Hearing Aid Buying Guide

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Section 1: Why Hearing Matters
Making Sense of the Problem

Five senses make a vibrant life.

Our five senses let us experience the world. That world can be our home, family, friends, local community, or places across the globe. In each of these places and with all of these people, our experiences with the world are precious. Making the most of them is what is essential.

So, can you imagine experiencing less than 100 percent of your world? Maybe you’ve had poor vision that you’ve corrected with glasses or a trip to the allergist has brought back a better sense of smell. Is the sense and importance of hearing any different? Why would anyone ignore a diminished sense of hearing?

It could be that good hearing is simply underappreciated. Things like hearing that occur automatically are often taken for granted. But hearing needs to be appreciated, too. If it is not, we stand to lose touch with our environment. That loss can limit how we are alerted to danger, appreciate beautiful music, and live our lives.

In addition to hearing being underappreciated, the loss of hearing is a relatively invisible condition. In the early stages, it can simply go unnoticed. Even when it is noticed, sometimes it is not taken as seriously as when our other senses become diminished.

Despite these challenges, maintaining a vibrant attitude and full participation in life requires keeping all five senses in order, as much and for as long as possible. And some of that is up to you. Yes, we all age and with that can come hearing loss, but our environment plays a big role, too. It’s important to recognize the role of both aging and the environment in order to appreciate the changes in hearing loss, prevention, and management.

The changing face of hearing loss.

According to the National Institute on Deafness and Other Communication Disorders (NIDCD), hearing loss is one of the most common conditions affecting older adults. Their research has found that 8.5 percent of adults between the ages of 55 to 64 have disabling hearing loss, as do nearly 25 percent of those between 65 and 74, and 50 percent of those 75 and older\(^1\). With ever-increasing life expectancy, an ever-growing percentage of the population will have to identify, deal with, or live with hearing loss.

Case in point: the U.S. Census Bureau statistics reveal that there are more baby boomers than people over 65 in this country, 25 percent vs. 12.9 percent, respectively. Still knee-deep in
careers, the majority of people 45-64 will notice their hearing loss while they are working. Not being able to hear well while on the job can be more than a bother—it may negatively affect earning and job retention potential\textsuperscript{ii}.

Younger people are not immune to hearing loss, either. A study by Sivantos, Inc. revealed that teenagers 13-19 years old across the U.S. are experiencing potential signs of hearing loss. The most frequently-cited culprit was unprotected exposure to noise.\textsuperscript{iii}

The good news—no matter your age group, there are better options for improving your hearing than ever before.
**Research Sheds Light on the Consequences**

The National Council on Aging is one organization that has studied the consequences of hearing loss. Their studies indicated that when a person can’t hear or understand others at work, or in family or social settings, they tend to get frustrated and embarrassed—even angry—and lose self-confidence. Poor communication can cause misunderstandings. As the ability to communicate suffers, so can the ability to work well and enjoy the company of others.

People in the teaching profession, the ministry, and others whose jobs depend on personal interaction may have to retire earlier than planned or desired. And with the potential for increased isolation, the emotional well-being of those with hearing loss could suffer as well.

Research also shows that hearing loss does not have to be very bad to cause people to become less independent. For example, you may not be confident meeting with a banker or doctor on your own. Because of safety concerns, independence can be further infringed upon when you can’t hear a doorbell, phone, or an alarm. Hearing loss can also cause dizziness and balance problems that can make you feel less stable and secure.

**Times are changing and so are hearing technologies.**

While hearing loss is becoming more common, and the consequences can be challenging, hearing technologies are rapidly improving. Preserving your sense of sound is getting easier with the current generation of hearing aids and assistive technologies. Forget about the large, clunky “banana”-shaped devices you may remember your parents or grandparents wearing. Today’s hearing aids contain digital signal processing and come packaged in discreet, comfortable styles. In fact, the largest component in many of these miniature devices is the tiny battery!

Other new, complimentary accessories help improve hearing in different situations like talking on your home phone, streaming content from your smartphone or tablet, and watching television. These technologies can help people like you continue to enjoy engaged and independent lives.
Section 2: The Causes & Prevention of Hearing Loss
Hear Today — But Will It Be Gone Tomorrow?

A variety of causes can be attributed to hearing loss, and some occur in combination with one another. The top two causes, by far, are noise and age. Learning more about these causes is important, as there may still be something you can do about them.

Noise.

NIDCD estimates that of the more than 30 million Americans with hearing loss, about a third can at least partially blame exposure to noise-induced damage. So how does loud noise actually hurt our hearing?

