Are you afraid to know for sure?
If you think you might have a hearing loss you are not alone. About one in five persons in the United States has a hearing loss. If you have suspected for a while, but just haven’t got around to doing anything about it, that is not unusual. On average it takes people seven years from the time they think they might have a hearing loss to the time they seek treatment.

How can I tell if I have a hearing loss?
If you answer yes to some of the following questions, you might have a hearing loss.

Do you...
• often ask people to repeat what they say?
• have trouble hearing in groups?
• think others mumble?
• fail to hear someone talking from behind you?
• turn up the volume on the TV or car radio?
• have difficulty hearing on the phone?
• have trouble hearing your alarm clock?
• have difficulty hearing at the movies?
• dread going to noisy parties and restaurants?

“Sometimes I hear just fine. Perhaps I really don’t have a hearing loss?”

The only way to know for sure is to have a hearing test. Other people sometimes suspect we have a hearing loss before we do ourselves. If someone mentions that they have noticed you have trouble hearing them take them seriously and go for a hearing test.

How we hear depends on many things such as the pitch of the speaker’s voice, being able to see the speaker’s face, background noise, acoustics of the room, how far you are from the speaker, whether you are stressed or tired, the lighting and the seating arrangement. All these things can impact on how well we hear. Sometimes we do hear better than others and this might stop us from seeing a need to get our hearing checked.

Did you know that…
Hearing loss is a major public health issue that ranks third in line after arthritis and heart disease as one of the most common physical conditions?

• There are 48 million people in the United States who have a hearing loss.
• At age 65, one out of three people has a hearing loss.
• It is estimated that 30 school children per 1,000 have a hearing loss.

“But I don’t know anyone else with hearing loss. Where are they?”

Baby boomers are starting to lose hearing from rock concerts they went to when they were young; young people are spending hours listening to music through earbuds and no one knows the long-term effect yet; we are living longer and more people are losing hearing as they age. So, it is very likely that someone you know has a hearing loss even if he or she doesn’t talk about it or realize it yet.

As people start to lose their hearing they look around at their co-workers, colleagues, friends and family and feel uncomfortable talking about having difficulty hearing because they think they are the only one with this problem.

Think about these situations:
• Are you embarrassed to talk openly about not being able to hear?
• Are you cutting out activities that you used to love but have become painful because you cannot join in fully anymore?
• At work are you afraid to reveal your hearing loss in case it jeopardizes your job and your supervisor and co-workers might see you as less competent?
• Are you bluffing when out with friends in noisy restaurants?
• Are you feeling cut off from your young children because you cannot hear their high-pitched voices?
• Are family holidays a strain because so many people are talking at once?
These are common reactions and can lead to withdrawal from social interaction, anxiety, loss of self-esteem and even depression.

What causes hearing loss?
Hearing loss can be caused by noise, heredity, excessive earwax, aging, some medications, infections, and medical conditions such as diabetes.

What other medical conditions could contribute to hearing loss?
- Meniere’s disease occurs when excessive fluid in the inner ear causes pressure on the balance and hearing system.
- Otosclerosis is a hereditary disorder in which a bony growth forms around a small bone in the middle ear, preventing it from vibrating when stimulated by sound.
- Otitis Media is an infection of the middle ear in which an accumulation of fluid might interfere with the movement of the eardrum and ossicles (small bones which vibrate to sound).
- Tinnitus is a common symptom indicated by ringing or a sensation of noise in the ear and/or head. It is associated with middle ear infections, aging, noise exposure, certain medications, and could be a symptom of other medical conditions.

How does noise affect hearing?
Prolonged exposure to high-intensity noise, sudden blasts such as those experienced in the military, loud concerts, MP3 players at high volume for many hours, and machinery such as leaf blowers and lawn mowers used for long periods with no ear protection can cause permanent damage to the inner ear. No medical or surgical treatment can correct a hearing loss resulting from noise exposure. Prevention is important.

