SOUND information

for your hearing health

SOUND information

brought to you by your local audiology professional



Lisa Angelina, Au.D.Doctor of Audiology **Beth Fountain, Au.D.**Doctor of Audiology

828.252.1860

285 McDowell St • Asheville, NC 28803

All Aspects of Life — Not Just Hearing — Are Greatly Affected by Hearing Loss

Because hearing loss occurs gradually in most individuals, few realize the damage it can inflict on all aspects of health and overall quality of life. Research over the past 15 years has only begun to emphasize the importance of seeking treatment when hearing loss becomes a factor in daily life, and only one in five people actually take advantage of all that hearing aids can offer after learning they aren't hearing their best. Those four in five Americans who don't use hearing aids can sometimes delay treatment for so long that communication — even in the most optimal situations — becomes problematic.

www.wncaudiology.com

With the advancement of medical technology comes increased life expectancy. Data shows hearing loss has been steadily increasing over the last two decades, and with an aging boomer population, instances of hearing impairment are likely to reach heights never before seen.

Some effects of hearing loss on quality of life are more obvious than others: Understanding conversation becomes more difficult, and communicating with friends and loved ones becomes an exhausting exercise and can be very frustrating. But then there are the darker aspects that few see. In a 1999 survey by the National Council on Aging, results from 4,000 adults with hearing loss and their significant others showed significantly higher rates of depression, anxiety, and other psychosocial disorders in individuals who were not wearing hearing aids. These findings were consistent with another large, randomized study in which hearing loss was associated with decreased social interaction and more instances of cognitive dysfunction for those who did not use hearing aids compared to those who did. After being fit for hearing aids, those who experienced depression and decreased social interaction saw their conditions improve.

Unfortunately, hearing loss is often ignored during diagnosis and treatment of cognitive memory disorders, with elderly patients in particular. Understanding this link, and the wealth of research linking hearing loss with other disorders, will help with more appropriate diagnosis and better outcomes from treatment in the future.

But quality of life is not based entirely on mental condition, and many with hearing loss also rate total income and overall wellness as unsatisfactory. Consider:

- People with hearing loss are less satisfied with "life as a whole" than those without hearing loss. Individuals with some level of hearing loss report greater dissatisfaction with their friendships, family life, health, and financial situation than individuals without hearing loss. Dissatisfaction with their finances may be related to the fact that those with hearing loss are, in general, less well off than those without; the median net worth of those with hearing loss, ages 51 to 61, is nearly \$40,000 less than those without a hearing loss.
- Fewer working-age individuals (18- to 64-year-olds) with hearing loss are employed than those without hearing loss. About 13 percent of workers ages 51 to 61 with hearing loss report that being hard of hearing limits their work, either in type or amount.
- Loss of independence is another reason for dissatisfaction with some
 aspects of life. The unwillingness to engage in social activities is one factor.
 People of all ages with hearing loss are also more likely to require assistance to
 perform regular daily activities, such as preparing meals, shopping, and handling
 money. Individuals with hearing loss over the age of 70 are about one-third
 more likely to need help with shopping compared to those without hearing loss.

- Depression symptoms in individuals 70 or older are more prevalent.

 About 26 percent of those with hearing loss reported that they had experienced at least four symptoms of depression in the prior week, while less than 15 percent of those without hearing loss reported the same.
- Only 39 percent of those with hearing loss consider themselves in excellent or very good physical health, while 68 percent of well-hearing individuals say the same. Those with hearing loss are more than three times as likely to report being in fair or poor health than those without hearing loss.
- Poor health appears to be a large factor in the decision to retire among those with hearing loss. About 70 percent of retired people with hearing loss reported their health was an important factor in their decision to retire; of those without hearing loss, 44 percent cited health as a factor in their decision.
- Among those retired, overall satisfaction with their retirement shows stark differences. Only 29 percent of people with hearing loss are very satisfied with their retirement, compared to 42 percent without hearing loss.

Among the reasons why individuals delay seeking treatment for their hearing loss is the stigma associated with wearing hearing aids. Individuals with hearing loss often choose not to partake in social activities because they're unable to hear well enough to participate — or because they don't want to lose face by admitting they must wear hearing aids in order to engage with their friends and family.

In one survey, one-third of respondents stated they do not use assistive technology because they believe that hearing aids would "not help with my specific problem." Our office offers better-hearing solutions to individuals suffering from all forms of hearing loss, and we're working to improve the health of the local community — just like you.

National Academy on an Aging Society. Hearing Loss: A Growing
Problem that Affects Quality of Life. December 1999.

Better Hearing Institute. Facts About Hearing Disorders. 1999.

Ries, Peter W. (1994). Prevalence and Characteristics of Persons with Hearing Trouble: United States, 1990–91. National Center for Health Statistics, Vital and Health Statistics, Series 10, No. 188.

M.I. Wallhagen, W.J. Strawbridge, R.D. Cohen, and G.A. Kaplan. "An Increasing Prevalence of Hearing Impairment and Associated Risk Factors Over Three Decades of the Alameda County Study." American Journal of Public Health (1997); 87(3): 440–442.

The National Council on the Aging. The Consequences of Untreated Hearing Loss in Older Persons. Washington, D.C. (1999).

Data from the Hearing Industries Association as explained by Sergei Kochkin, M.D. (personal communication, June 1999).