Your inner ear’s tiny hair cells are what help deliver sound to the brain. Loud noise damages those tiny hair cells, disrupting communication between them and your brain. Once damaged, hair cells do not grow back and the result is noise-induced hearing loss (NIHL).

Food blenders, lawn mowers, and MP3 players all have decibel (dB) ratings capable of entering the danger zone of 85-90 dB. Movie theaters are routinely measured at 120 dB, and ironically so are health clubs. A noise range below 70 dB is considered safer. (See chart on following page.)

Like sun worshipping without sunscreen, attending rock concerts without ear protection was always a bad idea, but used to be the norm. Today, many adults wear sunscreen daily and almost all of us slather it on ourselves at the beach. Yet too many of us are still going to clubs and concerts, or running power tools and lawn mowers, without any ear protection.

The sources of loud noise don’t just come from recreational activities, either. Hearing loss is one of the most common workplace injuries, according to the Centers for Disease Control. High-risk workplaces include factories, construction, and the military.

Noise-induced hearing loss can come from exposure to loud noise for long periods or one extremely loud sound, such as an explosion. Either way, sudden or gradual, permanent hearing loss called acoustic trauma can result. However, while noises like these contribute to hearing loss they are certainly not the only causes.

Aging.

Presbycusis is the technical term health professionals use to describe gradual hearing loss due to aging. This type of hearing loss cannot be corrected with medication or surgery but can generally be helped by hearing aids.
The loss is usually gradual and subtle. It becomes apparent when you notice (or admit) that you turn up the volume on the TV more than anyone else, often ask people to repeat themselves, or have trouble communicating with others at large gatherings.

Other causes.

While noise and age are the most common causes of hearing loss, some people are simply born with an unusually narrow ear canal that diminishes hearing ability. Hearing loss can also be a result of medical conditions ranging from allergies and ear infections to tumors, diabetes, cardiovascular disease, or a disorder of the inner ear called Meniere’s disease, which affects balance and hearing. In some instances, it can come about as a result of using ototoxic (literally “ear poisoning”) treatments, such as certain antibiotics, chemotherapy, or radiation. Something as traumatic as a head injury or as simple as too much fluid or wax can cause hearing loss.
The Sound Effects of Common Noises

Decibels are like degrees on a thermometer. As temperature increases, so does the number of degrees. As the volume of sound increases, so does the number of decibels.

<table>
<thead>
<tr>
<th>Degree of Hearing Loss</th>
<th>Hearing Loss Range (dB HL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>-10 to 15</td>
</tr>
<tr>
<td>Slight</td>
<td>16 to 25</td>
</tr>
<tr>
<td>Mild</td>
<td>26 to 40</td>
</tr>
<tr>
<td>Moderate</td>
<td>41 to 55</td>
</tr>
<tr>
<td>Moderately Severe</td>
<td>56 to 70</td>
</tr>
<tr>
<td>Severe</td>
<td>71 to 90</td>
</tr>
<tr>
<td>Profound</td>
<td>91+</td>
</tr>
</tbody>
</table>
Take a look at how various levels of sound intensity can affect your hearing.

<table>
<thead>
<tr>
<th>Sound</th>
<th>Noise Level (dB)</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jet Engines (near)</td>
<td>140</td>
<td></td>
</tr>
<tr>
<td>Shotgun Firing, Jet Takeoff (100-200 ft.)</td>
<td>130</td>
<td></td>
</tr>
<tr>
<td>Rock Concerts (varies)</td>
<td>110–140</td>
<td>Threshold of pain begins around 125 dB</td>
</tr>
<tr>
<td>Discotheque/Boom Box, Thunderclap (near)</td>
<td>120</td>
<td>Threshold of sensation begins around 120 dB</td>
</tr>
<tr>
<td>Symphony Orchestra, Power Saw (chainsaw), Pneumatic Drill/Jackhammer</td>
<td>110</td>
<td>Regular exposure to sound over 100 dB of more than one minute risks permanent hearing loss</td>
</tr>
<tr>
<td>Snowmobile</td>
<td>105</td>
<td></td>
</tr>
<tr>
<td>Electric Furnace Area, Garbage Truck/Cement Mixer</td>
<td>100</td>
<td>No more than 15 minutes of unprotected exposure recommended for sounds between 90–100 dB</td>
</tr>
<tr>
<td>Farm Tractor, Newspaper Press</td>
<td>97–98</td>
<td></td>
</tr>
<tr>
<td>Subway, Motorcycle (25 ft.)</td>
<td>88</td>
<td>Very annoying</td>
</tr>
<tr>
<td>Lawnmower, Food Blender, Recreational Vehicles, TV</td>
<td>85–90</td>
<td>85 dB is the level at which hearing damage (8 hrs.) begins</td>
</tr>
<tr>
<td>70–90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diesel Truck (40 mph, 50 ft.)</td>
<td>84</td>
<td>Annoying; interferes with conversation; constant exposure may cause damage</td>
</tr>
<tr>
<td>Average City Traffic, Garbage Disposal</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>Washing Machine, Dishwasher</td>
<td>75–78</td>
<td></td>
</tr>
<tr>
<td>Vacuum Cleaner, Hair Dryer</td>
<td>70</td>
<td>Intrusive; interferes with telephone conversation</td>
</tr>
<tr>
<td>Normal Conversation</td>
<td>50–65</td>
<td>Comfortable hearing levels are less than 60 dB</td>
</tr>
<tr>
<td>Quiet Office</td>
<td>50–60</td>
<td></td>
</tr>
<tr>
<td>Refrigerator Humming</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>Whisper, Broadcasting Studio</td>
<td>30</td>
<td>Very quiet</td>
</tr>
<tr>
<td>Rustling Leaves</td>
<td>20</td>
<td>Just audible</td>
</tr>
<tr>
<td>Normal Breathing</td>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
**Prevention is the Best Cure**

