



Do You Think You Have a Hearing Loss?

Are you afraid to know for sure?

Many people might notice they have a hard time hearing in certain situations but don't do anything about it, at least not immediately. This could be for many reasons. Maybe it's denial—they're afraid they might find out they actually do have a hearing loss. Or maybe it doesn't affect their daily lives so they don't see a need to do anything about it.

But for whatever reason people have for not getting a hearing test, it's not unusual. On average it takes people seven years from the time they suspect they might have a hearing loss to the time they seek treatment. There is no reason to wait. In fact, just as with most medical conditions, the earlier it is detected the better the chances something can be done to help. So, why are you waiting?

Here are some basic questions and tips to help determine if you might have a hearing loss. However, this is just a guide; if you suspect a hearing loss or just have a little difficulty hearing every now and then it is important to see a hearing health care or medical professional for a full evaluation.

How can I tell if I have a hearing loss?

Do you...

- often ask people to repeat themselves?
- have trouble hearing in groups or loud environments, such as at parties or restaurants?
- often think others are mumbling?
- 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?

If you answered "yes" to any of these questions it could indicate a hearing loss.

I hear just fine most of the time so I don't have a hearing loss, do I?

The only way to know for sure is to get your hearing checked. Other people sometimes suspect we have a hearing loss before we do ourselves, so if someone mentions they have noticed you have trouble hearing them, take them seriously and get a hearing test.

There are many factors that determine how well we hear in various situations: the pitch of the speaker's voice, whether or not we can see the speaker's face, the presence of background noise, the acoustics of the room, how far we are from the speaker, whether we are stressed or tired, the lighting and the seating arrangement are all things that can impact how well we hear.

But despite acknowledging that some or all of these apply, we might still hear better at some times more than others, which might prevent us from seeing the need to get our hearing checked. Don't let it stop you; having trouble hearing in even one of these scenarios could indicate a hearing loss.

Did you know that...

- Approximately **48 million Americans** have a significant hearing loss.
- People with hearing loss **wait an average of 7 years** before seeking help.
- Of Americans in the workplace, **22 million**—or about **22 percent**—are exposed to hazardous noise levels at work.
- The Americans with Disabilities Act (ADA) prevents an employer from firing any person with "impairments that substantially limit a major life activity." **This includes hearing loss.**
- **12.5 percent of kids between the ages of 6 and 19** have hearing loss as a result of listening to loud music, particularly through earbuds at unsafe volumes.
- **2.7 million veterans** receive either disability compensation for service-connected hearing disabilities or are in treatment for related hearing issues.

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 played at an unsafe volume; we are living longer and more people are losing their 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.

Consider these situations:

- Are you embarrassed to talk openly about not being able to hear?
- Have you stopped doing things you used to enjoy because you can't always hear well enough to join in fully anymore?
- At work are you afraid to tell people about your hearing loss for fear it could jeopardize your job or because your supervisor and co-workers might see you as less competent?
- Do you sometimes bluff when in you're in a noisy place because you can't understand what is being said?
- Are you feeling cut off from 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 many things, including noise, heredity, excessive earwax, aging, some medications, infections, and medical conditions such as diabetes.

What other medical conditions could contribute to hearing loss?

- **Ménière's disease** causes excess fluid to build in the inner ear putting increased 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 loud noise, sudden blasts such as those experienced in the military, loud concerts, music being played at an unsafe volume, and machinery such as leaf blowers and lawn mowers with no ear protection can cause permanent damage to the inner ear over time. 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?

If you suspect you might have a hearing loss it is important to get your hearing checked by a professional. This will also help determine if there is any underlying medical condition causing the problem.

To get your hearing checked you can see an ear, nose and throat (ENT) specialist, an otolaryngologist or otologist, your primary care physician or go directly to an audiologist. 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 and is easily treatable.

How Loud Is Too Loud?

140-165
Firecracker, shotgun firing



140 Jet taking off



120 Ambulance siren



110 Rock concert, symphony orchestra

Regular exposure of more than 1 minute at or above 110 decibels risks permanent hearing loss.

105 Personal stereo at maximum level



100 Woodshop, snowmobile

No more than 15 minutes of unprotected exposure at or above 100 decibels is recommended.

90 Power mower



85 Heavy city traffic, school cafeteria

Prolonged exposure to any noise at or above 85 decibels can cause gradual hearing loss.

75 Dishwasher

60 Normal conversation

40 Refrigerator

30 Whisper

0 Smallest sound a person with normal hearing can detect

Information provided by the National Institute on Deafness and Other Communication Disorders (NIDCD), part of the National Institutes of Health.

What if they tell me I do have a hearing loss?

If you find out you 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 when communicating.