What should I do if I think I have a hearing loss?
See an ear, nose and throat doctor (otolaryngologist or otologist) or your primary care physician to see if you have a hearing loss and to rule out any medical condition. You can also choose to go to an audiologist directly without seeing a doctor. In this case you would need to sign a waiver, because currently the Food and Drug Administration (FDA) requires that you see a physician first.

What will I learn from the doctor?
You will find out if you have a hearing loss, what might be causing it, and if it can be treated. For example, fluid in the middle ear or wax in the ear canal can cause hearing loss.

If you do have a hearing loss, don’t despair. There are several things you can do to hear and cope better in situations that have caused you difficulty in communicating.

In the event that you are diagnosed with a hearing loss the physician should refer you to a qualified hearing health care professional for a full hearing test. This test will tell you the degree and type of hearing loss and also determine if you could be helped by hearing aids. The hearing health care professional will recommend what type of hearing aid is best for your hearing loss.

If the physician finds no medical cause for your hearing loss and does not refer you for further testing and tells you that nothing can be done for you, you should make an appointment directly with a hearing health care professional for a full hearing test and evaluation.

If a hearing aid is recommended where do I get one? Will my insurance cover it?
Hearing aids are sold by audiologists and hearing instrument specialists. “Dispenser” is a generic term for those who sell and fit hearing aids. There are many types of hearing aids that vary in cost, design, and features. Hearing aids are covered by some private insurance plans, company plans, the Federal Employee Health Benefit Plan, and Tricare, the plan for active and retired military and their families. Some plans cover hearing testing, but not the hearing aids. Medicare does not cover hearing aids. For information about financial help go to www.hearingloss.org.

Is there anything I should be aware of when buying my hearing aid?
HLAA has a Consumer Checklist of best practices to help you know what to ask for and look for when buying a hearing aid. Go to www.hearingloss.org to get the checklist.

Most states have laws in place that provide for a 30-day trial period. However state laws vary, some have a longer period, some none at all, and some dispensers will offer more time. Ask your dispenser to provide a written statement regarding the trial period, with the start and end dates noted, as well as whether the trial period will be stopped if you have to return the hearing aid for repairs during the trial.

Find a hearing health care provider you are comfortable with and who will work with you until you get the optimum results to help you with your hearing loss.

Ask about various options available in the hearing aid, such as a T-switch (sometimes called a telecoil or audio coil) that is convenient to use with telephones and hearing assistive technology. Purchasing hearing aids, especially if this is a first hearing aid, by mail or telephone order is not recommended as it might not include the necessary follow-up to ensure a successful fitting and adjustment to the hearing aid.
What else should I know about hearing aids?

Hearing aids will not correct hearing like glasses correct vision. Don't expect 20/20 hearing. But they will help you hear in many situations. Your new hearing aids may require follow-up visits for technical tweaks by your provider. Adjusting to hearing aids takes time and perseverance. But it is worth it. You might have a love/hate relationship with your hearing aid at first as no one is enthusiastic about getting a hearing aid—but after a while, you will not want to be without it.

A hearing aid coupled with your willingness to tell others how to communicate with you and your practicing good speechreading and communication strategies is a winning combination and will get you back into the social scene.

What is an otolaryngologist?

Otolaryngologist (oh/toe/lair/in/goll/oh/gist)—a physician trained in the medical and surgical management and treatment of the ear, nose, throat (ENT), and related structures of the head and neck. For an otolaryngologist near you, call the American Academy of Otolaryngology at 703.836.4444, or visit AAO-HNS at www.entnet.org.

What is a hearing health care professional?

Audiologists and hearing aid specialists (also called hearing instrument specialists) are hearing health professionals. They both test hearing and fit hearing aids. Audiologists have a broader training. See the Consumer Reports July 2009 article, “Hear Well in a Noisy World: Hearing Aids, Hearing Protection & More.”

An audiologist is a health care professional qualified to do a thorough evaluation of your hearing. The audiologist can determine your type and degree of hearing loss and whether or not you can be helped by hearing aids and, if so, the best type of hearing aid for you. The audiologist will recommend a treatment program to assist you with your communication needs and, if indicated, might recommend a medical evaluation.