Sometimes you don’t know what you’ve got ‘til it’s gone. Being aware of the value of our hearing is becoming more important as we age individually and as a country. Today, nearly 40 million Americans have some degree of hearing loss. By 2030, without much growth in population expected\(^\text{vii}\), more than 50 million of us will be dealing with hearing loss.\(^\text{viii}\)

As one of our most important senses, hearing well can significantly affect relationships and careers. Being a participating member of your community, social organizations, families, and friends can depend in large part on your hearing. And your sense of independence and self-esteem is stronger when you can hear well and communicate easily.

If the time comes that you notice it is becoming difficult to hear conversations at the other end of the picnic table, colleagues at the opposite end of the conference room, or a grandchild at the other end of the phone, take action. The first step is admitting you might have a hearing problem, but for many that is a very large and challenging first step.

**Limit exposure to noise.**

One great way to approach prevention is to think about your lifestyle and make adjustments. Do you blow your hair dry every day? That appliance is near your ears for an extended time. Is your blow dryer a very old model? Look into buying a new one that is quieter. Even if you buy a new model consider wearing earplugs when you dry your hair.

Sometimes our lifestyle can even make loud background noise worse, like with our personal music. If the subway is loud, we tend to plug in and turn up the volume to drown out the noise. We also tend to do the same to block out the loudspeaker music at the gym. The problem is that by doing these things, we are just bringing loud noise even closer to our delicate ears. So remember, if another person can hear your music, or if someone approaches you and you can’t understand or hear them without removing your ear buds, it’s time to turn the volume down and protect your hearing.

**Use protection.**

The solution is usually cheap and easy — foam earplugs are available in any drug or hardware store, they only cost a couple of dollars, and they reduce decibel levels by 20 or 30 dB. Many smartphones now have applications that measure decibels so you know the noise levels at a concert, a bar, or a club. The same goes for hobbies like woodworking and housework like vacuuming. If the measurement is over 85 dB, you are putting yourself in danger of hearing damage. And if you’re a musician yourself, or regularly find yourself at a shooting range, consider custom-made hearing protection that kicks up your protection several notches.
When you don’t have to be alert to sounds around you, like on a plane, use noise-cancelling headphones or ear buds. They can eliminate the background noise, so you don’t need to listen to music on such a high volume since you won’t be fighting background noise. Isolating ear buds were designed for personal digital entertainment players to shelter music lovers’ hearing. They plug up the ear canal, blocking sounds from the environment, and the music plays on at a lower volume.

**Maintain good general health.**

Perhaps it seems strange, but it is as important to your ears as to the rest of your body that you don’t smoke, eat healthy foods, keep your weight down, and exercise. Take your vitamins, too. A University of Michigan study found A, C, E and magnesium to be positive influences on hearing\[^x\].

Blame it on the ear’s greedy blood circulation and oxygen needs, but all those good habits help prevent diabetes, which is thought to contribute to hearing loss. Other health conditions — anything that impacts blood vessels and nerve cells—may affect hearing. Controlling high blood pressure, for example, is thought to be a way to prevent much of the hearing loss that is associated with age.

