is very unfortunate as hearing loss is so simple to diagnose and treat.

Around 30 to 35% of Americans between the age of 65 and 75 and nearly 50% over the age of 75 have treatable hearing loss. Not only are the sheer numbers of those over the age of 65 increasing, but also the percentage of this population in proportion to the whole country. When the 'Baby Boom' turns 65 in 2011, those numbers will continue to increase until 2030 when the segment of the population over 65 will have grown 20%. Think about it, nearly 10% of



the population will have hearing loss but only one out of every five does something about it. Furthermore, very few physicians screen for hearing loss in the elderly even though it ranks behind only hypertension and arthritis amongst chronic conditions affecting senior citizens.

Age-related hearing loss, also called presbycusis, is the most common cause of hearing loss in this age range and is usually rehabilitated with hearing aids. Age-related hearing loss is typically caused by gradual changes in the inner ear and hearing nerve. These changes develop so slowly that many people do not realize that their hearing is even diminished. Instead, they may complain that others are mumbling or speaking less clearly making conversations difficult to understand particularly in crowds. Some sounds may actually be too loud and tinnitus, or ringing in the ears, is often present.

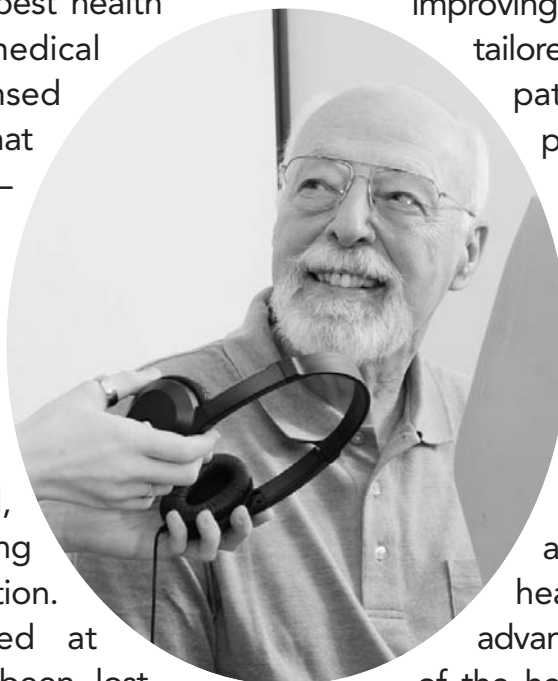
There are many other potential medical causes of hearing loss that must be ruled-out by a physician who specializes in disorders of the ear – an Otolaryngologist (or ear, nose and throat doctor). Other medical problems, including heart disease, diabetes and medication side effects, can accelerate hearing loss. Also, changes from ear infections, holes in the eardrum and earwax impactions can cause hearing loss – medical problems that require a physician to diagnose and implement treatment.

Hearing loss is relatively simple to diagnose. An Audiologist will perform an audiogram (hearing test) to determine the presence and

severity of hearing loss while an Otolaryngologist will rule out a medical cause of hearing loss. The FDA (Food and Drug Administration) has determined that it is in your best health interest to have a medical examination by a licensed physician – preferably one that specializes in ear diseases – before buying a hearing aid. Once hearing loss has been diagnosed, there are several options to treat it. Unfortunately no means of reversing age-related hearing loss have been discovered, although scientists are exploring restoration of inner ear function. Instead, treatment is aimed at compensating for what has been lost.

Encouraging people to speak clearly and slowly while directly facing you during a conversation may prove helpful. There are also assistive living devices that can send a soundwave from the television to a pair of headphones like a radio or simply amplifiers built-in to the telephone. In some cases of very severe hearing loss, cochlear implants may be required to improve hearing loss.

The most reliable means to rehabilitate hearing loss is with hearing aids. If properly fitted in people



who are good candidates for amplification, hearing aids can help to restore hearing. Technology for hearing aids is constantly improving so that they can be specifically tailored to each individual's unique pattern of hearing loss. Digital programming can help to selectively amplify only the frequencies where hearing loss exists while limiting the maximum volume presented to the ear to prevent discomfort. Some people require hearing aids for both ears and some in just one. There are multiple sizes and styles of hearing aids that each have advantages depending on the severity of the hearing loss and each individual's

ability to care for the hearing aid. Well-trained Audiologists and Otolaryngologists can provide appropriate counseling as to whether a person is a candidate for hearing aid amplification, benefits and limitations of amplification, and which device best suits each person.

For a hearing test, ear evaluation and recommendations on improving your hearing, contact Ear, Nose and Throat Specialists of Southern New Hampshire at 622-3623 or explore the website: entspecialistsnh.com.