In the event that you are diagnosed with a hearing loss the physician should refer you to a qualified hearing health care professional, such as an audiologist, 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 or some other type of assistive listening device. The hearing health care professional will recommend the best type of hearing aid or device 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 shouldn't take their word for it. 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 (a plan for active and retired military and their families). Some insurance plans cover hearing testing, but not the hearing aids. Medicare does not cover hearing aids. Some states, under Medicaid, will cover hearing aids. You can find more information about financial assistance resources on our website.

Is there anything I should be aware of when buying my hearing aids?

Purchasing a Hearing Aid—A Consumer Checklist (available for download on our website) provides helpful information so you know what to ask and look for when purchasing hearing aids.

Most states have laws in place that require a minimum 30-day trial period for hearing aids. However, laws vary from state to state; some mandate a longer period, some none at all, and some dispensers will provide more time on their own. 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 need to return the hearing aids for repairs during the trial.

It is important to 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-coil (telecoil) that is convenient to use with telephones and hearing assistive technology.

It is highly recommended that you purchase your hearing aids (especially if it's the first time) through a professional dispenser. Buying them elsewhere, such as online, might not include the necessary follow-up to ensure a proper fitting and adjustment to the hearing aid.

Is there anything 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 where you were previously unable to.

After you get your new hearing aids follow-up visits with your provider will probably be necessary for minor adjustments. Getting used to them can take time and perseverance, but it will be worth it. You might even have a love/hate relationship with your hearing aids, at first. Very few people are enthusiastic about getting hearing aids, 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 that will help get you back into the social scene and enjoy everyday life just a little bit more.

What is hearing assistive technology?

Hearing assistive technology (HAT) is any technological device or system (such as an audio loop, FM system or infrared system) which help you better hear and understand in many situations where acoustics are poor, background noise is bothersome, or where the speaker is a long distance away. Most HAT devices can be used with or without hearing aids. 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 this accommodation.

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 broader training.

An **audiologist** is a hearing health care professional qualified to do a thorough evaluation of your hearing. The audiologist can determine the type and degree of your hearing loss and whether or not hearing aids will help. If so, they will recommend the best type for your hearing loss. The audiologist could also recommend a treatment program to assist you with your communication needs and, if an underlying medical condition is indicated, getting a medical evaluation by a specialist or your primary care physician.

For more information or to find an audiologist near you contact the American Speech-Language-Hearing Association (ASHA) at 800.222.8255 or visit asha.org. You can also contact the American Academy of Audiology at 800.222.2336 or online at audiology.org.

A **hearing instrument specialist** is a hearing health care professional certified by the National Board for Certification in Hearing Instrument Sciences (NBC-HIS) and must be licensed or registered in their state. The hearing instrument specialist does assessments, 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 contact the International Hearing Society (IHS) at 800.521.5247 or online at ihinfo.org.

What are otolaryngologists and otologists? What's the difference?

Otolaryngologists (oh/toe/lair/in/goll/oh/jists), commonly referred to as an "ENT" (ear, nose, and throat) doctor, and **otologists** (oh/TOL/oh/jists) are physicians and surgeons who specialize in the treatment of diseases of the ear, nose, throat, head and neck. An otolaryngologist mainly treats conditions related to the ears, nose, throat and sinuses. An otologist is also an otolaryngologist but who has additional training and specializes in disorders of the ear.

For an otolaryngologist near you contact the American Academy of Otolaryngology–Head and Neck Surgery (AAO-HNS) at 703.836.4444 or visit entnet.org. For a local otologist contact the American Otological Society at 217.638.0801 or online at americanotologicalsociety.org.

Basic Communication Strategies

There are simple things you can do to hear better whether you already wear hearing aids or not. Developing good communication skills is a two-way street; they must be practiced by all parties in a conversation—hearing loss or no hearing loss—to get the maximum benefit.

Tips for a hearing person to communicate with someone who has a hearing loss include:

- Get their attention first.
- Face the 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 a moderate pace, not overemphasizing 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 the response seems slow.
- Speak directly 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 a person with hearing loss when communicating with a hearing person include:

- Tell them how best to speak 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 the 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 you're too tired to concentrate, ask for discussion later.
- Thank the speaker for trying.

Find Support in HLAA Chapters

When you join a local HLAA Chapter you will meet others with hearing loss, and learn more about hearing loss, coping strategies, how to be assertive in communication situations, and hearing assistive technology.

HLAA Chapters typically meet monthly. Many feature speakers who discuss 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 hearingloss.org/chapters-state-orgs to find a chapter near you.

Join HLAA

There is help available even beyond the hearing aid. Join HLAA and learn more about what you can do to live more successfully with hearing loss. Visit hearingloss.org for more information or to join.

The Hearing Loss Association of America (HLAA), founded in 1979, opens the world of communication to people with hearing loss through information, education, support, and advocacy. HLAA publishes the bimonthly magazine, *Hearing Life*, holds annual conventions, holds Walk4Hearing events in cities throughout the country, hosts monthly webinars and more. The national support network includes the Washington, D.C. area office, state organizations, and local chapters.