**Keep earwax under control.**

Earwax is not bad. It is, in fact, a natural antibiotic. However, too much earwax can reduce your hearing ability, so this is a good thing to have checked when you see your doctor or if you have some mild trouble hearing. Do not remove it yourself, as you risk injuring your ears (see below). Your primary care physician may refer you to a hearing care professional if your earwax is really bad. They have the most specialized equipment for the safe extraction of earwax. When the wax is gone, you can gain an extra 15 dB of hearing.

**Step away from the cotton swabs.**

The ear canal is only about an inch long, so you don’t have to go far to cause damage. People scratch the lining of the canal and even puncture their own eardrums with cotton swabs. Let water run into your ears in the shower, and tip your head to drain it out. That should be enough to maintain the earwax you need and avoid removing too much.

**Stave off and treat infections.**

An untreated infection can cause permanent hearing loss. Whether you get swimmer’s ear or something more serious, pay attention to pressure, pain, or dizziness and seek medical care. Treatment can be more involved, but you may just have to take antibiotics.
Have your hearing tested.

Annual hearing tests provide a baseline and then progress reports. As with cholesterol tests, we can be more careful if our numbers have slipped from one year to the next. Ask your primary care physician at your next wellness visit about having a hearing exam.
Before You Need a Hearing Aid

You can do many things if you have slight or borderline hearing loss. Employ these tips in your daily life and continue to avoid loud noise in the following environments:

At home

✓ Even though the noise from most household appliances won’t hurt you, reduce noise wherever you can. When buying appliances, choose low-noise models of washers, dryers, and dishwashers.
✓ If you are renovating, choose quieter materials (e.g., wood rather than tile for the floor).
✓ If you can’t hear your doorbell, buy an additional doorbell chime to put in another part of the house.

At the office

✓ Arrive early for meetings so you can choose the best seat, whether that is in the middle of the table rather than at an end, or so your back is to a wall.
✓ Request the minutes after each meeting.
✓ Schedule one-on-one meetings instead of larger ones.
✓ Don’t hide your mild hearing loss and risk being seen as disinterested.

At a restaurant

✓ Request a quiet table when making reservations, in case it’s crowded when you arrive.
✓ Sit against a wall rather than in the center—a corner is even better.
✓ Face companions directly for best sound reception.
✓ Be loyal to restaurants where you hear well. The managers will be more likely to honor your requests for a certain table or section.
✓ Eat a little early or late to avoid prime-time crowds and all their noise.
✓ Read restaurant reviews that incorporate noise levels.

On a plane

✓ Take a decongestant about an hour before takeoff.
✓ Try to sit up front far from the engines.
✓ Ask the person seated next to you to let you know if an announcement you need to hear comes on, and to tell you what it was if you missed it.
✓ Don’t drown out jet engine noise with even louder music.
✓ Use noise-cancelling headphones or earplugs.
Section 3: Managing Hearing Loss
Listening and Learning

Diagnosis doesn’t happen automatically in today’s healthcare settings, and primary care physicians generally don’t screen for hearing loss. There is a tendency to focus on one problem per short appointment, and mild hearing loss is not likely to show up in a face-to-face chat in a quiet exam room. Whether a hearing loss concern is brought up to a primary care physician or you seek out a qualified hearing care professional, proper evaluation is an important first step. Taking that first step can be daunting, so here is some insight into the screening and testing process.

Screening vs. testing.

Screening is a preliminary step taken to determine if testing is needed. The pure tone test is the most common screening process. This test is administered with a small, portable device and headphones. Your reactions to sounds determine the faintest tones you can hear at selected pitches (frequencies), from low to high. Based on these results, the need for testing can be determined.

Self-testing.

Qualified hearing care professionals are your best bet if you want to accurately assess your hearing, but there are many lists of questions that you can find online and in books that may help you self-identify a hearing loss. You might want to try our Ten Ways to Recognize Hearing Loss further along in this guide to see if you should have a professional hearing test.

Testing by a professional.

If your self-examination indicates hearing loss, you should consider getting tested professionally. Hearing testing is an in-depth assessment of the type and extent of hearing loss. Hearing tests may vary, but almost all of them begin with a hearing care professional taking a case history to gather important information before testing starts. It involves many questions about your health, how you spend your time, and how hearing loss is affecting you. After the case history, the test administrator will inspect your external auditory canal visually for wax buildup, infections, or abnormalities.