For more information or for an audiologist near you, call the American Speech-Language-Hearing Association (ASHA) at 800.638.8255, or visit ASHA at www.asha.org. You can also call the American Academy of Audiology at 800.AAA.2336, or visit www.audiology.org.

A hearing instrument specialist is a professional certified by the National Board for Certification in Hearing Instrument Sciences (NBC-HIS) and licensed or registered in all states. This specialist does an assessment, fits and dispenses hearing aids, and provides instruction in the use and care of hearing aids and related devices. For a hearing instrument specialist near you, call the International Hearing Society’s (IHS) Hearing Aid Helpline at 800.521.5247, or visit HIS at www.ihsinfo.org.

What is hearing assistive technology?

Hearing assistive technology (HAT) such as audio loops, FM, and infrared systems are like binoculars for the ears and work with or without hearing aids. They help you to hear and understand better in many situations where acoustics are poor, background noise is bothersome, and there is a far distance from the speaker.

In public places such as theaters, listening systems are required under the Americans with Disabilities Act (ADA) to make programs and services accessible. But, you must ask for the accommodation.

Basic communication tips:

In the meantime there are simple things you can do to hear better with or without hearing aids. Communication is a two-way street. Here are tips for the person who hears well, and for the person who has the hearing loss.

Tips for a hearing person to communicate with person who has the hearing loss

Set your stage

• Get their attention first.
• Face person directly.
• Spotlight your face (no backlighting).
• Avoid noisy backgrounds.
• Ask how you can best facilitate communication.
• When audio and acoustics are poor, emphasize the visual.

Get the point across

• Do not shout.
• Speak clearly, at moderate pace, not over-emphasizing words.
• Don’t hide your mouth, chew food or gum, or smoke while talking.
• Rephrase if you are not understood.
• Use facial expressions, gestures.
• Give clues when changing subjects or say “new subject.”

Establish empathy with your audience

• Be patient if response seems slow.
• Talk to the person with the hearing loss, not about him or her to another person.
• Show respect to help build confidence and have a constructive conversation.
• Maintain a sense of humor, stay positive and relaxed.
Tips for the person with hearing loss to communicate with the hearing person

Set your stage
- Tell others how best to talk to you.
- Pick your best spot (light, quiet area, close to speaker).
- Anticipate difficult situations, plan how to minimize them.

Do your part
- Pay attention.
- Concentrate on speaker.
- Look for visual clues.
- Ask for written cues if needed.
- Don’t interrupt. Let conversation flow to fill in the blanks and gain more meaning.
- Maintain a sense of humor, stay positive and relaxed.

Establish empathy with your audience
- Let the speaker know how well he or she is conveying the information.
- Don’t bluff. Admit it when you don’t understand.
- If too tired to concentrate, ask for discussion later.
- Thank the speaker for trying.

Beyond the hearing aid, help is available
Join HLAA at www.hearingloss.org and learn more about what you can do to cope with your hearing loss. The Hearing Loss Association of America, founded in 1979, opens the world of communication to people with hearing loss through information, education, support, and advocacy.

HLAA publishes Hearing Loss Magazine, holds annual conventions, produces the Walk4Hearing®, hosts online learning with the Hearing Loss Support Specialist Training, chat forums, and more. The national support network includes the Washington, D.C. area office, state organizations, and local chapters.

Support in HLAA Chapters
Find one of our local chapters and meet others who are at different stages of coping with hearing loss and who can help you get through this. Once you learn more about hearing loss, coping strategies, how to be assertive in communication situations, and technology that can help, you will be able to open up and talk about your hearing loss. Then you will find others are also experiencing the same issues as you, but they are just not talking about it either!

HLAA Chapters meet monthly with speakers on all kinds of topics such as hearing aids, assistive listening devices, TV captioning, cochlear implants, how to communicate with your spouse and family members, hearing in public places and meetings, coping at work, and much more.

Visit www.hearingloss.org to find a chapter near you.