Hearing Loss and Older Adults

Hearing loss is one of the most common conditions affecting older adults. One in three people older than 60 and half of those older than 85 have hearing loss. Hearing problems can make it hard to understand and follow a doctor’s advice, to respond to warnings, and to hear doorbells and alarms. They can also make it hard to enjoy talking with friends and family. All of this can be frustrating, embarrassing, and even dangerous.

Do I have a hearing problem?

Ask yourself the following questions. If you answer “yes” to three or more of these questions, you could have a hearing problem and may need to have your hearing checked by a doctor.

- Do I have a problem hearing on the telephone?
- Do I have trouble hearing when there is noise in the background?
- Is it hard for me to follow a conversation when two or more people talk at once?
- Do I have to strain to understand a conversation?
- Do many people I talk to seem to mumble (or not speak clearly)?
- Do I misunderstand what others are saying and respond inappropriately?
- Do I often ask people to repeat themselves?
- Do I have trouble understanding the speech of women and children?
- Do people complain that I turn the TV volume up too high?
- Do I hear a ringing, roaring, or hissing sound a lot?
- Do some sounds seem too loud?

What should I do if I think I have a hearing problem?

Hearing problems are serious. The most important thing you can do if you think you have a hearing problem is to go see a doctor. Your doctor may refer you to an otolaryngologist (oh-toe-lair-in-GAH-luh-jist), a doctor who specializes in the ear, nose, and throat. An otolaryngologist will try to find out why you have a hearing loss and offer treatment options. He or she may also refer you to another hearing professional, an audiologist (aw-dee-AH-luh-jist). An audiologist can measure your hearing. Sometimes otolaryngologists and audiologists work together to find the treatment that is right for you. If you need a hearing aid,
an audiologist can help you find the right one. Although children must be seen by a physician before they can be fitted for a hearing aid, adults do not always see a physician. Adults who do not see a physician before getting a hearing aid must sign a waiver.

**Why am I losing my hearing?**

Hearing loss happens for many reasons. Some people lose their hearing slowly as they age. This condition is known as **presbycusis** (prez-buh-KYOO-sis). Doctors do not know why presbycusis happens, but it seems to run in families. Another reason for hearing loss may be exposure to too much loud noise. This condition is known as **noise-induced hearing loss**. Many construction workers, farmers, musicians, airport workers, tree cutters, and people in the armed forces have hearing problems because of too much exposure to loud noise. Sometimes loud noise can cause a ringing, hissing, or roaring sound in the ears, called **tinnitus** (tin-NY-tus).

Hearing loss can also be caused by a virus or bacteria, heart conditions or stroke, head injuries, tumors, and certain medicines.

**What treatments and devices can improve my hearing?**

Your treatment will depend on your hearing problem, so some treatments will work better for you than others. Here are the most common ones:

- **Hearing aids** are tiny instruments you wear in or behind your ear. They make sounds louder. Things sound different when you wear a hearing aid, but an audiologist can help you get used to it.

  To find the hearing aid that works best for you, you may have to try more than one. Ask your audiologist whether you can have a trial period with a few different hearing aids. You and your audiologist can work together until you are comfortable.

- **Personal listening systems** help you hear what you want to hear while eliminating or lowering other noises around you. Some, called auditory training systems and loop systems, make it easier for you to hear someone in a crowded room or group setting. Others, such as FM systems and personal amplifiers, are better for one-on-one conversations.

- **TV listening systems** help you listen to the television or the radio without being bothered by other noises around you. These systems can be used with or without hearing aids and do not require you to use a very high volume.

- **Direct audio input hearing aids** are hearing aids that can be plugged into TVs, stereos, microphones, auditory trainers, and personal FM systems to help you hear better.

- **Telephone amplifying devices**. Some telephones are made to work with certain hearing aids. If your hearing aid has a “T” switch, you can ask your telephone company about getting a phone with an amplifying coil (T-coil). If your hearing aid is in
the “T” position, this coil is activated when you pick up the phone. It allows you to listen at a comfortable volume and helps lessen background noise. You can also buy a special type of telephone receiver and other devices to make sounds louder on the phone.

- **Mobile phone amplifying devices.** To help people who use a T-coil hear better on mobile phones, an amplifying device called a loopset is available. The wire loop goes around your neck and connects to the mobile phone. The loop transmits speech from the phone to the hearing aid in your ear. It also helps get rid of background noise to make it easier to talk in a noisy environment.

- **Auditorium-type assistive listening systems.** Many auditoriums, movie theaters, churches, synagogues, and other public places are equipped with special sound systems for people with hearing loss. These systems send sounds directly to your ears to help you hear better. Some can be used with a hearing aid and others without.