The gold standard of hearing testing involves a sound-controlled booth. During testing, you wear earphones and push a button or raise a hand to indicate when you hear a tone or word. Other tests will check your eardrum and middle ear for disorders, as well as assess how well you hear different frequencies.
**Who You Should See About Hearing Loss**

Regardless of which tests you undergo, you should know the following things when your appointment is over:

- The extent of hearing loss
- The type of hearing loss
- If you have hearing loss in both ears
- Specific recommendations based on your test results

**Who are hearing care professionals?**

Different hearing care professionals serve different purposes, with some overlap. One thing is for sure—you need to rely on the services of a qualified professional to assess your hearing loss and assist you in your quest to be proactive about your hearing health.

The three types of hearing care professionals are otolaryngologists (more commonly known as ear, nose, and throat specialists), audiologists (AuD), and hearing instrument specialists (HIS).

**Otolaryngologists.**

Otolaryngologists (also known as ENTs) are physicians who have specialized residency and training in the medical conditions of the ear. While most do not fit hearing aids, many have audiologists or HIS on staff to test hearing and dispense hearing aids.

ENTs often treat patients with middle ear problems. You should also see an ENT or your primary care physician if you experience any of the following symptoms:

- Sudden and dramatic hearing loss
- Ear pain
- Ear odor
- Drainage
- Dizziness
- Hearing that is fading in and out
Audiologists and hearing instrument specialists.

The terminology for different hearing care professionals can be confusing, and it’s often hard to know who does what from their title. Audiologists are trained to determine the type and degree of hearing loss. Based on an assessment provided by an audiologist, they may recommend a treatment program or a medical evaluation.

Hearing instrument specialists select, fit, and adjust hearing aids and other equipment used to improve upon or compensate for impaired hearing. They administer hearing tests only for the purpose of selecting and fitting a hearing aid.

Both AuDs and HIS also help patients with aural rehabilitation. This is extensive training and coaching that helps you learn to use your hearing aids. As part of the aural rehabilitation, they help patients develop strategies for hearing and communicating well in different settings and situations.

Both AuDs and HIS should counsel you on how to use your hearing aids and provide follow-up care, attention, and as many adjustments as you need. You should receive oral and written instructions on how to insert your hearing aids, how to adjust and care for them, and guidance to help your family adjust to your use of hearing aids.

Beyond skill and service, “good” professionals focus on being a hearing care professional rather than a seller of products. Whichever type of professional you choose, make sure you feel you are compatible. Hearing loss resolution can be a complicated process, and you may be working together for some time until everything is right. There will be future checkups and adjustments, so you want to make sure you are comfortable and confident in your professional.

For more information on the specific qualifications, credentials, and training for hearing care professionals, please visit the following websites:

- www.audiology.org
- www.ihsinfo.org

To find a hearing care professional in your area you can utilize the following (provided courtesy of HearingAids.com):

- By phone: 1-800-350-6093
- By email: Contact Us form on HearingAids.com website
Recognizing the Signs of Hearing Loss

Denying that you have hearing loss is not an option if you want to live a life that is enriched by all five of your senses. Many signs of hearing loss are fairly obvious—it’s admitting you have a problem that may be the toughest part.

Ten ways to recognize hearing loss.

The following questions will help you determine if you need to have your hearing evaluated by a professional.

1. Do you have a problem hearing over the telephone?  
   Yes  No

2. Do you have trouble following the conversation when two or more people are talking at the same time?  
   Yes  No

3. Do people complain that your turn the TV volume up too high?  
   Yes  No

4. Do you have to strain to understand conversation?  
   Yes  No

5. Do you have trouble hearing in a noisy background?  
   Yes  No

6. Do you find yourself asking people to repeat themselves?  
   Yes  No

7. Do many people you talk to seem to mumble or speak too softly?  
   Yes  No

8. Do you misunderstand what others are saying and respond inappropriately?  
   Yes  No

9. Do you have trouble understanding the speech of women and children?  
   Yes  No

10. Do people get annoyed because you misunderstand them?  
    Yes  No

If you answered "yes" to three or more of these questions, you may want to see a qualified hearing care professional for a hearing evaluation.

The material on this page is for general information only and is not intended for diagnostic or treatment purposes. A doctor or other healthcare professional must be consulted for diagnostic information and advice regarding treatment. Excerpt from NIH Publication No. 01-4913:  
Section 4: Technology & Other Resources
Hearing Aids

About two-thirds of those with hearing loss cite financial constraints as a core reason they do not get hearing aids. For most consumers, improving one’s hearing is an entirely or mostly out-of-pocket expense.

