

# Why did I wait so long to get **HEARING AIDS?**

Do you know someone who regularly turns up the volume on television, mishears conversations, or frequently asks people to repeat themselves? Many of us do. In fact, nearly half of those over the age of 60



suffer from treatable hearing loss. The initial symptoms of hearing loss are often subtle and regarded as a minor inconvenience. However, over time, these annoyances become real-life barriers to healthy communication and enjoyable living. Unfortunately, the average hearing impaired person delays treatment for hearing loss by approximately 6-10 years, and the potential risks in delaying treatment are many. Dr. Frank Lin from John Hopkins Centre for Aging has reported that untreated hearing loss has been related to memory impairments such as dementia. Additionally, research suggests that untreated hearing loss can be associated with mental health concerns such as depression. So why do hearing impaired persons wait 6-10 years to seek out treatment? Some common reasons include cosmetic concerns, costs, even a lack of

reported benefit with hearing. For example, Dr. Kochkin's MarkeTrak surveys on hearing aid benefit often show little reported benefit. But research spanning the past seven years has consistently demonstrated that hearing aids

can provide significant patient benefit. As Grand River Hearing Centre's Audiologist Calvin Staples points out, there is a disconnect that should not exist. The treatment of hearing loss is better today than it has ever been and the resources are more plentiful. Staples believes the discrepancy may lie in one of 3 areas:

- (1) the assessment,
- (2) the choice of technology, or
- (3) the fitting of the device.

1. The assessment of hearing loss is critical in not only determining whether one needs a hearing aid, but also the most effective potential treatment plan. Staples notes that not all hearing assessments are equal and rarely does the public know the difference. An appropriate assessment needs to address communication needs in a variety of environments in order to provide the best treatment plan for the individual.
2. The hearing aid technology available today for the hearing impaired is far different from what was available even 5 years ago. Hearing aids can now provide signals that are beneficial to the tinnitus patient (ringing in the ears), shift frequencies

from inaudible regions to audible hearing, help to control background noise, and even provide wireless connectivity to devices such as cell phones, iPads, and televisions. The clinician needs to know hearing aid technology very well in order to fully achieve optimal performance.

3. A hearing aid must be measured with Real-Ear equipment in order to fully verify hearing aid performance. This equipment involves the use of a small probe tube inside the ear canal that allows the hearing aid to be measured to the patient's ear canal size and ensures that, at the level of the eardrum, the signal is fully audible. The benefit of this measurement is that the clinician can determine how much amplification the patient is actually receiving; the results can often reveal too little or periodically too much. The use of this small probe tube ensures there is never any further damage to the patient's hearing and establishes long-term goals for hearing aid success.

Staples believes the goal for any clinician should be to positively alter their patient's quality of life by restoring effective communication. This can be accomplished with proper treatment plans focused on using the various technological tools in use today. If more patients can receive significant benefit from positive intervention, cases of delayed treatment may decrease, as might the number of memory and mental health issues.

## GRAND RIVER HEARING CENTRE

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