- **Cochlear (COKE-lee-ur) implants** have three parts: a headpiece, a speech processor, and a receiver. The headpiece includes a microphone and a transmitter. It is worn just behind the ear where it picks up sound and sends it to the speech processor, a beeper-sized device that can fit in your pocket or on a belt. The speech processor converts the sound into a special signal that is sent to the receiver. The receiver, a small round disc about the size of a quarter that a surgeon places under the skin behind one ear, sends a sound signal to the brain. Cochlear implants are most often used with young children born with hearing loss. However, older adults with profound or severe hearing loss are beginning to receive these implants more often.

- **Lip reading or speech reading** is another option. People who do this pay close attention to others when they talk. They watch how the mouth and the body move when someone is talking. Special trainers can help you learn how to lip read or speech read.

**Can my friends and family help me?**

Yes. You and your family can work together to make hearing easier. Here are some things you can do:

- Tell your friends and family about your hearing loss. They need to know that hearing is hard for you. The more you tell the people you spend time with, the more they can help you.

- Ask your friends and family to face you when they talk so that you can see their faces. If you watch their faces move and see their expressions, it may help you to understand them better.

- Ask people to speak louder, but not shout. Tell them they do not have to talk slowly, just more clearly.

- Turn off the TV or the radio if it does not have to be on.
• Be aware of noise around you that can make hearing more difficult. When you go to a restaurant, do not sit near the kitchen or near a band playing music. Background noise makes it hard to hear people talk.

Working together to hear better may be tough on everyone for a while. It will take time for you to get used to watching people as they talk and for people to get used to speaking louder and more clearly. Be patient and continue to work together. Hearing better is worth the effort.

Where can I find more information?

If you have any other questions, or to order a large-print version of this factsheet, call the NIDCD Information Clearinghouse. Here are several ways to contact us:

Toll-free: (800) 241–1044
Toll-free TTY: (800) 241–1055
1 Communication Avenue, Bethesda, MD 20892–3456
E-mail: nidcdinfo@nidcd.nih.gov
Internet: www.nidcd.nih.gov

Here are several other groups you can contact for more information on hearing loss and older adults:

**Alexander Graham Bell Association for the Deaf and Hard of Hearing**
3417 Volta Place, NW.
Washington, DC 20007
Voice: (202) 337–5220
TTY: (202) 337–5220
Toll-free: (800) HEAR-KID
Fax: (202) 337–8314
E-mail: info@agbell.org
Internet: www.agbell.org

**American Academy of Audiology**
8300 Greensboro Drive, Suite 750
McLean, VA 22102
Voice: (703) 790–8466
Toll-free: (800) AAA–2336
Hours: 8 a.m.-5:30 p.m., Eastern time
Fax: (703) 790–8631
Internet: www.audiology.org
American Academy of Otolaryngology - Head and Neck Surgery
One Prince Street
Alexandria, VA 22314
Voice: (703) 519–1589
TTY: (703) 519–1585
Fax: (703) 299–1125
E-mail: webmaster@ent.org
Internet: www.entnet.org

American Speech-Language-Hearing Association
10801 Rockville Pike
Rockville, MD 20852
Voice: (301) 897–3279
TTY: (301) 897–0157
Toll-free: (800) 638–8255
Hours: 8:30 a.m.–5 p.m., Eastern time
Fax: (301) 897–7355
E-mail: actioncenter@asha.org
Internet: www.asha.org

American Tinnitus Association
P.O. Box 5
Portland, OR 97207
Voice: (503) 248–9985
TTY: (800) 634–8978
Toll-free: (800) 634–8978
Hours: 8:30 a.m.–5 p.m., Pacific time
Fax: (503) 248–0024
E-mail: tinnitus@ata.org
Internet: www.ata.org

League for the Hard of Hearing
71 West 23rd Street
New York, NY 10010
Voice: (917) 305–7700
TTY: (917) 305–7999
Fax: (917) 305–7888
E-mail: postmaster@lhh.org
Internet: www.lhh.org

National Institute on Aging Information Center
P.O. Box 8057
Gaithersburg, MD 20898–8057
Voice: (800) 222–2225
TTY: (800) 222–4225
Fax: (301) 589–3014
E-mail: niaic@jbs1.com
Internet: www.aginginfo.nia.nih.gov

Self Help for Hard of Hearing People, Inc.
7910 Woodmont Avenue, Suite 1200
Bethesda, MD 20814
Voice: (301) 657–2248
TTY: (301) 657–2249
Fax: (301) 913–9413
E-mail: national@shhh.org
Internet: www.shhh.org

WISE EARS! Health Education Campaign
31 Center Drive, Suite 3C35
Bethesda, MD 20892–2320
Voice: (301) 496–7243
TTY: (301) 402–0252
Fax: (301) 402–0018
Internet: www.nidcd.nih.gov

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