Although hearing aids do not “cure” hearing loss or restore hearing 100 percent, they can be well worth the money and time it takes to adjust to them. According to one survey:

- 91 percent of wearers were satisfied with hearing aids obtained within the last year
- 77 percent were satisfied with hearing aids obtained 2-5 years ago
- 74 percent were satisfied with hearing aids obtained 6 or more years ago

As we mentioned earlier, a comprehensive hearing test can evaluate your hearing needs and determine if the hearing loss needs medical attention. Hearing care professionals will make recommendations for hearing aids if your hearing loss is not medically treatable.

Hearing aids are often the simplest solution, but many people may avoid them due to cost, confusion over which brands are best, or the perception that they may make them look older. It is estimated that less than 20 percent of people who could benefit from hearing aids ever get them. Before dismissing hearing aids, it may help to know more about how they work and how they may benefit you.

How they work.

Hearing aids work by picking up sound waves with a microphone, changing weaker sounds into louder sounds, modifying the sound signals in other ways, and delivering them to the ear through a tiny speaker. A small battery provides the power. The newest designs are like tiny computers that automatically adjust the hearing aid for you in different listening environments.

Today, almost all hearing aids are digital. Digital technology is far superior to its predecessor, analog technology. Digital allows for better programming, and makes it possible to provide wearers with advanced features, such as feedback control (the squealing often heard with analog devices), tinnitus (ringing or buzzing in the ear with no outside source) therapy, and wind suppression. What you choose depends on your type of hearing loss, lifestyle, and other needs and preferences, such as your budget and dexterity with those tiny batteries. A good hearing care professional can help explain all of your options.

Types of hearing aids.

Hearing aid types are defined by three initials that indicate where a hearing aid is worn:
**BTE** (behind-the-ear): These have earpieces that hook over the top of the ear and the body sits in the crease between your ear and skull. This type is often easier to handle than smaller devices, and is usually chosen for people who have problems with fine motor skills for that reason. They may also be the best option to contain the necessary amplification for people with severe-to-profound hearing loss.

**RIC** (receiver-in-canal): These have a wire inside a thin plastic tube that connects to an ear bud inside your ear canal, leaving the canal open for more natural sound. These “mini BTEs” are less visible than most BTEs and may be the best choice to combine discretion and comfort.

**ITE** (in-the-ear): Fitted into the ear canal, these are small but somewhat visible if someone is looking directly into your ear. Despite their small size, they are easy to insert and remove.

**CIC** and **IIC** (completely-in-the-canal and invisible-in-the-canal): The smallest variations of an ITE, these are barely visible or cannot be seen at all. However, some are so tiny that they may not be the best option if you have dexterity or vision problems, and they may not be an option if your hearing loss is more than moderate.

No matter which type of hearing aid you choose, it is highly recommended that you buy them as a pair, rather than getting just one. We naturally hear binaurally (using two ears) and so hearing aids work best when they mimic normal, dual-input hearing.

**Aftercare for hearing aids.**

It takes time to adjust to new hearing aids. Follow-up visits are normally included in the price of a hearing aid (the particulars should be spelled out in your purchase agreement).

Aftercare is important because you will need to figure out how to handle the hearing aids: inserting and removing them, replacing batteries, and generally getting comfortable with them. Plus, hearing things you didn’t realize you were missing might seem somewhat overwhelming. You will wear your hearing aids in different settings — in your own house, at lunch with a friend in a noisy restaurant, on the phone, and while watching a movie. It can help to have a professional available for questions and technical support as the need arises. You can expect to return to your hearing care professional for follow-up visits over the course of the first year.
What to Ask about a New Technology

You can always search around the Internet to find something new in hearing technology, but read with caution. Here are some questions to ask about new products. Many of the same questions can be applied to new treatment options, as well:

- What kind of hearing loss is this best suited for?
- Whose lifestyle would best be supported by this?
- Can you connect me to someone who is using this new technology?
- Are there more established products or services that provide close to the same end result?
- Can it cause any harm?
- Are there side effects?
- Has this been approved by a regulating federal agency?
- Has the research been published?
- Does insurance cover or other financial aid option support it?
- Is there a guarantee?
- What is the return policy?
- Is there a restocking fee or any other hidden fees?
## Common Misunderstandings about Hearing and Hearing Aids

<table>
<thead>
<tr>
<th>A normal part of aging.</th>
<th>I'll look so old in hearing aids.</th>
</tr>
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<td>But hearing loss is more apparent than hearing aids. If you have been missing all the sounds of life for some time, your brain will need time to retrain to hear all these sounds again.</td>
<td>Hearing loss is more noticeable than hearing aids if you don’t get the joke or answer questions inappropriately.</td>
</tr>
</tbody>
</table>

**The quality isn’t that great.**

| People who are wearing old technology may not be enjoying the high quality sound that newer digital technology offers. | My boss will think of me as old if I wear hearing aids. |
| If you don’t use hearing aids, they may think you are unresponsive or worse. |

**They are too complicated.**

| New devices are extremely automatic. | I’ll be considered handicapped. |
| Think of hearing aids like you think of eyeglasses. |

**It’s not me, it’s you. Everybody mumbles.**

| That is why it is often family members who first recognize the hearing loss. | I can’t afford them. |
| There may be financing options of which you are unaware. You owe it to yourself to find out. |
Hear the Costs — Don’t Fear Them

While hearing aids can be highly effective they often carry a high price. Today’s digital hearing aid prices range from approximately $1,000-$3,500 per hearing aid, depending on the level of technology selected, and the majority of people with hearing loss would benefit from wearing two devices. Don’t be scared off though! Some organizations and resources can help with the cost, as we will discuss shortly. But first, make sure to understand the structure of the cost and what is and is not included.

**Bundling v. Itemization.**

Knowing that you are getting what you pay for is important. The costs associated with hearing aids may come bundled and itemized. If the cost is bundled, it should include consultation, testing, and evaluation, along with the device, batteries and aural rehabilitation. When you are purchasing hearing aids, the provider should make it clear if the charges are bundled or itemized.

Compare prices and services among hearing care professionals and don’t be afraid to negotiate or ask about financing options. Keep in mind that you won’t know the full cost until you have had your hearing tested. To make a fair cost comparison, you will need to know the full specifications of the recommended hearing aid model.

**Batteries.**

All hearing aids run on batteries, and replacing them is an ongoing cost. Your hearing care professional will show you what type to use, how to insert them properly, and how to know when to change them. Batteries may only last a few days, but some last several weeks. Estimated cost is up to $100 per year per hearing aid.

Alternately, some hearing aids come with chargers and rechargeable batteries, which typically only need to be changed once a year.

**Warranties.**

Hearing aids have warranties from manufacturers, and while they can differ, they typically fall within these areas:

- **Repair Warranty:** Can be from 1 to 4 years and covers any breakdown or repair needed during the designated period.
- **Loss and Damage Warranty:** Can be from 1 to 4 years and covers one loss/replacement during the warranty period, and typically has a deductible of about $200.
• **Extended Warranty:** The above warranties can be extended beyond what is offered. For example, a 2-year warranty can be extended to 4 years for an added cost, but most manufacturers don't offer warranties beyond 4 years.\textsuperscript{x}

Some hearing care professionals may offer their own warranties, but this is not typical. One other possible way to cover your hearing aids is through your homeowners insurance. Some companies allow clients to put hearing aids on a special rider to their policy like jewelry, furs, and other valuables. This can be an inexpensive way to insure for loss.
Where You Can Turn for Help

Support groups and nonprofits.

Consumer groups such as the Hearing Loss Association of America provide lists of organizations that offer financial assistance with hearing aids and related devices. One good place to look is: www.hearingloss.org/support/financial.asp. Local government, social service agencies, and community service groups have funds to be used for this purpose too. The bottom line? It doesn’t hurt to explore many different avenues to get financial help, discounts, or devices.

The Lions Club International Foundation created a Hearing Aid Recycling Program (HARP) to help hearing aid users who can’t afford aids. Contact your local chapter for information or visit http://members.lionsclubs.org/EN/serve/hearing/index.php.

Sertoma, an organization whose primary focus is assisting the tens of millions of people with hearing health issues and educating the public, gives away mostly refurbished recycled hearing aids. Their program helps people in need with obtaining hearing aids. Clubs collect used hearing aids, have them refurbished and distribute them to people in need (sertoma.org/sharp). Some clubs provide free or reduced cost batteries in addition to hearing aids. Check their website to find out if there is a club location in your state.

For more information and other sources of financial assistance, you can also contact the following organizations and agencies:

- The Better Hearing Institute
- The Hearing Loss Association of America
- The International Hearing Society
- The National Institute on Deafness and Other Communication Disorders
- Your state Medicaid programs
- Your county department of social services

See the end of this guide for contact information for these and other organizations.

The law on your side.

Thanks to the Americans with Disabilities Act, many public places like entertainment venues (concert and lecture halls) and transit hubs (subway stations and airports) have installed assistive listening systems that stream audio directly into your hearing aids if they are equipped with telecoils (t-coils), or through individual receivers provided by the facility. Just look for this sign.
Tips for Improving Communication

Whether or not your friend or family member with hearing loss wears hearing aids, there are things you can do to make it easier for them to understand you.

- **Choose a quiet place to talk.** That might mean creating a quiet place by turning off the TV or a dishwasher. Background noise is a problem.
- **Face them directly.** It is easier for someone to understand you if they can see your face.
- **Don’t eat or chew gum while trying to communicate, or lean your chin on your hands.** Keep your face in full view. People with hearing loss can pick up visual clues about what you are saying.
- **Sit or stand fairly close to each other, but not unnaturally close.** Sound travels and loses volume with distance.
- **Speak at a reasonable pace.** You may need to slow down a little to give them time to process what you are saying.
- **Speak at a normal volume.** It’s better to be loud than quiet, but there is no need to shout. In fact, if someone is wearing hearing aids, shouting could hurt their ears and distort your mouth movements, making lip reading more difficult.
- **If they say that they didn’t understand something, do not brush it off as unimportant.** Repeat or rephrase whatever you just said.
- **Resist “translating” for other people who are speaking to them.** Especially important if the person with hearing loss is a spouse or family member, or you will just undermine their ability to manage on their own.
- **If there are children or grandchildren around, make sure they understand the situation and know how to communicate as well.** Even young children can understand that it helps Aunt Jennifer hear them better if they stand right in front of her and make eye contact.

Hearing loss tips to share with younger generations.

Whether you have adult children who are having children of their own or you have a teenager in the house, the most important messages to share with younger generations are the importance of hearing tests and prevention.

**Children**

- Check out the decibel level at your local movie theater and ask management to turn the sound down if the level is unsafe (see chart earlier in this guide), especially for children’s movies.
- Toys can be a source of noise that is too loud. Check out anything that makes noise, especially sirens. Manufacturers have this information and should share it if you ask.
Adolescents to young adults

- In a closed space like a car, keep volume reasonable.
- Provide and insist on use of earmuffs, protective headphones, or earplugs at loud events, when using power or lawn maintenance tools, and when around loud transportation like motorcycles or airplanes.
- Reinforce the message that smoking and secondhand smoke are to be avoided. Adolescents and teens (12-19) who are exposed to secondhand tobacco smoke have nearly double the risk of hearing loss as those who are not exposed.xii
- Advise the young people in your life to keep the volume down. NIHL can be prevented if noise reduction and protection become part of their lives from their earliest years.

Safety and care reminders.

Since hearing aid batteries contain toxic substances, it is very important to keep them away from children and pets. Think of them—and handle them—as you would any pill, patch, or medication. Dogs are known to be attracted to hearing aids, because when they are out of your ears but left on, they emit a whistling sound inaudible to humans that causes dogs to go after them.

When it comes to disposal, some states prohibit hearing aid batteries from being placed in the trash. Check with your local government or waste service provider for disposal or recycling information. Some hearing aid retailers accept them for recycling. Earth911.com has a searchable recycling directory.

Volunteering.

To volunteer for research studies on hearing loss, visit https://clinicaltrials.gov and search for the latest study options.
**For More Information**
For more information and sources of possible financial assistance, contact the following organizations and agencies:

- American Academy of Audiology [audiology.org](http://audiology.org)
- American Academy of Audiology Foundation [audiologyfoundation.org](http://audiologyfoundation.org)
- American Speech-Language-Hearing Association [asha.org](http://asha.org)
- Better Hearing Institute [betterhearing.org](http://betterhearing.org)
- Hearing Health Foundation [hearinghealthfoundation.org](http://hearinghealthfoundation.org)
- Healthy People 2020 [healthypeople.gov](http://healthypeople.gov)
- Hearing Education and Awareness for Rockers [hearnet.com](http://hearnet.com)
- International Hearing Society [hearingloss.org](http://hearingloss.org)
- Mayo Clinic [mayoclinic.com](http://mayoclinic.com)
- Medicare [medicare.gov](http://medicare.gov)
- Medicaid [medicaid.gov](http://medicaid.gov)
- The National Institutes on Deafness and other Communication Disorders [nidcd.nih.gov](http://nidcd.nih.gov)
- Veterans Administration [va.gov](http://va.gov)
References:

www.nidcd.nih.gov/health/statistics/Pages/quick.aspx


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https://usa.bestsoundtechnology.com/media/2014/10/siemens.teen_.hearing.study_key_.findings.fall2014.pdf


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http://www.census.gov/population/www/pop-profile/natproj.html


